

Form **990-PF**Department of the Treasury  
Internal Revenue Service**Return of Private Foundation**

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

OMB No 1545-0047

**2019**

Open to Public Inspection

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

**For calendar year 2019 or tax year beginning****, and ending**

Name of foundation <b>Thomas A &amp; Sharon K Ruder Foundation</b>			A Employer identification number <b>35-2063035</b>	
Number and street (or P O box number if mail is not delivered to street address) <b>PO BOX 2482</b>		Room/suite <b>SUITE C</b>	B Telephone number (see instructions) <b>(812) 479-5551</b>	
City or town, state or province, country, and ZIP or foreign postal code <b>EVANSVILLE IN 47728-0482</b>				
Foreign country name		Foreign province/state/county	Foreign postal code	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change				
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <b>ad</b> <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation				
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ► \$ <b>2,407,665</b>		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____		
F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>				

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	734,005			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	38,294	38,294		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	135,477			
	b Gross sales price for all assets on line 6a 717,167				
	7 Capital gain net income (from Part IV, line 2)		135,477		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	-17	-17			
12 Total. Add lines 1 through 11	907,759	173,754	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	75			
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	1,030			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	81			
	24 Total operating and administrative expenses. Add lines 13 through 23	1,186	0	0	0
	25 Contributions, gifts, grants paid	90,700			90,700
26 Total expenses and disbursements. Add lines 24 and 25	91,886	0	0	90,700	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	815,873				
b Net investment income (if negative, enter -0-)		173,754			
c Adjusted net income (if negative, enter -0-)			0		

For Paperwork Reduction Act Notice, see instructions.

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Form **990-PF** (2019)

JFK

SCANNED APR 16 2021 L-066-D

Part II Balance Sheets		Beginning of year	End of year	
			(a) Book Value	(b) Book Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	3,964	901	901
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	1,166,471	1,985,993	2,392,559
	c Investments—corporate bonds (attach schedule)	9,930	9,930	14,205
Liabilities	11 Investments—land, buildings, and equipment basis ▶			
	Less: accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ 1,994			
	Less: accumulated depreciation (attach schedule) ▶ 1,994			
	15 Other assets (describe ▶ )			
	16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	1,180,365	1,996,824	2,407,665
	17 Accounts payable and accrued expenses			
	18 Grants payable			
Net Assets or Fund Balances	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ )			
	23 Total liabilities (add lines 17 through 22)	0	0	
	Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. <input type="checkbox"/>			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. <input checked="" type="checkbox"/>			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg, and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds	1,180,365	1,996,824	
	29 Total net assets or fund balances (see instructions)	1,180,365	1,996,824	
	30 Total liabilities and net assets/fund balances (see instructions)	1,180,365	1,996,824	

## Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	1,180,365
2 Enter amount from Part I, line 27a	2	815,873
3 Other increases not included in line 2 (itemize) ▶ prior year reported \$579 plus \$7.00 rounding error	3	586
4 Add lines 1, 2, and 3	4	1,996,824
5 Decreases not included in line 2 (itemize) ▶	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	6	1,996,824

**Part IV Capital Gains and Losses for Tax on Investment Income**

a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, 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)
<b>1a</b>	See Attached Statement			
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b>	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	<b>2</b>	135,477
<b>3</b>	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 }	<b>3</b>	33,657

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2018	73,970	1,320,714	0.056008
2017	56,970	1,232,262	0.046232
2016	59,333	984,224	0.060284
2015	42,750	961,204	0.044475
2014	42,576	915,057	0.046528

<b>2</b>	Total of line 1, column (d)	<b>2</b>	0.253527
<b>3</b>	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	0.050705
<b>4</b>	Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	<b>4</b>	1,751,438
<b>5</b>	Multiply line 4 by line 3	<b>5</b>	88,807
<b>6</b>	Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	1,738
<b>7</b>	Add lines 5 and 6	<b>7</b>	90,545
<b>8</b>	Enter qualifying distributions from Part XII, line 4 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 Part VI instructions	<b>8</b>	90,700

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

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	<b>1</b>	1,738
<b>c</b>	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2	<b>3</b>	1,738
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	<b>4</b>	
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	<b>5</b>	1,738
<b>6</b>	Credits/Payments:		
<b>a</b>	2019 estimated tax payments and 2018 overpayment credited to 2019	<b>6a</b>	
<b>b</b>	Exempt foreign organizations—tax withheld at source	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868)	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld	<b>6d</b>	
<b>7</b>	Total credits and payments Add lines 6a through 6d	<b>7</b>	0
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	36
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	<b>9</b>	1,774
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	<b>10</b>	0
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2020 estimated tax</b> <b>Refunded</b>	<b>11</b>	0

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> 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?		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?		X
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <b>\$</b> _____ (2) On foundation managers <b>\$</b> _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <b>\$</b> _____		
<b>2</b> 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		
<b>3</b> 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		X
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	N/A	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i>		X
<b>6</b> 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?	X	
<b>7</b> 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	X	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered See instructions. IN		
<b>b</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 <i>General Instruction G</i> ? If "No," attach explanation	X	
<b>9</b> 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 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV		X
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	X	

**Part VII-A Statements Regarding Activities (continued)**

	Yes	No
<b>11</b> 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.		X
<b>12</b> 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.		X
<b>13</b> Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>▶</b> NONE	X	
<b>14</b> The books are in care of <b>▶</b> THOMAS A RUDER Telephone no <b>▶</b> (812) 479-5551 Located at <b>▶</b> 3000 E MORGAN AVE STE C EVANSVILLE IN ZIP+4 <b>▶</b> 47711-4484		
<b>15</b> 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 <b>▶</b> 15		
<b>16</b> At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country <b>▶</b>		X

**Part 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
<b>1a</b> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</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. Organizations relying on a current notice regarding disaster assistance, check here <b>▶</b> <input type="checkbox"/>	1b	N/A
<b>c</b> 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 2019?	1c	X
<b>2</b> 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)): <b>a</b> At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," list the years <b>▶</b> 20 15 , 20 16 , 20 17 , 20 18 <b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> 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.) <b>c</b> If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. <b>▶</b> 20 _____, 20 _____, 20 _____, 20 _____	2b	X
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>b</b> If "Yes," did it have excess business holdings in 2019 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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.)	3b	N/A
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
<b>b</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 2019?	4b	X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

<b>5a</b>	During the year, did the foundation pay or incur any amount to		Yes	No
	(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 in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		<b>5b</b>	N/A
	Organizations relying on a current notice regarding disaster assistance, check here	<input type="checkbox"/>		
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		<b>6b</b>	X
	If "Yes" to 6b, file Form 8870			
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?		<b>7b</b>	N/A
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
THOMAS A RUDER PO BOX 2482 EVANSVILLE, IN 47728	PRESIDENT 4 00	0		
SHARON K RUDER PO BOX 2482 EVANSVILLE, IN 47728	SECRETARY 2.00	0		
BRYAN A RUDER PO BOX 2075 EVANSVILLE, IN 47728	VICE PRESIDENT 2 00	0		
Robert C Kozsan PO BOX 2482 Evansville, IN 47728	TREASURER 2 00	0		

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

**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
NONE		

Total number of others receiving over \$50,000 for professional services

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

<b>1</b> N/A	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

<b>1</b> N/A	
<b>2</b>	
All other program-related investments See instructions	
<b>3</b>	

Total. Add lines 1 through 3



0

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	1,775,678
<b>b</b>	Average of monthly cash balances	<b>1b</b>	2,432
<b>c</b>	Fair market value of all other assets (see instructions)	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	1,778,110
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	1,778,110
<b>4</b>	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see instructions)	<b>4</b>	26,672
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	1,751,438
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	87,572

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ☐ and do not complete this part )

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	87,572
<b>2a</b>	Tax on investment income for 2019 from Part VI, line 5	<b>2a</b>	1,738
<b>b</b>	Income tax for 2019. (This does not include the tax from Part VI )	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	1,738
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	85,834
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b>	Add lines 3 and 4	<b>5</b>	85,834
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	
<b>7</b>	<b>Distributable amount as adjusted.</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	85,834

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	<b>1a</b>	90,700
<b>b</b>	Program-related investments—total from Part IX-B	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	90,700
<b>5</b>	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	<b>5</b>	1,738
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	88,962

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
<b>1</b> Distributable amount for 2019 from Part XI, line 7				85,834
<b>2</b> Undistributed income, if any, as of the end of 2019:				
<b>a</b> Enter amount for 2018 only			0	
<b>b</b> Total for prior years. 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2019				
<b>a</b> From 2014				11,593
<b>b</b> From 2015				10,049
<b>c</b> From 2016				439
<b>d</b> From 2017				3,602
<b>e</b> From 2018				9,994
<b>f</b> <b>Total</b> of lines 3a through e	35,677			
<b>4</b> Qualifying distributions for 2019 from Part XII, line 4. ► \$ 90,700				
<b>a</b> Applied to 2018, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions)				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions)				
<b>d</b> Applied to 2019 distributable amount				85,834
<b>e</b> Remaining amount distributed out of corpus	2,515			
<b>5</b> Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	38,192			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions				
<b>e</b> Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
<b>f</b> Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
<b>8</b> Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)	11,593			
<b>9</b> <b>Excess distributions carryover to 2020.</b> Subtract lines 7 and 8 from line 6a	26,599			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2015				10,049
<b>b</b> Excess from 2016				439
<b>c</b> Excess from 2017				3,602
<b>d</b> Excess from 2018				9,994
<b>e</b> Excess from 2019				2,515



### 3 Grants and Contributions Paid During the Year or Approved for Future Payment

Form **990-PF** (2019)

**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.

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					
4	Dividends and interest from securities			14	38,294	
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	135,477	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a _____					
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal. Add columns (b), (d), and (e)		0		173,771	0
13	Total. Add line 12, columns (b), (d), and (e)				13	173,771

(See worksheet in line 13 instructions to verify calculations )

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

[illegible]

**Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations**

- |   |  |   |
|---|--|---|
| 1 | <p>Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</p> <p><b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of</p> <p style="padding-left: 20px;">(1) Cash</p> <p style="padding-left: 20px;">(2) Other assets</p> <p><b>b</b> Other transactions:</p> <p style="padding-left: 20px;">(1) Sales of assets to a noncharitable exempt organization</p> <p style="padding-left: 20px;">(2) Purchases of assets from a noncharitable exempt organization</p> <p style="padding-left: 20px;">(3) Rental of facilities, equipment, or other assets</p> <p style="padding-left: 20px;">(4) Reimbursement arrangements</p> <p style="padding-left: 20px;">(5) Loans or loan guarantees</p> <p style="padding-left: 20px;">(6) Performance of services or membership or fundraising solicitations</p> <p><b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees</p> <p><b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.</p> | <div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div> |
|---|--|---|

	Yes	No
1a(1)		X
1a(2)		X
1b(1)		X
1b(2)		X
1b(3)		X
1b(4)		X
1b(5)		X
1b(6)		X
1c		X

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign  
Here**

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

Signature of officer or trustee

4/24/20  
Date

**President**  
Title

May the IRS discuss this return with the preparer shown below?  
See instructions ☐ Yes ☒ No

**Paid  
Preparer  
Use Only**

PnnT/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
Firm's name ▶			Firm's EIN ▶	
Firm's address ▶			Phone no	

**Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**

Recipient(s) paid during the year

**Name**

Evansville African American Museum

**Street**

579 S Garvin St

**City**

Evansville

**State**

IN

**Zip Code**

47713

**Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution**

Education

**Amount**

1,500

**Name**

St Joseph Catholic Church

**Street**

607 E Iowa St

**City**

Evansville

**State**

IN

**Zip Code**

47712

**Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution**

General Fund

**Amount**

500

**Name**

EVSC Foundation

**Street**

951 Walnut St

**City**

Evansville

**State**

IN

**Zip Code**

47713

**Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution**

Education

**Amount**

3,000

**Name**

Evansville Philharmonic

**Street**

401 SE 5th Suite 105

**City**

Evansville

**State**

IN

**Zip Code**

47713

**Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution**

General Fund

**Amount**

1,000

**Name**

St Joseph Catholic Church

**Street**

607 E Iowa St

**City**

Evansville

**State**

IN

**Zip Code**

47712

**Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution**

General Fund

**Amount**

100

**Name**

Arts Coucil of SW Indiana

**Street**

318 Main St 101

**City**

Evansville

**State**

IN

**Zip Code**

47708

**Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution**

Education

**Amount**

100

**Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**

Recipient(s) paid during the year

**Name**

USI Foundation

**Street**

8600 University Blvd

**City**

Evansville

**State**

IN

**Zip Code**

47712

**Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution**

Education

**Amount**

2,000

**Name**

Hanover College

**Street**

PO Box 108

**City**

Hanover

**State**

IN

**Zip Code**

47724

**Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution**

Education

**Amount**

5,000

**Name**

UE Foundation

**Street**

1800 Lincoln Ave

**City**

Evansville

**State**

IN

**Zip Code**

47714

**Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution**

Education

**Amount**

1,000

**Name**

Faithway Baptist Church

**Street**

3635 Pollock Ave

**City**

Evansville

**State**

IN

**Zip Code**

47714

**Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution**

General Fund

**Amount**

2,000

**Name**

USI Foundation

**Street**

8600 University Blvd

**City**

Evansville

**State**

IN

**Zip Code**

47712

**Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution**

Education

**Amount**

13,000

**Name**

Voices Incorp

**Street**

2425 Highway 41 Suite 405

**City**

Evansville

**State**

IN

**Zip Code**

47714

**Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution**

General Fund

**Amount**

1,000

**Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**

Recipient(s) paid during the year

**Name**

Women Fund Vanderburgh

**Street**

123 NW 4th St Ste 322

**City**

Evansville

**State**

IN

**Zip Code**

47708

**Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution**

General Fund

**Amount**

100

**Name**

Evansville African American Musuem

**Street**

579 S Garvin St

**City**

Evansville

**State**

IN

**Zip Code**

47713

**Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution**

Education

**Amount**

4,000

**Name**

Hanover College

**Street**

PO Box 108

**City**

Hanover

**State**

IN

**Zip Code**

47724

**Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution**

Education

**Amount**

15,000

**Name**

Hanover College

**Street**

PO Box 108

**City**

Hanover

**State**

IN

**Zip Code**

47724

**Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution**

Education

**Amount**

1,000

**Name****Street****City****State****Zip Code****Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution****Amount****Name****Street****City****State****Zip Code****Foreign Country****Relationship****Foundation Status****Purpose of grant/contribution****Amount**



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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

- ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

**2019**

Name of the organization

Thomas A. & Sharon K. Ruder Foundation

Employer identification number

35-2063035

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 33 1/3 % 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. ▶ \$ \_\_\_\_\_

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

Name of organization Thomas A & Sharon K Ruder Foundation	Employer identification number 35-2063035
--	--

**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	Thomas A Ruder 3000 E. Morgan Ave Evansville IN 47711 Foreign State or Province: Indiana Foreign Country:	\$ 734,005	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions )
	Foreign State or Province Foreign Country:	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	Foreign State or Province Foreign Country:	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	Foreign State or Province Foreign Country:	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	Foreign State or Province Foreign Country:	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	Foreign State or Province Foreign Country:	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
	Foreign State or Province Foreign Country:	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )



Name of organization Thomas A & Sharon K. Ruder Foundation	Employer identification number 35-2063035
---	--

**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 the year (Enter this information once. See instructions.) ▶ \$ 0

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
1	CHARITABLE	charitable	Securities Held in Firm Name
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	Thomas A Ruder po box 2482 Evansville IN 47728 For Prov Country		DONOR/FOUNDATION PRESIDENT
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	For Prov Country		
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	For Prov Country		
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	For Prov Country		
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	For Prov Country		
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	For Prov Country		

Form **4720****Return of Certain Excise Taxes Under Chapters 41 and 42 of the Internal Revenue Code**

OMB No 1545-0052

**2019**Department of the Treasury  
Internal Revenue Service

(Sections 170(f)(10), 664(c)(2), 4911, 4912, 4941, 4942, 4943, 4944, 4945, 4955, 4958, 4959, 4960, 4965, 4966, 4967, and 4968)

Go to [www.irs.gov/Form4720](http://www.irs.gov/Form4720) for instructions and the latest information.

For calendar year 2019 or other tax year beginning

, 2019, and ending

, 20

Name of organization or entity

Thomas A &amp; Sharon K Ruder Foundation

Employer identification number

35-2063035

Number, street, and room or suite no (or P O box if mail is not delivered to street address)

PO BOX 2482, Room SUITE C

Check box for type of annual return

☐ Form 990 ☐ Form 990-EZ☒ Form 990-PF ☐ Other☐ Form 5227

City or town, state or province, country, and ZIP or foreign postal code

EVANSVILLE, IN 47728-0482

Yes	No
	X

**A** Is the organization a foreign private foundation within the meaning of section 4948(b)?**B** Has corrective action been taken on any taxable event that resulted in Chapter 42 taxes being reported on this form? (Enter "N/A" if not applicable) n/aIf "Yes," attach a detailed description and documentation of the corrective action taken and, if applicable, enter the fair market value of any property recovered as a result of the correction **\$** \_\_\_\_\_ If "No," (that is, any uncorrected acts or transactions), attach an explanation (see instructions)**Part I Taxes on Organization** (Sections 170(f)(10), 664(c)(2), 4911(a), 4912(a), 4942(a), 4943(a), 4944(a)(1), 4945(a)(1), 4955(a)(1), 4959, 4960(a), 4965(a)(1), 4966(a)(1), and 4968(a))

1	Tax on undistributed income—Schedule B, line 4	1	
2	Tax on excess business holdings—Schedule C, line 7	2	
3	Tax on investments that jeopardize charitable purpose—Schedule D, Part I, column (e)	3	
4	Tax on taxable expenditures—Schedule E, Part I, column (g)	4	
5	Tax on political expenditures—Schedule F, Part I, column (e)	5	
6	Tax on excess lobbying expenditures—Schedule G, line 4	6	
7	Tax on disqualifying lobbying expenditures—Schedule H, Part I, column (e)	7	
8	Tax on premiums paid on personal benefit contracts	8	
9	Tax on being a party to prohibited tax shelter transactions—Schedule J, Part I, column (h)	9	
10	Tax on taxable distributions—Schedule K, Part I, column (f)	10	
11	Tax on a charitable remainder trust's unrelated business taxable income. Attach statement	11	
12	Tax on failure to meet the requirements of section 501(r)(3)—Schedule M, Part II, line 2	12	
13	Tax on excess executive compensation—Schedule N	13	
14	Tax on net investment income of private colleges and universities—Schedule O	14	
15	<b>Total</b> (add lines 1–14)	15	0

**Part II-A Taxes on Managers, Self-Dealers, Disqualified Persons, Donors, Donor Advisors, and Related Persons** (Sections 4912(b), 4941(a), 4944(a)(2), 4945(a)(2), 4955(a)(2), 4958(a), 4965(a)(2), 4966(a)(2), and 4967(a))

(a) Name and address of person subject to tax City or town, state or province, country, ZIP or foreign postal code				(b) Taxpayer identification number
a				
b				
c				
(c) Tax on self-dealing—Schedule A, Part II, col (d), and Part III, col (d)	(d) Tax on investments that jeopardize charitable purpose—Schedule D, Part II, col (d)	(e) Tax on taxable expenditures—Schedule E, Part II, col (d)	(f) Tax on political expenditures—Schedule F, Part II, col (d)	
a				
b				
c				
<b>Total</b>	0	0	0	0
(g) Tax on disqualifying lobbying expenditures—Schedule H, Part II, col (d)	(h) Tax on excess benefit transactions—Schedule I, Part II, col (d), and Part III, col (d)	(i) Tax on being a party to prohibited tax shelter transactions—Schedule J, Part II, col (d)	(j) Tax on taxable distributions—Schedule K, Part II, col (d)	
a				
b				
c				
<b>Total</b>	0	0	0	0
(k) Tax on prohibited benefits—Sch I., Part II, col (d), and Part III, col (d)				(l) Total—Add cols (c) through (k)
a				0
b				0
c				0
<b>Total</b>	0			0

**Part II-B Summary of Taxes** (See **Tax Payments** in the instructions.)

<b>1</b>	Enter the taxes listed in Part II-A, column (I), that apply to managers, self-dealers, disqualified persons, donors, donor advisors, and related persons who sign this form. If all sign, enter the total amount from Part II-A, column (I).	<b>1</b>	
<b>2</b>	<b>Total tax.</b> Add Part I, line 15, and Part II-B, line 1	<b>2</b>	0
<b>3</b>	Total payments including amount paid with Form 8868 (see instructions)	<b>3</b>	
<b>4</b>	<b>Tax due.</b> If line 2 is larger than line 3, enter amount owed (see instructions)	<b>4</b>	0
<b>5</b>	<b>Overpayment.</b> If line 2 is smaller than line 3, enter the difference. This is your refund	<b>5</b>	0

**SCHEDULE A—Initial Taxes on Self-Dealing (Section 4941)****Part I Acts of Self-Dealing and Tax Computation**

(a) Act number	(b) Date of act	(c) Description of act	(d) Question number from Form 990-PF, Part VII-B, or Form 5227, Part VI-B, applicable to the act	(e) Amount involved in act	(f) Initial tax on self-dealer (10% of col (e))	(g) Tax on foundation managers (if applicable) (lesser of \$20,000 or 5% of col (e))
1					0	0
2					0	0
3					0	0
4					0	0
5					0	0

**Part II Summary of Tax Liability of Self-Dealers and Proration of Payments**

(a) Names of self-dealers liable for tax	(b) Act no. from Part I, col (a)	(c) Tax from Part I, col (f), or prorated amount	(d) Self-dealer's total tax liability (add amounts in col (c)) (see instructions)
			0
			0
			0
			0
			0

**Part III Summary of Tax Liability of Foundation Managers and Proration of Payments**

(a) Names of foundation managers liable for tax	(b) Act no. from Part I, col (a)	(c) Tax from Part I, col (g), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)
			0
			0
			0

**SCHEDULE B—Initial Tax on Undistributed Income (Section 4942)**

<b>1</b>	Undistributed income for years before 2018 (from Form 990-PF for 2019, Part XIII, line 6d)	<b>1</b>	
<b>2</b>	Undistributed income for 2018 (from Form 990-PF for 2019, Part XIII, line 6e)	<b>2</b>	
<b>3</b>	Total undistributed income at end of current tax year beginning in 2019 and subject to tax under section 4942 (add lines 1 and 2)	<b>3</b>	0
<b>4</b>	<b>Tax</b> —Enter 30% of line 3 here and on Part I, line 1	<b>4</b>	0

**SCHEDULE C—Initial Tax on Excess Business Holdings (Section 4943)****Business Holdings and Computation of Tax**

If you have taxable excess holdings in more than one business enterprise, attach a separate schedule for each enterprise. Refer to the instructions for each line item before making any entries.

Name and address of business enterprise

Employer identification number

Form of enterprise (corporation, partnership, trust, joint venture, sole proprietorship, etc.)

		(a) Voting stock (profits interest or beneficial interest)	(b) Value	(c) Nonvoting stock (capital interest)
<b>1</b>	Foundation holdings in business enterprise	<b>1</b> %	%	
<b>2</b>	Permitted holdings in business enterprise	<b>2</b> %	%	
<b>3</b>	Value of excess holdings in business enterprise	<b>3</b>		
<b>4</b>	Value of excess holdings disposed of within 90 days, or, other value of excess holdings not subject to section 4943 tax (attach statement)	<b>4</b>		
<b>5</b>	Taxable excess holdings in business enterprise—line 3 minus line 4	<b>5</b> 0	0	0
<b>6</b>	Tax— Enter 10% of line 5	<b>6</b> 0	0	0
<b>7</b>	Total tax— Add amounts on line 6, columns (a), (b), and (c), enter total here and on Part I, line 2	<b>7</b> 0		

**SCHEDULE D—Initial Taxes on Investments That Jeopardize Charitable Purpose (Section 4944)****Part I Investments and Tax Computation**

(a) Investment number	(b) Date of investment	(c) Description of investment	(d) Amount of investment	(e) Initial tax on foundation (10% of col (d))	(f) Initial tax on foundation managers (if applicable)—(lesser of \$10,000 or 10% of col (d))
<b>1</b>				0	0
<b>2</b>				0	0
<b>3</b>				0	0
<b>4</b>				0	0
<b>5</b>				0	0
<b>Total—</b> Column (e) Enter here and on Part I, line 3				0	
<b>Total—</b> Column (f) Enter total (or prorated amount) here and in Part II, column (c), below					0

**Part II Summary of Tax Liability of Foundation Managers and Proration of Payments**

(a) Names of foundation managers liable for tax	(b) Investment no from Part I, col (a)	(c) Tax from Part I, col (f), or prorated amount	(d) Manager's total tax liability (add amounts in col (c)) (see instructions)
			0
			0
			0

**SCHEDULE E—Initial Taxes on Taxable Expenditures (Section 4945)****Part I Expenditures and Computation of Tax**

(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Name and address of recipient	(e) Description of expenditure and purposes for which made
1				
2				
3				
4				
5				
(f) Question number from Form 990-PF, Part VII-B, or Form 5227, Part VI-B, applicable to the expenditure			(g) Initial tax imposed on foundation (20% of col. (b))	(h) Initial tax imposed on foundation managers (if applicable)—(lesser of \$10,000 or 5% of col. (b))
			0	0
			0	0
			0	0
			0	0
			0	0
			0	0
<b>Total—</b> Column (g) Enter here and on Part I, line 4.			0	
<b>Total—</b> Column (h) Enter total (or prorated amount) here and in Part II, column (c), below.				0

**Part II Summary of Tax Liability of Foundation Managers and Proration of Payments**

(a) Names of foundation managers liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (h), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)
			0
			0
			0

**SCHEDULE F—Initial Taxes on Political Expenditures (Section 4955)****Part I Expenditures and Computation of Tax**

(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Description of political expenditure	(e) Initial tax imposed on organization or foundation (10% of col. (b))	(f) Initial tax imposed on managers (if applicable) (lesser of \$5,000 or 2½% of col. (b))
1				0	0
2				0	0
3				0	0
4				0	0
5				0	0
<b>Total—</b> Column (e) Enter here and on Part I, line 5.				0	
<b>Total—</b> Column (f) Enter total (or prorated amount) here and in Part II, column (c), below.					0

**Part II Summary of Tax Liability of Organization Managers or Foundation Managers and Proration of Payments**

(a) Names of organization managers or foundation managers liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (f), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)
			0
			0
			0



**SCHEDULE G—Tax on Excess Lobbying Expenditures (Section 4911)**

1	Excess of grass roots expenditures over grass roots nontaxable amount (from Schedule C (Form 990 or 990-EZ), Part II-A, column (b), line 1h). (See the instructions before making an entry.)	1	
2	Excess of lobbying expenditures over lobbying nontaxable amount (from Schedule C (Form 990 or 990-EZ), Part II-A, column (b), line 1i). (See the instructions before making an entry)	2	
3	Excess lobbying expenditures—enter the larger of line 1 or line 2	3	0
4	Tax—Enter 25% of line 3 here and on Part I, line 6	4	0

**SCHEDULE H—Taxes on Disqualifying Lobbying Expenditures (Section 4912)****Part I Expenditures and Computation of Tax**

(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Description of lobbying expenditures	(e) Tax imposed on organization (5% of col (b))	(f) Tax imposed on organization managers (if applicable)—(5% of col (b))
1				0	0
2				0	0
3				0	0
4				0	0
5				0	0
<b>Total—</b> Column (e) Enter here and on Part I, line 7				0	

**Total—** Column (f) Enter total (or prorated amount) here and in Part II, column (c), below

0

**Part II Summary of Tax Liability of Organization Managers and Proration of Payments**

(a) Names of organization managers liable for tax	(b) Item no from Part I, col (a)	(c) Tax from Part I, col (f), or prorated amount	(d) Manager's total tax liability (add amounts in col (c)) (see instructions)
			0
			0
			0

**SCHEDULE I—Initial Taxes on Excess Benefit Transactions (Section 4958)****Part I Excess Benefit Transactions and Tax Computation**

(a) Transaction number	(b) Date of transaction	(c) Description of transaction
1		
2		
3		
4		
5		

(d) Amount of excess benefit	(e) Initial tax on disqualified persons (25% of col (d))	(f) Tax on organization managers (if applicable) (lesser of \$20,000 or 10% of col (d))
	0	0
	0	0
	0	0
	0	0
	0	0

**SCHEDULE I—Initial Taxes on Excess Benefit Transactions (Section 4958) Continued****Part II Summary of Tax Liability of Disqualified Persons and Proration of Payments**

(a) Names of disqualified persons liable for tax	(b) Trans no from Part I, col (a)	(c) Tax from Part I, col (e), or prorated amount	(d) Disqualified person's total tax liability (add amounts in col (c)) (see instructions)
			0
			0
			0
			0

**Part III Summary of Tax Liability of 501(c)(3), (c)(4) & (c)(29) Organization Managers and Proration of Payments**

(a) Names of 501(c)(3), (c)(4) & (c)(29) organization managers liable for tax	(b) Trans no from Part I, col (a)	(c) Tax from Part I, col (f), or prorated amount	(d) Manager's total tax liability (add amounts in col (c)) (see instructions)
			0
			0
			0
			0

**SCHEDULE J—Taxes on Being a Party to Prohibited Tax Shelter Transactions (Section 4965)****Part I Prohibited Tax Shelter Transactions (PTST) and Tax Imposed on the Tax-Exempt Entity**  
(see instructions)

(a) Transaction number	(b) Transaction date	(c) Type of transaction 1—Listed 2—Subsequently listed 3—Confidential 4—Contractual protection	(d) Description of transaction
1			
2			
3			
4			
5			
(e) Did the tax-exempt entity know or have reason to know this transaction was a PTST when it became a party to the transaction? Answer Yes or No		(f) Net income attributable to the PTST	(g) 75% of proceeds attributable to the PTST
			(h) Tax imposed on the tax-exempt entity (see instructions)
<b>Total—</b> Column (h) Enter here and on Part I, line 9			0

**Part II Tax Imposed on Entity Managers (Section 4965) Continued**

(a) Name of entity manager	(b) Transaction number from Part I, col (a)	(c) Tax—enter \$20,000 for each transaction listed in col (b) for each manager in col (a)	(d) Manager's total tax liability (add amounts in col (c))
			0
			0
			0
			0
			0

**SCHEDULE K—Taxes on Taxable Distributions of Sponsoring Organizations Maintaining Donor Advised Funds (Section 4966). See the instructions.****Part I Taxable Distributions and Tax Computation**

(a) Item number	(b) Name of sponsoring organization and donor advised fund	(c) Description of distribution	
1			
2			
3			
4			
(d) Date of distribution	(e) Amount of distribution	(f) Tax imposed on organization (20% of col (e))	(g) Tax on fund managers (lesser of 5% of col (e) or \$10,000)
		0	0
		0	0
		0	0
		0	0
<b>Total—</b> Column (f) Enter here and on Part I, line 10 .		0	
<b>Total—</b> Column (g) Enter total (or prorated amount) here and in Part II, column (c), below .			0

**Part II Summary of Tax Liability of Fund Managers and Proration of Payments**

(a) Name of fund managers liable for tax	(b) Item no from Part I, col (a)	(c) Tax from Part I, col (g) or prorated amount	(d) Manager's total tax liability (add amounts in col (c)) (see instructions)
			0
			0
			0
			0

**SCHEDULE L—Taxes on Prohibited Benefits Distributed From Donor Advised Funds (Section 4967).**

See the instructions.

<b>Part I Prohibited Benefits and Tax Computation</b>			
(a) Item number	(b) Date of prohibited benefit	(c) Description of benefit	
1			
2			
3			
4			
5			
(d) Amount of prohibited benefit		(e) Tax on donors, donor advisors, or related persons (125% of col (d)) (see instructions)	(f) Tax on fund managers (if applicable) (lesser of 10% of col (d) or \$10,000) (see instructions)
		0	0
		0	0
		0	0
		0	0
		0	0
		0	0
<b>Part II Summary of Tax Liability of Donors, Donor Advisors, Related Persons, and Proration of Payments</b>			
(a) Names of donors, donor advisors, or related persons liable for tax	(b) Item no from Part I, col (a)	(c) Tax from Part I, col (e) or prorated amount	(d) Donor's, donor advisor's, or related person's total tax liability (add amounts in col (c)) (see instructions)
			0
			0
			0
			0
			0
<b>Part III Summary of Tax Liability of Fund Managers and Proration of Payments</b>			
(a) Names of fund managers liable for tax	(b) Item no from Part I, col (a)	(c) Tax from Part I, col (f) or prorated amount	(d) Fund manager's total tax liability (add amounts in col (c)) (see instructions)
			0
			0
			0
			0

**Schedule M—Tax on Hospital Organization for Failure to Meet the Community Health Needs  
Assessment Requirements (Sections 4959 and 501(r)(3)). (See instructions.)**

**Part I Failures to Meet Section 501(r)(3)**

(a) Item number	(b) Name of hospital facility	(c) Description of the failure	(d) Tax year hospital facility last conducted a CHNA	(e) Tax year hospital facility last adopted an implementation strategy
1				
2				
3				
4				
5				

**Part II Computation of Tax**

1	Number of hospital facilities operated by the hospital organization that failed to meet the Community Health Needs Assessment requirements of section 501(r)(3)	1	
2	Tax—Enter \$50,000 multiplied by line 1 here and on Part I, line 12	2	0

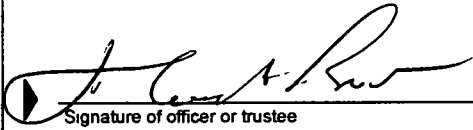
**SCHEDULE N—Tax on Excess Executive Compensation (Section 4960). (See instructions.)**

SCHEDULE N Tax on Excess Executive Compensation (Section 100) (See instructions)				
(a) Item number	(b) Name of covered employee	(c) Excess remuneration	(d) Excess parachute payment	(e) Total Add column (c) and (d)
1				
2				
3				
4				
5				
6	Attachment, if necessary. See instructions . . . . .			
Total (add column (e) items 1–6)				0
Tax. Enter 21% of the amount above here and on Part I, line 13 . . . . .				

**SCHEDULE O—Excise Tax on Net Investment Income of Private Colleges and Universities  
(Section 4968)**

	(a) Name	(b) EIN	(c) Gross investment income (See instructions )	(d) Capital gain net income	(e) Administrative expenses allocable to income included in cols (c) and (d)	(f) Net investment income (See instructions )
1	Filing Organization					
2	Related Organization					
3	Related Organization					
4	Related Organization					
5	Total from attachment, if necessary . . . . .					
6	<b>Total</b> . . . . .		0	0	0	0
7	<b>Excise Tax on Net Investment Income</b> Enter 1 4% of the amount in 6(f) here and on Part I, line 14 . . . . .					0

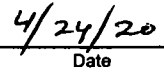
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.



Signature of officer or trustee



Title



Date

**Sign  
Here**

Signature (and organization or entity name if applicable) of manager, self-dealer, disqualified person, donor, donor advisor, or related person

Date

Signature (and organization or entity name if applicable) of manager, self-dealer, disqualified person, donor, donor advisor, or related person

Date

Signature (and organization or entity name if applicable) of manager, self-dealer, disqualified person, donor, donor advisor, or related person

Date

Signature (and organization or entity name if applicable) of manager, self-dealer, disqualified person, donor, donor advisor, or related person

Date

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

☐ Yes

☐ No

**Paid  
Preparer  
Use Only**

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if  
self-employed

PTIN

Firm's name ▶

Firm's EIN ▶

Firm's address ▶

Phone no

**Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory**

Long Term CG Distributions Short Term CG Distributions		Amount		Description	CUSIP #	Check "X" to include in Part IV	Purchaser	Check "X" if Purchaser is a Business	Acquisition Method	Date Acquired	Date Sold	Gross Sales Price	Totals		Cost or Other Basis, Expenses, Depreciation and Adjustments			Net Gain or Loss			
		Long Term CG Distributions	Short Term CG Distributions										Gross Sales	Net Gain or Loss							
Capital Gains/Losses																			717,167	581,690	135,477
Other sales																			0	0	0
1	ALPHABET INC	02079K305	X			P	5/22/2019	9/9/2019	36,381	34,719								1,662			
2	AMERICAN INTL GROUP	028874784	X			P	6/5/2019	11/19/2019	16,252	15,845								407			
3	BOSTON SCIENTIFIC	101137107	X			P	9/6/2018	4/29/2019	5,849	5,742								107			
4	CVS HEALTH CORP	126650100	X			P	6/4/2019	9/25/2019	18,735	16,680								2,055			
5	CVS HEALTH CORP	126650100	X			P	6/4/2019	9/25/2019	12,490	12,628								-138			
6	CONAGRA BRANDS	205887107	X			P	1/17/2019	4/30/2019	21,345	14,887								6,458			
7	CISCO SYSTEMS	17275R102	X			P	11/22/2011	5/23/2019	21,988	7,190								14,798			
8	CISCO SYSTEMS	17275R102	X			P	1/6/2012	5/23/2019	21,988	7,619								14,368			
9	CISCO SYSTEMS	17275R102	X			P	8/10/2012	5/23/2019	21,988	7,017								14,971			
10	CISCO SYSTEMS	17275R102	X			P	8/13/2012	5/23/2019	21,988	6,933								15,055			
11	CISCO SYSTEMS	17275R102	X			P	12/20/2017	5/23/2019	21,987	15,368								6,619			
12	CORTEVA INC	22052L104	X			P	8/25/2016	6/6/2019	9	9								0			
13	CORTEVA INC	22052L104	X			P	8/25/2016	8/12/2019	2,957	2,760								197			
14	CORTEVA INC	22052L104	X			P	9/13/2016	8/12/2019	1,978	1,791								187			
15	CORTEVA INC	22052L104	X			P	4/24/2018	8/12/2019	1,978	2,241								-263			
16	CHEVON CORP	166764100	X			P	10/12/2015	10/2/2019	22,492	17,671								4,821			
17	DUPONT DE NEMOURS	26612N102	X			P	8/25/2016	6/5/2019	25	26								-1			
18	DUPONT DE NEMOURS	26612N102	X			P	8/25/2016	11/22/2019	6,544	7,911								-1,367			
19	DUPONT DE NEMOURS	26612N102	X			P	9/13/2016	11/22/2019	4,378	5,132								-754			
20	DUPONT DE NEMOURS	26612N102	X			P	4/24/2018	11/22/2019	4,378	6,423								-2,045			
21	DISCOVER FINANCIAL	254709108	X			P	12/26/2017	5/3/2019	51,979	48,973								3,006			
22	DOW INC	260557103	X			P	8/25/2016	4/5/2019	19	18								1			
23	ELANCO ANIMAL HEALTH	28414H103	X			P	2/19/2019	3/11/2019	13,578	12,178								1,400			
24	ELANCO ANIMAL HEALTH	28612N102	X			P	2/19/2019	3/14/2019	22	19								3			
25	FEDERATED INVESTORS	314211103	X			P	6/22/2018	3/4/2019	29,534	23,520								6,014			
26	FISERV INC	337738108	X			P	11/27/2018	7/29/2019	52	29								23			
27	FISERV INC	337738108	X			P	11/27/2018	9/5/2019	16,285	8,876								7,409			
28	GENERAL ELECTRIC	369604103	X			P	11/2/2018	3/6/2019	3,758	3,744								14			
29	GENERAL ELECTRIC	369604103	X			P	12/13/2018	3/6/2019	9,395	7,450								1,945			
30	GENERAL ELECTRIC	369604103	X			P	4/17/2018	3/6/2019	25,633	22,630								3,003			
31	KELOGG CO	487836108	X			P	12/20/2017	7/15/2019	16,375	19,754								-3,379			
32	KRAFT HEINZ	500754106	X			P	11/2/2018	4/9/2019	6,608	10,124								-3,516			
33	KRAFT HEINZ	500754106	X			P	3/7/2019	7/17/2019	6,058	6,530								-472			
34	MEDTRONIC	65960L103	X			P	11/22/2016	11/7/2019	17,475	14,510								2,965			
35	MEDTRONIC	65960L103	X			P	12/23/2016	11/7/2019	17,476	14,422								3,054			
36	MICRON TECHNOLOGY	595112103	X			P	12/31/2018	2/8/2019	15,228	12,712								2,516			
37	MICRON TECHNOLOGY	595112103	X			P	3/22/2019	5/16/2019	7,515	8,598								-1,083			
38	ENVISTA HOLDINGS	29415F104	X			P	11/29/2019	12/19/2019	7	7								0			
39	ENVISTA HOLDINGS	500754106	X			P	11/29/2019	12/19/2019	15,747	14,467								1,280			
40	ORACLE CORP	68389X105	X			P	10/3/2017	3/13/2019	21,321	19,560								1,761			
41	PAYPAL HDGS	70450Y103	X			P	11/8/2018	7/29/2019	22,720	17,796								4,924			
42	QUALCOMM INC	747525103	X			P	3/20/2018	5/16/2019	16,592	11,818								4,684			

	Description	CUSIP #	Check "X" to include in Part IV	Purchaser	Check "X" if Purchaser is a Business	Acquisition Method	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Valuation Method	Expense of Sale and Cost of Improvements	Depreciation	Adjustments	Net Gain or Loss
43	MOLSON COORS BREWER	60871R209	X			P	4/17/2018	12/27/2019	16,139	21,932					-5,793
44	UNITED TECHNOLOGIES	913017109	X			P	5/14/2012	10/9/2019	13,219	7,651					5,568
45	VIACOMCBS INC	92556H206	X			P	7/30/2019	12/5/2019	10	13					-3
46	WABTEC	929740108	X			P	2/28/2019	3/1/2019	38	41					-3
47	WABTEC	929740108	X			P	2/28/2019	5/1/2019	521	546					-25
48	WALGREENS BOOTS	931427108	X			P	4/25/2018	3/1/2019	13,656	13,018					638
49	WELLS FARGO	949746101	X			P	6/12/2019	7/17/2019	45,199	46,160					-961
50	SPDR INDUSTRIAL ETF	81369Y704	X			P	12/26/2007	2/5/2019	19,591	10,698					8,893
51	ZIONS BANCORP PFD	98973A104	X			P	10/31/2011	11/7/2019	4,784	3,614					1,170
52	ABBOTT LABS	002824100	X			P	6/9/2016	9/30/2019	24,993	11,690					13,303
53															0
54															0
55															0
56															0
57															0
58															0
59															0



**Part I, Line 11 (990-PF) - Other Income**

		-17	-17	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income
1	Return of Capital	-17	-17	

**Part I, Line 16a (990-PF) - Legal Fees**

		0	0	0	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	Legal Fees	0			0

**Part I, Line 16b (990-PF) - Accounting Fees**

		75	0	0	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	ACCOUNTING FEES	75			0

**Part I, Line 16c (990-PF) - Other Professional Fees**

		0	0	0	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	Indiana Secretary of State	0			0

**Part I, Line 18 (990-PF) - Taxes**

		1,030	0	0	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Real estate tax not included in line 20	0			
2	Tax on investment income	0			
3	Income tax	0			
4	FOREIGN TAXES PAID	0			
5	Federal Taxes Prior Year	1,030			
6	Federal Current Year Tax Payments	0			

Part I, Line 19 (990-PF) - Depreciation and Depletion

		Date Acquired	Method of Computation	Asset Life	Cost or Other Basis	Beginning Accumulated Depreciation	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income
1	MACBOOK PRO MID 2012	3/23/2013			1,994	3,590			

**Part I, Line 23 (990-PF) - Other Expenses**

		81	0	0	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Licensing Fees & Permits	50	0		
2	US Post Office	31	0		

**Part II, Line 10b (990-PF) - Investments - Corporate Stock**

	Description	Num. Shares/ Face Value	Book Value Beg. of Year	Book Value End of Year	FMV Beg. of Year	FMV End of Year
1	BANK AMERICA CORP BAC	3,800	15,734	94,873	29,569	133,836
2	CISCO SYSTEMS	500	44,126	23,944	86,660	23,980
3	EMERSON ELECTRIC EMR	600	14,314	33,690	17,925	45,756
4	GENERAL ELECTRIC	1,400	11,194		10,598	
5	PFIZER INC PFE	1,100	36,914	36,914	48,015	43,098
6	SPDR INDUSTRIAL ETF XLI	269	10,698		17,326	
7	BANK OF AMERICA BMLPRG	1,000	16,370	16,370	18,470	21,370
8	MORGAN STANLEY PFD A MS PRA	1,500	31,798	31,798	28,440	33,795
9	MERCK & CO INC MRK	1,200	21,885	73,635	45,846	109,140
10	ZION BANCORP PFDA ZB PRA	200	3,614		4,360	
11	SUNTRUST PFD A STI PRA	500	11,310		9,980	
12	SPDR S&P MID CAP 400 ETF MDY	400	18,374	125,321	30,267	150,152
13	UNITED TECHNOLOGIES CORP	100	7,651		10,648	
14	CHEVRON CORP	200	17,671		21,758	
15	DISCOVER FINANCIAL SVCS DFS	1,500	48,973	120,503	37,393	127,230
16	INTEL CORP INTC	1,300	25,750	41,367	46,930	77,805
17	APPLE INC	380	22,764	42,499	44,167	111,587
18	VANGUARD MID CAP ETF VO	61	6,899	6,899	8,429	10,869
19	ABBOTT LABS	300	11,690		21,699	
20	AMGEN INC	150	22,278	22,278	29,200	36,161
21	BERKSHIRE HATHAWAY CL BRK B	300	53,109	53,109	61,254	67,950
22	CITIGROUP INC	500	21,800	34,560	15,618	39,945
23	GILEAD SCIENCE GILD	600	44,903	44,903	37,530	38,988
24	JP MORGAN CHASE JPM	400	36,009	36,009	39,048	55,760
25	ORACLE CORP	400	19,560		18,060	
26	QUALCOMM INC	200	11,818		11,382	
27	MEDTRONIC PLC	400	28,932		36,384	
28	VANGUARD LARGE CAP ETF V	200	19,516	19,516	22,972	29,568
29	COCA COLA CO KO	400	17,492	17,492	18,940	22,140
30	DOW DUPONT INC	700	39,575		37,436	
31	HUNTINGTON BANCSHARES HBAN	1,000	12,780	12,780	11,920	15,080
32	KELLOGG CO	300	19,754		17,103	
33	PROCTER GAMBLE CO PG	200	17,260	17,260	18,384	24,980
34	VANGUARD MID CAP GROWTH ETF VOT	250	30,572	30,572	29,923	39,695
35	GOLDMAN SACHS PFD D GS PRD	1,000	23,010	23,010	17,500	23,040
36	BANK NEW YORK MELLON BK	500	27,095	27,095	23,535	25,165
37	BOSTON SCIENTIFIC BSX	2,000	5,742	75,335	5,654	90,440
38	FEDERATED INVESTORS	1,000	23,520		26,550	
39	FIRST DATA CORP	500	8,905		8,455	
40	GENERAL MILLS	500	22,630		19,470	
41	KRAFT HEINZ CO	200	10,124		8,608	
42	MICRO TECHNOLOGY	400	12,712		12,692	
43	MOLSON COORS BREWING	300	21,932		16,848	
44	PAYPAL HOLDINGS	200	17,796		16,818	
45	REGIONS FINANCIAL RF	1,000	17,430	17,430	13,380	17,160
46	STATE STREET CORP STT	400	10,085	30,232	6,307	31,640
47	SUNTRUST BANKS INC	600	38,578		30,264	

**Part II, Line 10b (990-PF) - Investments - Corporate Stock**

Description		Num Shares/ Face Value	Book Value Beg. of Year	Book Value End of Year	FMV Beg. of Year	FMV End of Year
48	VISA INC V	100	12,570	12,570	13,194	18,790
49	WALGREENS BOOTS ALLIANCE	200	13,018		13,666	
50	ZIONS BANCORP ZION	600	16,052	29,277	12,222	31,152
51	SPDR CONSUMER STAPLES ETF XLP	200	11,170	11,170	10,156	12,596
52	SPDR COMMUNICATION SERVICES ETF XL	225	10,800	10,782	9,288	12,067
53	GOLDMAN SACHS PFD J GS PRJ	600	14,960	14,960	14,520	16,092
54	VANGUARD FUND	75,255	75,255	105,918	75,255	105,918
55	BRISTOL MYERS SQUIBB CO BMY	500		25,161		32,095
56	CNA FINANCIAL CNA	800		34,820		35,848
57	DOW INC DOW	233		13,263		12,752
58	ELECTRONIC ARTS EA	200		18,159		21,502
59	FEDEX CORP FDX	200		34,428		30,242
60	GOLDMAN SACHS GROUP GS	100		19,532		22,993
61	HUMANA INC HUM	100		28,342		36,652
62	MGIC INVESTMENT MTG	1,000		13,720		14,170
63	MICROSOFT CORP MSFT	1,233		176,617		194,444
64	MICRON TECHNOLOGY INC MU	300		14,467		16,134
65	TRUIST FINANCIAL CORP TFC	3,432		178,991		193,290
66	UNUM GROUP UNM	500		14,710		14,580
67	VIACOMCBS INC VIAC	796		41,220		33,408
68	ZIMMER BIOMET HOLDINGS	300		37,592		44,904
69	VANGUARD DIVIDEND APPRECIATION VIG	200		21,770		24,932
70	VANGUARD COMMUNICATION SER VOX	100		7,820		9,393
71	TRUIST FINANCIAL SER I PFD TFC PRI	500		11,310		12,275

Part II, Line 10c (990-PF) - Investments - Corporate Bonds

		9,930		9,930		12,576		14,205	
Description		Interest Rate	Maturity Date	Book Value Beg of Year	Book Value End of Year	FMV Beg of Year	FMV End of Year		
1	APPALACHIAN POWER SR NT 037735CM7	7.00%	4/1/2038	9,930	9,930	12,576	14,205		

**Part II, Line 14 (990-PF) - Land, Buildings, and Equipment**

		1,994	1,994	1,994	1,994	0	0	0
		Cost or Other Basis	Accumulated Depreciation Beg of Year	Accumulated Depreciation End of Year	Book Value Beg of Year	Book Value End of Year	FMV End of Year	
1	MAC BOOK PRO MID 2012 15 INCH 3/23/12	1,994	1,994	1,994	0	0	0	0

**Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income**

Amount		717,167														135,477		0		0		135,477		0		135,477	
Long Term CG Distributions		0																									
Short Term CG Distributions		0																									
Description of Property Sold	CUSIP #	Acquisition Method	Date Acquired	Date Sold	Gross Sales Price	Depreciation Allowed	Adjustments	Cost or Other Basis Plus Expense of Sale	Gain or Loss	F.M.V. as of 12/31/19	Adjusted Basis as of 12/31/19	Excess of FMV Over Adjusted Basis	Gains Minus Excess FMV Over Adj. Basis or Losses														
1 ALPHABET INC	02079K305	P	5/22/2019	9/9/2019	36,381			34,719	1,662	0	0	0	1,662														
2 AMERICAN INTL GROUP	026874784	P	6/5/2019	11/19/2019	16,252			15,845	407	0	0	0	407														
3 BOSTON SCIENTIFIC	101137107	P	9/6/2018	4/29/2019	5,849			5,742	107	0	0	0	107														
4 CVS HEALTH CORP	126650100	P	6/4/2019	9/25/2019	18,735			16,680	2,055	0	0	0	2,055														
5 CVS HEALTH CORP	126650100	P	6/4/2019	9/25/2019	12,490			12,628	-138	0	0	0	-138														
6 CONAGRA BRANDS	205887107	P	1/17/2019	4/30/2019	21,345			14,887	6,458	0	0	0	6,458														
7 CISCO SYSTEMS	17275R102	P	11/22/2011	5/23/2019	21,988			7,190	14,798	0	0	0	14,798														
8 CISCO SYSTEMS	17275R102	P	1/6/2012	5/23/2019	21,988			7,619	14,369	0	0	0	14,369														
9 CISCO SYSTEMS	17275R102	P	8/10/2012	5/23/2019	21,988			7,017	14,971	0	0	0	14,971														
10 CISCO SYSTEMS	17275R102	P	8/13/2012	5/23/2019	21,988			6,933	15,055	0	0	0	15,055														
11 CISCO SYSTEMS	17275R102	P	12/20/2017	5/23/2019	21,987			15,368	6,619	0	0	0	6,619														
12 CORTEVA INC	22052L104	P	8/25/2016	6/6/2019	9			9	0	0	0	0	0														
13 CORTEVA INC	22052L104	P	8/25/2016	8/12/2019	2,957			2,760	197	0	0	0	197														
14 CORTEVA INC	22052L104	P	9/13/2016	8/12/2019	1,978			1,791	187	0	0	0	187														
15 CORTEVA INC	22052L104	P	4/24/2018	8/12/2019	1,978			2,241	-263	0	0	0	-263														
16 CHEVON CORP	166764100	P	10/12/2015	10/22/2019	22,492			17,671	4,821	0	0	0	4,821														
17 DUPONT DE NEUMOURS	26612N102	P	8/25/2016	6/5/2019	25			26	-1	0	0	0	-1														
18 DUPONT DE NEUMOURS	26612N102	P	8/25/2016	11/22/2019	6,544			7,911	-1,367	0	0	0	-1,367														
19 DUPONT DE NEUMOURS	26612N102	P	9/13/2016	11/22/2019	4,378			5,132	-754	0	0	0	-754														
20 DUPONT DE NEUMOURS	26612N102	P	4/24/2018	11/22/2019	4,378			6,423	-2,045	0	0	0	-2,045														
21 DISCOVER FINANCIAL	254709108	P	12/26/2017	5/3/2019	51,979			48,973	3,006	0	0	0	3,006														
22 DOW INC	260557103	P	8/25/2016	4/5/2019	19			18	1	0	0	0	1														
23 ELANCO ANIMAL HEALTH	28414H103	P	2/19/2019	3/11/2019	13,578			12,178	1,400	0	0	0	1,400														
24 ELANCO ANIMAL HEALTH	26612N102	P	2/19/2019	3/14/2019	22			19	3	0	0	0	3														
25 FEDERATED INVESTORS	314211103	P	6/22/2018	3/4/2019	29,534			23,520	6,014	0	0	0	6,014														
26 FISERV INC	337738108	P	11/27/2018	7/29/2019	52			29	23	0	0	0	23														
27 FISERV INC	337738108	P	11/27/2018	9/5/2019	16,285			8,876	7,409	0	0	0	7,409														
28 GENERAL ELECTRIC	369604103	P	11/2/2018	3/6/2019	3,758			3,744	14	0	0	0	14														
29 GENERAL ELECTRIC	369604103	P	12/13/2018	3/6/2019	9,395			7,450	1,945	0	0	0	1,945														
30 GENERAL ELECTRIC	369604103	P	4/17/2018	3/6/2019	25,633			22,630	3,003	0	0	0	3,003														
31 KELLOGG CO	487636108	P	12/20/2017	7/15/2019	16,375			19,754	-3,379	0	0	0	-3,379														
32 KRAFT HENIZ	500754106	P	11/2/2018	4/9/2019	6,608			10,124	-3,516	0	0	0	-3,516														
33 KRAFT HENIZ	500754106	P	3/7/2019	7/17/2019	6,058			6,530	-472	0	0	0	-472														
34 MEDTRONIC	G5960L103	P	11/22/2016	11/7/2019	17,475			14,510	2,965	0	0	0	2,965														
35 MEDTRONIC	G5960L103	P	12/23/2016	11/7/2019	17,476			14,422	3,054	0	0	0	3,054														
36 MICRON TECHNOLOGY	595112103	P	12/31/2018	2/8/2019	15,228			12,712	2,516	0	0	0	2,516														
37 MICRON TECHNOLOGY	595112103	P	3/22/2019	5/16/2019	7,515			8,598	-1,083	0	0	0	-1,083														
38 ENVISTA HOLDINGS	29415F104	P	11/29/2019	12/19/2019	7			7	0	0	0	0	0														
39 ENVISTA HOLDINGS	500754106	P	11/29/2019	12/19/2019	15,747			14,467	1,280	0	0	0	1,280														
40 ORACLE CORP	66399X105	P	10/3/2017	3/13/2019	21,321			19,560	1,761	0	0	0	1,761														
41 PAYPAL HLDGS	70450Y103	P	11/8/2018	7/29/2019	22,720			17,796	4,924	0	0	0	4,924														
42 QUALCOMM INC	747525103	P	3/20/2018	5/16/2019	16,502			11,818	4,684	0	0	0	4,684														
43 MOLSON COORS BREWER	60871R209	P	4/17/2018	12/27/2019	16,139			21,932	-5,793	0	0	0	-5,793														
44 UNITED TECHNOLOGIES	913017109	P	5/14/2012	10/9/2019	13,219			7,651	5,568	0	0	0	5,568														



**Part VII-A, Line 10 (990-PF) - Substantial Contributors**

	Name	Check "X" if Business	Street	City	State	Zip Code	Foreign Country
<b>1</b>	THOMAS A RUDER		PO BOX 2482	EVANSVILLE	IN	47728-0482	
<b>2</b>	SHARON K RUDER		PO BOX 2482	EVANSVILLE	IN	47728-0482	

**Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers**

	Name	Check "X" if Business	Street	City	State	Zip Code	Foreign Country	Title	Avg Hrs Per Week	Compensation	Benefits	Expense Account
1	THOMAS A RUDER		PO BOX 2482	EVANSVILLE	IN	47728		PRESIDENT	4 00	0		
2	SHARON K RUDER		PO BOX 2482	EVANSVILLE	IN	47728		SECRETARY	2 00	0		
3	BRYAN A RUDER		PO BOX 2075	EVANSVILLE	IN	47728		VICE PRESIDENT	2 00	0		
4	Robert C Kozsan		PO BOX 2482	Evansville	IN	47728		TREASURER	2 00	0		