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Form 990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

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

Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0052

2020

Open to Public Inspection

For calendar year 2020, or tax year beginning 01-01-2020, and ending 12-31-2020

Name of foundation
MICHIGAN CITY COMMUNITY
ENRICHMENT CORPORATION

Number and street (or P.O. box number if mail is not delivered to street address)
100 EAST MICHIGAN BOULEVARD

City or town, state or province, country, and ZIP or foreign postal code
MICHIGAN CITY, IN 46360

G Check all that apply:

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16)

\$104,674

J Accounting method:

☐ Cash

☒ Accrual

☐ Other (specify)

(Part I, column (d) must be on cash basis.)

A Employer identification number

35-2036426

B Telephone number (see instructions)

(219) 873-1408

C If exemption application is pending, check here

☐

D 1. Foreign organizations, check here.....

☐

2. Foreign organizations meeting the 85% test, check here and attach computation ...

☐

E If private foundation status was terminated under section 507(b)(1)(A), check here

☐

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

☐

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)	554,656		
	2 Check ☐ if the foundation is not required to attach Sch. B			
	3 Interest on savings and temporary cash investments	2,220	2,220	
	4 Dividends and interest from securities			
	5a Gross rents			
	b Net rental income or (loss)			
	6a Net gain or (loss) from sale of assets not on line 10			
	b Gross sales price for all assets on line 6a			
	7 Capital gain net income (from Part IV, line 2)		0	
	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)				
12 Total. Add lines 1 through 11	556,876	2,220		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	3,300	0	3,300
	14 Other employee salaries and wages			
	15 Pension plans, employee benefits			
	16a Legal fees (attach schedule)	7,840	0	0
	b Accounting fees (attach schedule)	2,500	0	0
	c Other professional fees (attach schedule)	511	0	0
	17 Interest			
	18 Taxes (attach schedule) (see instructions)	43	0	0
	19 Depreciation (attach schedule) and depletion			
	20 Occupancy			
	21 Travel, conferences, and meetings			
	22 Printing and publications	510	0	510
	23 Other expenses (attach schedule)	167	0	0
	24 Total operating and administrative expenses. Add lines 13 through 23	14,871	0	3,810
	25 Contributions, gifts, grants paid	745,335		745,335
26 Total expenses and disbursements. Add lines 24 and 25	760,206	0	749,145	
	27 Subtract line 26 from line 12:			
	a Excess of revenue over expenses and disbursements	-203,330		
	b Net investment income (if negative, enter -0-)		2,220	
c Adjusted net income (if negative, enter -0-)				

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11289X

Form 990-PF (2020)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)			
		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	303,152	104,674	104,674
	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)			
	c	Investments—corporate bonds (attach schedule)			
	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 ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	303,152	104,674	104,674	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable	643,335	639,206	
	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)	643,335	639,206	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ☒ and complete lines 24, 25, 29 and 30.				
	24	Net assets without donor restrictions		0	
	25	Net assets with donor restrictions	-340,183	-534,532	
	Foundations that do not follow FASB ASC 958, check here ☐ and complete lines 26 through 30.				
	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			
	29	Total net assets or fund balances (see instructions)	-340,183	-534,532	
30	Total liabilities and net assets/fund balances (see instructions) .	303,152	104,674		

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	-340,183
2	Enter amount from Part I, line 27a	2	-203,330
3	Other increases not included in line 2 (itemize) ▶ _____	3	8,981
4	Add lines 1, 2, and 3	4	-534,532
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	-534,532

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., 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.)
1a			

(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)
a			
b			
c			
d			
e			

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) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) $\left\{ \begin{array}{l} \text{If gain, also enter in Part I, line 7} \\ \text{If (loss), enter -0- in Part I, line 7} \end{array} \right\}$	2	
	3	
3 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		

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE**

1 Reserved			
(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
2 Reserved	2		
3 Reserved.	3		
4 Reserved	4		
5 Reserved	5		
6 Reserved	6		
7 Reserved	7		
8 Reserved ,	8		

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
b	Reserved.	1	31
c	All other domestic foundations enter 1.39% 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-)	2	0
3	Add lines 1 and 2.	3	31
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-.	5	31
6	Credits/Payments:		
a	2020 estimated tax payments and 2019 overpayment credited to 2020	6a	37
b	Exempt foreign organizations—tax withheld at source	6b	0
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	37
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.	8	0
9	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	6
11	Enter the amount of line 10 to be: Credited to 2021 estimated tax 6 Refunded	11	0

Part VII-A Statements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>	1a		No
c	Did the foundation file Form 1120-POL for this year?	1b		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ► \$ 0 (2) On foundation managers. ► \$ 0	1c		No
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	5		No
6	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	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	7	Yes	
8a	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? <i>If "No," attach explanation.</i>	8b	Yes	
9	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 2020 or the taxable year beginning in 2020? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	10	Yes	

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	13	Yes	
14	The books are in care of ► <u>HARBOUR TRUST AND INVESTMENT</u> Telephone no. ► <u>(219) 877-3512</u>			

Located at ► 1024 N KARWICK ROAD MICHIGAN CITY IN ZIP+4 ► 46360

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 2020, 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?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

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.

1a	During the year did the foundation (either directly or indirectly):		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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 ☒ 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.) ☐ Yes ☒ No			
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	1b		
	Organizations relying on a current notice regarding disaster assistance check here. ► ☐			
c	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 2020?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? ☐ Yes ☒ No			
	If "Yes," list the years ► 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b		
c	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 ☒ No			
b	If "Yes," did it have excess business holdings in 2020 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 2020.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2020?	4b		No

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

5a	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))?	☐ Yes ☒ No		
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	☐ Yes ☒ 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?	☐ Yes ☒ No		
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		5b	
	Organizations relying on a current notice regarding disaster assistance check here. 	☐		
c	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?	☐ Yes ☐ No		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No	7b	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	☐ Yes ☒ No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, 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
See Additional Data Table				
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. 				0

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. ▶		0

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
1	
2	
3	
4	

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
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	179,613
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	179,613
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	179,613
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	2,694
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	176,919
6	Minimum investment return. Enter 5% of line 5.	6	8,846

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.)

1	Minimum investment return from Part X, line 6.	1	8,846
2a	Tax on investment income for 2020 from Part VI, line 5.	2a	31
b	Income tax for 2020. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	31
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	8,815
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	8,815
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	8,815

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	749,145
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	749,145
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	749,145

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 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				8,815
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only.			0	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2020:				
a From 2015.	761,037			
b From 2016.	729,256			
c From 2017.	774,421			
d From 2018.	746,538			
e From 2019.	744,983			
f Total of lines 3a through e.	3,756,235			
4 Qualifying distributions for 2020 from Part XII, line 4: ► \$ 749,145				
a Applied to 2019, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2020 distributable amount.				8,815
e Remaining amount distributed out of corpus	740,330			
5 Excess distributions carryover applied to 2020. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	4,496,565			
b Prior years' undistributed income. Subtract line 4b from line 2b.		0		
c 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.		0		
d Subtract line 6c from line 6b. Taxable amount—see instructions.		0		
e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions.			0	
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				0
7 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).	0			
8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions).	761,037			
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a.	3,735,528			
10 Analysis of line 9:				
a Excess from 2016.	729,256			
b Excess from 2017.	774,421			
c Excess from 2018.	746,538			
d Excess from 2019.	744,983			
e Excess from 2020.	740,330			

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:
MICHIGAN CITY COMMUNITY ENRICHMENT
100 E MICHIGAN BLVD
MICHIGAN CITY, IN 46360
(219) 873-1408

b The form in which applications should be submitted and information and materials they should include:
SEE EXAMPLE OF GRANT APPLICATION ATTACHED

c Any submission deadlines:
TO BE DETERMINED ON AN ANNUAL BASIS

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
APPLICANT MUST BE CONSIDERED A CHARITABLE ORGANIZATION UNDER SEC. 501(C)(3) AS DEFINED BY THE INTERNAL REVENUE SERVICE.

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total ▶ 3a				745,335
b <i>Approved for future payment</i> See Additional Data Table				
Total ▶ 3b				639,206

Enter gross amounts unless otherwise indicated.

	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) (See instructions.)
1 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments.					
3 Interest on savings and temporary cash investments			14	2,220	
4 Dividends and interest from securities.					
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					
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		2,220	0
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)			13		2,220

[illegible]

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 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?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of:			
(1) Cash.		1a(1)	No
(2) Other assets.		1a(2)	No
b Other transactions:			
(1) Sales of assets to a noncharitable exempt organization.		1b(1)	No
(2) Purchases of assets from a noncharitable exempt organization.		1b(2)	No
(3) Rental of facilities, equipment, or other assets.		1b(3)	No
(4) Reimbursement arrangements.		1b(4)	No
(5) Loans or loan guarantees.		1b(5)	No
(6) Performance of services or membership or fundraising solicitations.		1b(6)	No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.		1c	No
d 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.			

[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.		
	*****	2021-11-02	*****
	_____ Signature of officer or trustee	_____ Date	_____ Title

May the IRS discuss this return with the preparer shown below
 (see instr.) ☒ **Yes** ☐ **No**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ☐	PTIN
	DIANE D WILCZEWSKI CPA		2021-11-02		P01261776
	Firm's name ▶ SOMERSET CPAS AND ADVISORS				Firm's EIN ▶ 20-1717681
	Firm's address ▶ 409 W KIEFFER RD MICHIGAN CITY, IN 46360				Phone no. (219) 874-1437

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
GEORGE KAZMIERCZAK	PRESIDENT 1.00	0	0	0
100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360				
CHRIS CARTER	DIRECTOR 1.00	0	0	0
100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360				
STEVE JANUS	SECRETARY/TREASURER 1.00	0	0	0
100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360				
SUE WEBSTER	DIRECTOR 1.00	3,300	0	0
100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360				
JACK VANETTEN	VICE PRESIDENT 1.00	0	0	0
100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360				
BRET COX	DIRECTOR 1.00	0	0	0
100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360				
CONNIE ANDERSON	DIRECTOR 1.00	0	0	0
100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360				
RUDY COHN	DIRECTOR 1.00	0	0	0
100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360				
PETE XIDIAS	DIRECTOR 1.00	0	0	0
100 EAST MICHIGAN BLVD MICHIGAN CITY, IN 46360				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MCAS HOURS FOR OURS 100 MANNY COURT MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	HOURS FOR OURS SCHOOL BASED MENTORING PROGRAM	5,000
INTERFAITH COMMUNITY PADS INC 7871 WEST 400 NORTH MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	ICPI'S WOMAN'S OVERNIGHT SHELTER	15,000
JACK & SHIRLEY LUBEZNIK CENTER FOR THE ARTS 101 W 2ND ST 100 MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	LCA STUDENT LEARNING TOUR PROGRAM	3,000
Total ► 3a				745,335

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JACK & SHIRLEY LUBEZNIK CENTER FOR THE ARTS 101 W 2ND ST 100 MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	FREE ADMISSION FOR 2020 LUBEZNIK ARTS FESTIVAL	2,500
JUNIOR ACHIEVEMENT 613 FRANKLIN STREET MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	CAREER READINESS & FINANCIAL LITERACY IN MICHIGAN CITY AREA	5,000
LA PORTE COUNTY MEALS ON WHEELS INC 301 E 8TH ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	KEEP ON ROLLING	24,650
Total ▶ 3a				745,335

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LA PORTE COUNTY SYMPHONY PO BOX 563 MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	FREE OUTDOOR EVENING WITH THE LSCO	4,000
MCAS SAFE HARBOR100 MANNY COURT MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	MCAS SAFE HARBOR SUMMER S.T.E.A.M. CAMP	10,000
MICHIANA MARINES DETACHMENT #1348 PO BOX 8873 MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	TOYS FOR TOTS 2020 CAMPAIGN	5,000
Total ► 3a				745,335

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MICHIGAN CITY AREA SCHOOLS 408 SOUTH CARROLL AVENUE MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	MCAS "FUTURE WOLVES" ELEMENTARY SPORTS PROGRAM	4,200
MICHIGAN CITY CHAMBER MUSIC FESTIVAL 121 W 9TH STREET MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	MICHIGAN CITY CHAMBER MUSIC FESTIVAL: PROGRAM FOR CHILDREN	3,000
NORTH CENTRAL COMMUNITY ACTION AGENCIES INC 301 E 8TH ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	NORTH CENTRAL COMMUNITY ACTION AGENCY WHEELCHAIR RAMP	20,000
Total ▶ 3a				745,335

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NORTH CENTRAL COMMUNITY ACTION AGENCIES INC 301 E 8TH ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	CHILDREN'S VISION SCREENING	8,000
OPEN DOOR COMMUNITY ALLIANCE INC PO BOX 9726 MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	OPEN DOOR ADOLESCENT HEALTH CENTER	32,500
OPEN DOOR COMMUNITY ALLIANCE INC PO BOX 9726 MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	MEDICATION ASSISTANCE	15,000
Total ▶ 3a				745,335

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
INTERFAITH COMMUNITY PADS INC 7871 WEST 400 NORTH MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	ICPI'S MEN'S OVERNIGHT SHELTER	15,000
PALADIN INC4315 E MICHIGAN BLVD MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	TRANSPORTATION SERVICES FOR ELDERLY AND DISABLED	50,000
REINS OF LIFE INC9375 W 300 N MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	HORSE PURCHASE FOR EQUINE - ASSISTED PROGRAMS	4,500
Total ▶ 3a				745,335

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
REINS OF LIFE INC9375 W 300 N MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	HORSE CARE FOR THERAPUETIC ACIVITIES AT REINS	20,000
SAFE HARBOR100 MANNY COURT MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	EMERGENCY GRANT FUNDING TO SAFE HARBOR NURTURING MINDAS MCAS	2,025
SAFE HARBOR100 MANNY COURT MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	LEARNING BY LEADING: PEER TO PEER STUDENT MENTORSHIP	2,000
Total ▶ 3a				745,335

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SOCIAL & LEARNING INSTITUTE FOR DISADVANTAGED INC 201 E GARFIELD ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	CLASSROOM ENHANCEMENT	3,500
SOUL STEPPERS DRILL TEAM INC 1033 PROVIDENCE ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	STEPPING INTO HISTORY	12,000
STEPPING STONE SHELTER FOR WOMEN INC PO BOX 1045 MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	DOMESTIC VIOLENCE AND SECUAL ASSAULT PREVENTION, ADVOCACY AND EDUCATION	65,000
Total ▶ 3a				745,335

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE SALVATION ARMY 1201 FRANKLIN ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	MEN'S HOMELESS SHELTER	36,000
THE SALVATION ARMY 1201 FRANKLIN ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	PATHWAY OF HOPE	5,000
THE SALVATION ARMY 1201 FRANKLIN ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	GIFT OF WARMTH	40,000
Total ▶ 3a				745,335

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE SALVATION ARMY 1201 FRANKLIN ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	FOOD PANTRY PROGRAM	25,000
THE SALVATION ARMY 1201 FRANKLIN ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	FEEDING PROGRAM	6,000
YOUTH SERVICE BUREAUBIG BROTHERS BIG SISTERS 228 W FOURTH ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	KIDS ON THE BLOCK	5,000
Total ▶ 3a				745,335

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
YOUTH SERVICE BUREAUBIG BROTHERS BIG SISTERS 228 W FOURTH ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	MICHIGAN CITY TEEN COURT	20,000
PALADIN INC4315 E MICHIGAN BLVD MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SUMMER CAMP ENRICHMENT CAMP	10,000
INDIANA GUARDIANSHIP SERVICES INC 813 LINCOLNWAY SUITE 401 LAPORTE, IN 46350	NONE	PUBLIC CHARITY	VASIA GUARDIANSHIP PROGRAM	15,000
Total ▶ 3a				745,335

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ARISE & SHINE BREAKFAST MINISTRY'S INC 717 E 10TH STREET MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	ADDITIONAL 2020 GRANT AWARD	2,000
INDIANA BLACK EXPO INC 450 ST JOHN ROAD SUITE 452 MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	CITY-WIDE AFTER SCHOOL PROGRAM	2,500
CITIZENS CONCERNED FOR THE HOMELESS INC 1005 W 8TH STREET MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	GRACE LEARNING CENTER HIGH SHCOOL EQUIVALENCY PROGRAM	2,500
Total ▶ 3a				745,335

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CITIZENS CONCERNED FOR THE HOMELESS INC 1005 W 8TH STREET MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	GRACE LEARNING CENTER PROGRAM	6,000
CITIZENS CONCERNED FOR THE HOMELESS INC 1005 W 8TH STREET MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SAND CASTLE SHELTER START SMART	500
CITIZENS CONCERNED FOR THE HOMELESS INC 1005 W 8TH STREET MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	KEYS TO HOPE COMMUNITY RESOURCE CENTER PROGRAM	19,000
Total			3a	745,335

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CITIZENS CONCERNED FOR THE HOMELESS INC 1005 W 8TH STREET MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	CCH'S FOOD RESCUE INITIATIVE	5,000
BOYS & GIRLS CLUB OF MICHIGAN CITY 321 DETROIT STREET MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	IMMERSING STUDENTS IN THE REAL WORLD THROUGH TECHNOLOGY	35,000
BARKER MIDDLE SCHOOL 319 EAST BARKER ROAD MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	IMMERSING STUDENTS IN THE REAL WORLD THROUGH TECHNOLOGY	7,000
Total ► 3a				745,335

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ARTS FOR LEARNING 1660 COUNTY LINE ROAD MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	DANCING THROUGH THE CURRICULUM	3,000
CITIZENS CONCERNED FOR THE HOMELESS INC 1005 W 8TH STREET MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SAND CASTLE SHELTER FOR HOMELESS FAMILIES PROGRAM	15,000
CITY OF MICHIGAN CITY 115 LAKE SHORE DR MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	2020 CONTRIBUTION TO MICHIGAN CITY ZOO	100,000
Total ► 3a				745,335

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ARISE & SHINE BREAKFAST MINISTRY'S INC 717 E 10TH STREET MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SENIOR SOCIAL ISOLATION PREVENTION PROGRAM (SSIPP)	2,000
ARISE & SHINE BREAKFAST MINISTRY'S INC 717 E 10TH STREET MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SENIOR SOCIAL ISOLATION PREVENTION PROGRAM (SSIPP)	5,000
FLY HIGH YOUTH SERVICES 401 E 6TH ST APT 3 MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SOAR PROGRAM	2,000
Total ▶ 3a				745,335

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ADVANCING CHRIST'S KINGDOM MINISTRIES 1407 E MICHIGAN BLVD MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	MICHIGAN CITY FOOD BANK	5,000
HARMONY HOUSECASA OF LAPORTE COUNTY INC 1005 MICHIGAN AVE LAPORTE, IN 46350	NONE	PUBLIC CHARITY	CPURT APPOINTED YOUTH ADVOCATE PROGRAM	12,000
AMERICAN RED CROSS OF NORTHWEST INDIANA 791 83RD AVE MERRILLVILLE, IN 46410	NONE	PUBLIC CHARITY	HOME FIRE RELIEF	2,500
Total ▶ 3a				745,335

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FOOTLIGHT PLAYERS INC 1705 FRANKLIN ST MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	2020 YOUTH THEATRICAL WORKSHOP	1,500
ANTHONY ADAMS HOUSE 209 N WOODLAND AVE MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	SAVE OUR YOUTH	2,000
CITIZENS CONCERNED FOR THE HOMELESS INC 1005 W 8TH STREET MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	H.E.A.L. GARDENS OF MICHIGAN CITY	2,960
Total ▶ 3a				745,335

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DUNEBROOK7451 W JOHNSON ROAD MICHIGAN CITY, IN 46360	NONE	PUBLIC CHARITY	DUNEBROOK	20,000
Total ► 3a				745,335

TY 2020 Accounting Fees Schedule

Name: MICHIGAN CITY COMMUNITY
ENRICHMENT CORPORATION

EIN: 35-2036426

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ROWLEY AND COMPANY, LLP	2,500	0		0

TY 2020 Legal Fees Schedule

Name: MICHIGAN CITY COMMUNITY
ENRICHMENT CORPORATION

EIN: 35-2036426

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LAKE LAW OFFICE	7,840	0		0

TY 2020 Other Expenses Schedule

Name: MICHIGAN CITY COMMUNITY
ENRICHMENT CORPORATION

EIN: 35-2036426

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE SUPPLIES	167	0		0

TY 2020 Other Increases Schedule

Name: MICHIGAN CITY COMMUNITY
ENRICHMENT CORPORATION

EIN: 35-2036426

Other Increases Schedule

Description	Amount
CONTRIBUTION RETURNED - INCOME MODIFICATION	4,852
FUTURE GRANTS PREVIOUSLY REPORTED INCORRECTLY IN 2019 BUT PAID IN 2020	4,129

TY 2020 Other Professional Fees Schedule

Name: MICHIGAN CITY COMMUNITY
ENRICHMENT CORPORATION

EIN: 35-2036426

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	511	0		0

**TY 2020 Substantial Contributors
Schedule**

Name: MICHIGAN CITY COMMUNITY
ENRICHMENT CORPORATION

EIN: 35-2036426

Name	Address
BLUE CHIP CASINO INC	777 BLUE CHIP DRIVE MICHIGAN CITY, IN 46360

TY 2020 Taxes Schedule

Name: MICHIGAN CITY COMMUNITY
ENRICHMENT CORPORATION
EIN: 35-2036426

Taxes Schedule

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL TAXES	43	0		0

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information.	OMB No. 1545-0047
		2020
Name of the organization MICHIGAN CITY COMMUNITY ENRICHMENT CORPORATION		Employer identification number 35-2036426

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

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 990PF, 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
MICHIGAN CITY COMMUNITY
ENRICHMENT CORPORATION

Employer identification number
35-2036426

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	BLUE CHIP CASINO INC 777 BLUE CHIP DRIVE MICHIGAN CITY, IN 46360	\$ 554,656	☒ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Name of organization MICHIGAN CITY COMMUNITY ENRICHMENT CORPORATION	Employer identification number 35-2036426
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given (see instructions). Use duplicate copies of Part II if additional space is needed.	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	

Name of organization MICHIGAN CITY COMMUNITY ENRICHMENT CORPORATION	Employer identification number 35-2036426
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Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____**

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
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee