

Department of the Treasury
Internal Revenue Service

Not: You may be able to use a copy of this return to satisfy state reporting requirements.

For the calendar year 1989, or fiscal year beginning **JULY 1**, 1989, and ending **JUNE 30**, 1990

FILMED

Please type, print, or attach label. See Specific Instructions.	Name of organization WALTHER CANCER EDUCATION, INC.	A Employer identification number 35-1650573
	Address (number and street) 3202 NORTH MERIDIAN STREET	B State registration number (see instructions) 735557-02
	City or town, state, & ZIP code INDIANAPOLIS IN 46208	C If application pending, check here <input type="checkbox"/> D Foreign organizations, check here <input type="checkbox"/>
G Check type of organization: <input checked="" type="checkbox"/> Exempt private foundation <input type="checkbox"/> 4947(a)(1) trust <input type="checkbox"/> Other taxable private foundation		E If your private foundation status terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
H Fair market value of assets at end of year (from Part II, col. (c), line 16)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
I Section 4947(a)(1) trusts filing this form in lieu of Form 1041, see General Instructions and question 19 of Part VII.		

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
Revenue	1 Contrib., gifts, grants, etc., received (att. sch.)	2,000			
	2 Contributions from split-interest trusts				
	3 Interest on savings & temp. cash investments				
	4 Dividends and interest from securities				
	5a Gross rents ... INTERNAL REVENUE SERVICE				
	b (Net rental income (loss))				
	6 Net gain/(loss) from sale of assets not on line 10				
	7 Capital gain net income (from Part III, line 2a)	30			
	8 Net short-term capital gain				
	9 Income modifications				
Operating and Administrative Expenses	10a Gross sales less rtn. & allow.				
	b Minus: Cost of goods sold				
	c Gross profit (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total (add lines 1 through 11)	2,000	0		
	13 Comp. 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)	4,400		4,400	
c Other professional fees (attach sch.)					
17 Interest					
18 Taxes (attach schedule)					
19 Depreciation (attach schedule) & depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses (attach schedule)	46		46		
24 Total operating and administrative expenses (add lines 13 through 23)	4,446	0	4,446	0	
25 Contributions, gifts, grants paid	2,166			2,166	
26 Total expenses and disbursements (add lines 24 and 25)	6,612	0	4,446	2,166	
27a Excess of revenue over expenses & disbursements (line 12 minus line 26)	-4,612				
b Net investment income (if negative enter -0-)		0			
c Adjusted net income (if negative enter -0-)			0		

Part II Balance Sheets		Attached schedules and amounts in the description columns 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	4,612		
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		minus: allowance for doubtful accts. ▶			
	4	Pledges receivable ▶			
		minus: allowance for doubtful accts. ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes & loans receivable (attach sch.) ▶			
		minus: allowance for doubtful accts. ▶			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10	Investments -- securities (attach schedule)			
	11	Investments -- land, buildings, & equip.: basis ▶			
		minus: accumulated depreciation (attach sch.) ▶			
12	Investments -- mortgage loans				
13	Investments -- other (attach schedule)				
14	Land, buildings, and equipment: basis ▶				
	minus: accumulated depreciation (attach sch.) ▶				
15	Other assets (describe ▶)				
	16	Total assets (complete by all filers -- see instructions)	4,612	0	0
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Support & revenue designated for future periods (attach sch.)			
	20	Loans from officers, directors, trustees, & other disqual. persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)			
Fund Balances or Net Assets	Organizations that use fund accounting check here <input checked="" type="checkbox"/> and complete lines 24 through 27 and lines 31 and 32.				
	24a	Current unrestricted fund	3,612		
	b	Current restricted fund	1,000		
	25	Land, buildings, and equipment fund			
	26	Endowment fund			
	27	Other funds (Describe ▶)			
	Organizations not using fund accounting check here <input type="checkbox"/> and complete lines 28-32.				
	28	Capital stock or trust principal			
	29	Paid-in or capital surplus			
	30	Retained earnings or accumulated income			
	31	Total fund balances or net assets (see instructions)	4,612		
	32	Total liabilities and fund balances/net assets (see instructions)	4,612	0	

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 31 (must agree with end-of-year figure reported on prior year's return)	1	4,612
2	Enter amount from Part I, line 27a	2	-4,612
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	
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 31	6	

Part IV Capital Gains and Losses for Tax on Investment Income

1 (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.)
(e) Gross sales price minus expense of sale	(f) Depreciation allowed (or allowable)	(g) Cost or other basis	(h) Gain or (loss) (e) plus (f) minus (g)		
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
(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			
2 Capital gain net income or (net capital loss)	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> If gain, also enter in Part I, line 7 If loss, enter "-0-" in Part I, line 7 </div>			2	
3 Net short-term capital gain (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				3	

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 Part V blank.

Were you liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
If "Yes," you do not qualify under section 4940(e). Do not complete this part.

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

(a) Base period years Calendar year (or fiscal year beginning in)	(b) Qualifying distributions	(c) Net value of noncharitable-use assets	(d) Payout ratio (column (b) divided by column (c))
1988	4,168	3,798	1.09741969
1987	0	3,054	0.0
1986	22,317	2,631	8.48232611
1985	53,953	1,104	48.87047101
1984			

2 Total of line 1, column (d)	2	58.45021681
3 Average payout ratio for the 5-year base period -- divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	14.61255420
4 Enter the net value of noncharitable-use assets for 1989 from Part IX, line 5	4	4,437
5 Multiply line 4 by line 3	5	64,836
6 Enter 1% of Part I, line 27b.	6	
7 Add lines 5 and 6	7	64,836
8 Enter the amount from Part XIII, line 6 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.	8	2,166

Part VI Excise Tax 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 <input type="checkbox"/> & enter "N/A" on line 1. Give date of ruling letter _____ (attach copy of ruling letter if necessary -- see instructions)		
b Domestic organizations that meet the section 4940(e) requirements in Part V. Check here <input type="checkbox"/> & enter 1% of Part I, line 27b.	1	0
c All other domestic organizations enter 2% of line 27b. Exempt foreign organizations enter 4% of line 27b.		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-).	2	
3 Add lines 1 and 2.	3	
4 Tax under subtitle A (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter "-0-").	4	
5 Tax on investment income (line 3 minus line 4 (but not less than -0-))	5	
6 Credits/Payments:		
a 1989 estimated tax payments and 1988 overpayment credited to 1989	6a	
b Exempt foreign organizations -- tax withheld at source	6b	
c Tax paid with application for extension of time to file (Form 2758)	6c	
d Backup withholding erroneously withheld.	6d	
7 Total credits and payments (add lines 6a through d)	7	
8 Enter any PENALTY for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
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	
11 Enter the amount of line 10 you want: Credited to 1990 estimated tax	11	Refunded <input type="checkbox"/>

Part VII Statements Regarding Activities

File Form 4720 if you answer "No" to question 10b, 11b, or 14b or "Yes" to question 10c, 12b, 13a, 13b, or 14a(2), unless an exception applies.

	Yes	No
1a During the tax year, did you attempt to influence any national, state, or local legislation or did you participate or intervene in any political campaign?		X
b Did you spend more than \$100 during the year (either directly or indirectly) for political purposes (see inst. for definition)? If you answered "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the organization in connection with the activities.		X
c Did you file Form 1120-POL, U.S. Income Tax Return for Certain Political Organizations, for this year?		X
2 Have you engaged in any activities that have not previously been reported to the Internal Revenue Service? If "Yes," attach a detailed description of the activities.		X
3 Have you made any changes, not previously reported to the IRS, in your governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did you have unrelated business gross income of \$1,000 or more during the year?		X
4b If "Yes," have you filed a tax return on Form 990-T, Exempt Organization Business Income Tax Return, for this year?	N/A	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the schedule required by General Instruction N.	X	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • by language written into 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	
7 Did you have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, column (c), and Part XVI.		X
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ INDIANA		
b If you answered "Yes" to 7, have you furnished a copy of Form 990-PF to the Attorney General (or his or her designate) of each state as required by the General Instructions? If "No," attach explanation.		
9 Are you claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 1989 or fiscal year beginning in 1989 (see instructions for Part XV)? If "Yes," complete Part XV	X	
10 Self-dealing (section 4941):		
a During the year did you (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	10a(1)	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	10a(2)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	10a(3)	X
(4) Pay compensation to or pay or reimburse the expenses of a disqualified person?	10a(4)	X
(5) Transfer any of your income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	10a(5)	X
(6) Agree to pay money or property to a government official? (Exception: Check "No" if you agreed to make a grant to or to employ the official for a period after he or she terminates government service, if he or she is terminating within 90 days.)	10a(6)	X

Part VII Statements Regarding Activities (continued)

10b	If you answered "Yes" to any of questions 10a(1) through (6), were the acts you engaged in excepted acts as described in Regulations sections 53.4941(d)-3 and 4?	Yes	No
		10b	N/A
c	Did you engage in a prior year in any of the acts described in 10a, other than excepted acts, that were acts or self-dealing not corrected by the first day of your tax year beginning in 1989?	10c	
11	Taxes on failure to distribute income (section 4942) (does not apply for years you were a private operating foundation as defined in section 4942(j)(3) or 4942(j)(5)):		
a	Did you at the end of tax year 1989 have any undistributed income (lines 6c and e, Part XIV) for tax year(s) beginning before 1989? If "Yes," list the years ▶	11a	X
b	If 11a is "Yes," are you applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the undistributed income for ALL such years? (If "Yes" attach statement -- see instructions.)	11b	N/A
c	If the provisions of section 4942(a)(2) are being applied to ANY of the years listed in 11a, list the years here: ▶		
12	Taxes on excess business holdings (section 4943):		
a	Did you hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	12a	X
b	If "Yes," did you have excess business holdings in 1989 as a result of any purchase by you or disqualified persons after May 3, 1969, after 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 after the lapse of the 10, 15, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if you had excess business holdings in 1989.)	12b	N/A
13	Taxes on investments that jeopardize charitable purposes (section 4944):		
a	Did you invest during the year any amount in a manner that would jeopardize your charitable purposes?	13a	X
b	Did you make any investment in a prior year (but after December 31, 1969) that could jeopardize your charitable purpose that you had not removed from jeopardy on the first day of your tax year beginning in 1989?	13b	X
14	Taxes on taxable expenditures (section 4945) and political expenditures (section 4955):		
a	During the year did you pay or incur any amount to:		
	(1) Carry on propaganda, or otherwise attempt to influence legislation by attempting to affect the opinion of the general public or any segment thereof, or by communicating with any member or employee of a legislative body, or by communicating with any other government official or employee who may participate in the formulation of legislation?	14a(1)	X
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	14a(2)	X
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	14a(3)	X
	(4) Provide a grant to an organization, other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?	14a(4)	X
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	14a(5)	X
b	If you answered "Yes" to any of questions 14a(1) through 14a(5), were all such transactions excepted transactions as described in Regulations section 53.4945?	14b	N/A
c	If you answered "Yes" to question 14a(4), do you claim exemption from the tax because you maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).	14c	N/A
15	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.	15	X
16	During this tax year did you maintain any part of your accounting/tax records on a computerized system?	16	X
17a	Did anyone request to see either your annual return or exemption application (or both)?	17a	X
b	If "Yes," did you comply pursuant to the instructions? (See General Instruction T.)	17b	N/A
18	The books are in care of WALTER CANCER FOUNDATION, INC Telephone no. (317) 927-2222 Located at ▶ 3202 NORTH MERIDIAN STREET, INDIANAPOLIS, IN 46208		
19	Section 4947(a)(1) trusts filing Form 990-PF in lieu of Form 1041, U.S. Fiduciary Income Tax Return. -- Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ▶ 19		

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) Contributions to employee benefit plans	(D) Expense account, other allowances	(E) Compensation (if not paid, enter zero)
SEE ATTACHED SCHEDULE		NONE	NONE	NONE
Total				0

Part VIII Information About Officers, Directors, Trustees, etc. (continued)

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 employees paid more than \$30,000	(B) Title and time devoted to position	(C) Contributions to employee benefit plans	(D) Expense account, other allowances	(E) Compensation
NONE		NONE	NONE	NONE

Total number of other employees paid over \$30,000 ▶ 0

3 Five highest paid persons for professional services -- (see instructions). If none, enter "NONE."

(A) Name and address of persons paid more than \$30,000	(B) Type of service	(C) Compensation
NONE		NONE

Total number of others receiving over \$30,000 for professional services ▶ 0

Part IX Minimum Investment Return (All organizations must complete this part.)

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	
b Average of monthly cash balances	1b	4,505
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines a, b, and c)	1d	4,505
e Reduction claimed for blockage or other factors (attach detailed explanation) ▶	1e	
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Line 1d minus line 2	3	4,505
4 Cash deemed held for charitable activities -- Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	68
5 Line 3 minus line 4	5	4,437
6 Minimum investment return (enter 5% of line 5)	6	222

Part X Computation of Distributable Amount (see instructions) (Section 4942(j)(3) & (j)(5) private operating foundations check and do not complete this part.)

1 Minimum investment return from Part IX, line 6	1	
2 Total of:		
a Tax on investment income for 1989 from Part VI, line 5	2a	
b Income tax under subtitle A, for 1989	2b	
3 Distributable amount before adjustments (line 1 minus line 2c)	3	
4 Additions to distributable amount:		
a Recoveries of amounts treated as qualifying distributions	4a	
b Income distributions from section 4947(a)(2) trusts	4b	
5 Line 3 plus line 4c	5	
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted (line 5 minus line 6) (Also enter in Part XIV, line 1.)	7	

Part XI Limitation on Grant Administrative Expenses

Calendar year (or fiscal year beginning in):	(a) 1989	(b) 1988	(c) 1987	(d) Total
1 Net value of noncharitable-use assets (see instructions)	4,437	3,798	3,054	11,289
2 Multiply line 1 by .0065	29	25	20	74
3 Grant administrative expenses treated as qualifying distributions (from Part XI, line 7, from the Form 990-PF for each of the two prior years)				0
4 Grant administrative expenses for 1989 (from Part XII, line 13)				
5 Maximum amount of 1989 grant administrative expenses that may be treated as qualifying distributions (line 2, column (d) minus line 3, column (d))	74			
6 Excess grant administrative expenses for 1989 (line 4 minus line 5; if negative, enter -0-; enter result in Part XIII, line 5)				
7 Grant administrative expenses treated as qualifying distributions in 1989 (line 4 minus line 6)				

Note: The amount on line 7 will be used in completing the schedule for 1990.

Part XII Schedule of Grant Administrative Expenses (see instructions)

1 Compensation of officers, directors, trustees, etc.	1	
2 Other employee salaries and wages	2	
3 Pension plans, employee benefits	3	
4 Legal fees	4	
5 Accounting fees	5	
6 Other professional fees	6	
7 Interest	7	
8 Taxes	8	
9 Occupancy	9	
10 Travel, conferences, and meetings	10	
11 Printing and publications	11	
12 Other expenses	12	
13 Total (add lines 1 through 12)	13	

Part XIII 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	2,166
b Program-related investments	1b	
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 Total (add lines 1a through 3b)	4	2,166
5 Enter excess grant administrative expenses from Part XI, line 6	5	
6 Total qualifying distributions (line 4 minus line 5). Enter this amount in Part XIV, line 4	6	2,166
7 Organizations 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)	7	
8 Qualifying distributions (line 6 minus line 7)	8	2,166

Note: The amount on line 8 will be used in Part V, column (b), when calculating the section 4940(e) reduction of tax in subsequent years.

Part XIV Computation of Undistributed Income (see instructions)

N/A

	(a) Corpus	(b) Years prior to 1988	(c) 1988	(d) 1989
1 Distributable amount for 1989 from Part X.....				
2 Undistributed income, if any, as of the end of 1988:				
a Enter amount for 1988 only.....				
b Total for prior years: 19____ 19____ 19____				
3 Excess distributions carryover, if any to 1989:				
a From 1984.....				
b From 1985.....				
c From 1986.....				
d From 1987.....				
e From 1988.....				
f Total of lines 3a through e.....				
4 Qualified distributions for 1989:				
a Applied to 1988, but not more than line 2a.....				
b Applied to undistributed income of prior years (Election required -- see instructions).....				
c Treated as distributions out of corpus (Election required -- see instructions).....				
d Applied to 1989 distributable amount.....				
e Remaining amount distributed out of corpus.....				
5 Excess distributions carryover applied to 1989..... (if an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus: Add lines 3i, 4c, and 4e. Subtract line 5. b Prior years' undistributed income (line 2b minus line 4b).....				
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.....				
d Subtract line 6c from line 6b. Taxable amount -- see instructions.....				
e Undistributed income for 1988 (line 2a minus line 4a). Taxable amount -- see instructions.....				
f Undistributed income for 1989 (line 1 minus lines 4d and 5). The amount must be distributed in 1990.....				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(E) or 4942(g)(3) (see instructions).....				
8 Excess distributions carryover from 1984 not applied on line 5 or line 7 (see instructions).....				
9 Excess distributions carryover to 1990 (line 6a minus lines 7 and 8).....				
10 Analysis of line 9:				
a Excess from 1985.....				
b Excess from 1986.....				
c Excess from 1987.....				
d Excess from 1988.....				
e Excess from 1989.....				

Part XV Private Operating Foundations (see instructions and Part VII, 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 1989, enter the date of the ruling ▶ 1/26/90

b Check box to indicate whether you are a private operating foundation described in section 4942(j)(3) or 4942(j)(5).

	Tax year		Prior 3 years		(e) Total
	(a) 1989	(b) 1988	(c) 1987	(d) 1986	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for 1989, 1988, 1987, and 1986					
b 85% of line 2a					
c Qualifying distributions from Part XIII, line 6, for 1989, 1988, 1987, and 1986	2166	4168		22317	28651
d Amts. included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities (line 2c minus line 2d)	2166	4168		22317	28651
3 Complete 3a, b, or c for the alternative test on which you rely:					
a "Assets" alternative test -- enter:					
(1) Value of all assets		4612	3100	3100	10812
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		4612	3100	3100	10812
b "Endowment" alternative test -- Enter 2/3 of minimum investment return shown in Part IX, line 6, for 1989, 1988, 1987, and 1986	148	127	102	88	465
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)(ii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XVI Supplementary Information (Complete only if you had \$5,000 or more in assets at any time during the year -- see inst.)

1 Information Regarding Foundation Managers: N/A

a List here 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).)

NONE

b List here 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.

NONE

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

Check here if you only make contributions to preselected charitable organizations and do not accept unsolicited requests for funds. If you make gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed.

b The form in which applications should be submitted and information and materials they should include.

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XVI Supplementary Information (continued)

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
Total				▶ 3a
b Approved for future payment				
Total				▶ 3b

Part XVII-A Summary of Grant Programs and Other Activities

	(a) Grants and program-related investments	(b) Administrative expenses	(c) Total
1 Gifts, contributions, scholarships and other grants			
2 Direct charitable activities (describe each):			
a SEE ATTACHED SCHEDULE			2,166
b			
c Direct technical and other assistance to grantees (see instructions)			
d All other (attach schedule)			
e Total -- add lines 2a through d			2,166
3 Program-related investments (describe each type):			
a			
b			
c			
d All other (attach schedule)			
e Total -- see instructions			
4 Other qualifying distributions			
5 Other expenses not included in lines 1-4			

Part XVIII Supporting Data

- 1** For the foundation's principal direct charitable activities and program-related investments, provide a schedule of relevant statistical information, such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A
- 2** Attach a schedule for Part XVII-A, lines 2 and 3, setting forth for each activity or investment area the amount of any income produced by it. N/A

Part XVIII-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:					
(a)					
(b)					
(c)					
(d)					
(e)					
(f)					
(g) Fees from government agencies					
2 Membership dues and assessments					
3 Interest on savings & temporary cash investments					
4 Dividends and interest on securities					
5 Net rental income (loss) from real estate:					
(a) debt-financed property					
(b) not debt-financed property					
6 Net rental income (loss) from personal property . .					
7 Other investment income					
8 Gain (loss) from sales of assets other than inventory					
9 Net income from special fundraising events					
10 Gross profit (loss) from sales of inventory					
11 Other revenue: (a)					
(b)					
(c)					
(d)					
(e)					
12 Subtotal (add columns (b), (d), and (e))					
13 TOTAL (add line 12, columns (b), (d), and (e)) ▶					0

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

Line No. ↓	Explain below how each activity for which income is reported in column (e) of Part XVIII-A contributed importantly to the accomplishment of your exempt purposes (other than by providing funds for such purposes).

Part XIII 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) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
- | | Yes | No |
|---|-----|----|
| a Transfers from the reporting organization to a noncharitable exempt organization of: | | |
| (i) Cash | | X |
| (ii) Other assets | | X |
| b Other Transactions: | | |
| (i) Sales of assets to a noncharitable exempt organization | | X |
| (ii) Purchases of assets from a noncharitable exempt organization | | X |
| (iii) Rental of facilities or equipment | | X |
| (iv) Reimbursement arrangements | | X |
| (v) Loans or loan guarantees | | X |
| (vi) Performance of services or membership or fundraising solicitations | | X |
| c Sharing of facilities, equipment, mailing lists or other assets, or paid employees | | X |
- d** If answer to any of the above is "Yes," complete the following schedule. The "Amount involved" column below should always indicate the value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, the column should also include the value of the goods, other assets, or services received.

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (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

Public Inspection

- Enter the date the notice of availability of the annual return appeared in a newspaper ▶ 11/6/90
- Enter the name of the newspaper ▶ Indianapolis Commercial
- Check here if you have attached a copy of the newspaper notice as required by the instructions. (If the notice is not attached, the return will be considered incomplete.)

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 or fiduciary) is based on all information of which preparer has any knowledge.

Please Sign Here	Signature of officer or trustee <i>[Signature]</i>	Date 11-8-90	Title Exec. Vice Pres.
	Preparer's signature <i>[Signature]</i>	Date 11/3/90	Preparer's social security no. [Redacted]
Paid Preparer's Use Only	Firm's name (or yours if self-employed) and address ERNST & YOUNG INDIANAPOLIS, INDIANA	E.I. No. 34-6565596	ZIP code 46204
	Check if self-employed <input type="checkbox"/>		

G. ROBERT WRIGHT
Attorney

Notice on Final Account, Etc.
to All Persons Interested
in the Estate of
Arvo U Somppi

In the Marion Superior Court
Probate Division
In the Matter of the Estate of Arvo U.
Somppi, deceased.
Estate Docket: 49D08-9004-ES0761
Notice is hereby given that Herbert
R. McGinnis as Executor of the
above named estate, has filed report of
final accounting together with petition
to make distribution of remaining assets
to the parties believed entitled thereto.
The same will come up for action by the
Marion Superior Court, Probate Division,
on the 4th day of December, 1990,
unless persons interested in said
estate appear on or before said date and
show cause, if any there be, why such
accounting should not be approved or
unless such person make proof of their
claim and claim any part of such estate not
shown by such report.
FAYE L. MOWERY
Clerk of the Marion
Superior Court
Probate Division
90-8450-11:6

ROBERT C. THOMPSON, JR.
Attorney

Notice on Final Account, Etc.
to All Persons Interested
in the Estate of
Frances Celeste Richert

In the Marion Superior Court
Probate Division
In the Matter of the Estate of Frances
Celeste Richert, deceased.
Estate Docket: 49D08-3803-ES0523
Notice is hereby given that Robert
C. Thompson, Jr. & Paula
Loving as Co-Personal Representatives
of the above named estate, has filed
report of final accounting together with
petition to make distribution of
remaining assets to the parties believed
entitled thereto. The same will come up
for action by the Marion Superior Court,
Probate Division, on the 4th day of
December, 1990, unless persons interest-
ed in said estate appear on or before
said date and show cause, if any there be,
why such accounting should not be ap-
proved or unless such person make proof
of heirship and claim any part of such
estate not shown by such report.
FAYE L. MOWERY
Clerk of the Marion
Superior Court
Probate Division
90-8451-1:6

**FOUNDATION
REPORTS**

NOTICE

The annual return (Form 990 PF) for
Walther Cancer Education, Inc. for the
year ending June 30, 1990, will be
available for inspection at the
Foundation's principal office during the
hours between 9:00 a.m. and 4:00 p.m.
by any citizen who so requests within
180 days after the date of his
publication. The address of the principal
office is 3202 N. Meridian Street,
Indianapolis, Indiana 46208 and the
Foundation Trustee is Joseph E.
Walther, M.D.
90-8463-11:6

NOTICE TO INTERESTED PERSONS

**PATERNITY
CASES**

NOTICE

State of Indiana, County of Marion
In the Marion Circuit Court
Paternity Division
Cause No.: 49C01-9007-JP1763
In the Matter of the Paternity of:
**BRADLEY JONATHON
SMITHES**
**Carolyn Sue Alemour vs. Danny
Brewer**
The Petitioner having filed a complaint
in the above cause, states that
JAMES MICHAEL SMITHES legal
but not biological father of a child born
04-27-87 in **WISHARD HOSPITAL**, is
a necessary party and that his residence is
unknown, and that this is an action to
establish paternity, and he is hereby
notified that unless he appears in said
Court by December 17, 1990, this matter
will proceed in his absence.
FAYE L. MOWERY
Clerk
90-8290-10:30-11:6-13

**NOTICE OF
SALE**

NOTICE OF SALE

Sale of the here in after goods wares
and merchandise will be sold at public
auction in the city of Indianapolis, Indiana
after 11/13/90, to satisfy warehouse
liens, including reasonable charges for
notices, advertisements, and sale.
The persons whose accounts such
goods are held are as follows:
08/13/90. Smith, Nina, 3816 Bennett
Dr. #11. Lot A. Amount Due:
\$494.00. Indianapolis, IN 46254
08/13/90. Scott, John, 5630 W. 38th
St., #6. Lot B. Amount Due:
\$151.35. Indianapolis, IN 46254
08/13/90. Wade, Carlos; Wilson,
Shawn, 3814 Bennett Dr. #8. Lot
C. Amount Due: \$125.00.
Indianapolis, IN 46254
08/13/90. Curry, R. Michael, 5025 Lilly
Lane. Lot D. Amount Due:
\$169.85. Indianapolis, IN 46254
REPUBLIC MOVING & STORAGE
1005 S. Arlington Ave.
Indianapolis, IN 46205
90-8303-10:30-11:6

**SERVICE BY
PUBLICATION**

**SUMMONS
SERVICE BY PUBLICATION**

State of Indiana, County of Marion, SS:
In the Marion Superior Court
Cause No. 49D06-9009-CP1338
INB National Bank, a national banking
association, Plaintiff -v- Lucile Nix;
Norman Flick; and Mary A. Buckler, as
Marion County Treasurer, Defendants
The State of Indiana to the defendants
above named, and any other person who
may be concerned.
You are notified that you have been

sued in the Court above named.

The nature of the suit against you is:
Foreclosure of mortgage on property
located at 2314 North Delaware Street,
Indianapolis, Marion County, Indiana.

This summons by publication is
specifically directed to the following
named defendant(s) whose addresses are:
Lucile Nix, 2314 N. Delaware Street,
Indianapolis, Indiana 46205; and Mary
A. Buckler, as Marion County Treasurer,
c/o City-County Building, 1601 City-
County Building, Indianapolis, IN
46204; and to the following defendant(s)
whose whereabouts are unknown:
Norman Flick.

In addition to the above named
defendants being served by this summons
there may be other defendants who have
an interest in this law suit.

If you have a claim for relief against
the plaintiff arising from the same
transaction or occurrence, you must as-
sert it in your written answer.

You must answer the Complaint in
writing, by you or your attorney, on or
before the 6th day of December, 1990,
(the same being within thirty (30) days
after the Third Notice of Suit), and if you
fail to do so a judgment will be entered
against you for what the plaintiff has
demanded.

**MANTEL, COHEN, GARELICK,
REISWERG & FISHMAN**
By: **GERALD L. McINTIRE**
Attorney for Plaintiff
(SEAL)
ATTEST:
Faye L. Mowery
Clerk of the Marion Superior Court
Gerald L. McIntire
8888 Keystone Crossing, #300
Indianapolis, IN 46240
(317) 573-8888
90-8022-10:23-30-11:6

**SUMMONS
SERVICE BY PUBLICATION**

NOTICE OF SUIT

State of Indiana, County of Marion, SS:
In the Circuit Court of Marion County
Cause No. 49C01-9010-DR359;
Terese A. Charleston, Plaintiff -v- Eric
L. Charleston, Defendant
The State of Indiana to the defendants
above named, and any other person who
may be concerned.
You are notified that you have been
sued in the Court above named.

The nature of the suit against you is:
Dissolution of Marriage.

This summons by publication is
specifically directed to the following
named defendant(s) whose addresses are;
and to the following defendant(s) whose
whereabouts are unknown: Eric L.
Charleston.

In addition to the above named
defendants being served by this sum-
mons there may be other defendants who
have an interest in this law suit.

If you have a claim for relief against
the plaintiff arising from the same
transaction or occurrence, you must as-
sert it in your written answer.

You must answer the Complaint in
writing, by you or your attorney, on or
before the 6th day of December, 1990,
(the same being within thirty (30) days
after the Third Notice of Suit), and if
you fail to do so a judgment will be en-
tered against you for what the plaintiff
has demanded.

MARVIN E. COFFEY
Attorney for Plaintiff
(SEAL)
ATTEST:
Faye L. Mowery
Clerk of the Marion Circuit Court
Marvin E. Coffey
7440 N. Shadeland, Suite 209
Indianapolis, IN 46250
(317) 841-3215
90-8019-10:23-30-11:6

**SUMMONS
SERVICE BY PUBLICATION**

NOTICE OF SUIT

State of Indiana, County of Marion, SS:
In the Superior Court
of Marion County

**SUMMONS
SERVICE BY PUBLICATION**

NOTICE OF SUIT

State of Indiana, County of Marion, SS:
In the Superior Court of Marion County
Cause No. 49D06-9008-CP1153
Deborah Rowdwell, et al, Plaintiffs -v-
Chad A. Williams, Defendant(s)

The State of Indiana to the
defendants, above named, and any other
person who may be concerned.

You are notified that you have been
sued in the Court above named.

The nature of the suit against you is:
Complaint for damages, 8/19/88
collision causing injury/

This summons by publication is
specifically directed to the following
named defendant(s) whose addresses are;
and to the following defendant(s) whose
whereabouts are unknown: Chad A.
Williams, whose address is presently
unknown.

In addition to the above named
defendants being served by this summons
there may be other defendants who have
an interest in this law suit.

If you have a claim for relief against
the plaintiff arising from the same
transaction or occurrence, you must as-
sert it in your written answer.

You must answer the Complaint in
writing, by you or your attorney, on or
before the 30th day of December, 1990,
(the same being within thirty (30) days
after the Third Notice of Suit), and if you
fail to do so a judgment will be entered
against you for what the plaintiff has
demanded.

ROSCOE STOVALL, JR.
Attorney for Plaintiff
(SEAL)
ATTEST:
Faye L. Mowery
Clerk of the Marion Superior Court
Roscoe Stovall, Jr.
447 South Indiana Street
Mooresville, IN 46158
(317) 831-1111
90-8291-10:30-11:6-13

**SUMMONS
SERVICE BY PUBLICATION**

NOTICE OF SUIT

State of Indiana, County of Marion, SS:
In the Superior Court
of Marion County
Cause No.: 49D02-9010-CP1522
Merchants National Bank and Trust
Company of Indianapolis, Plaintiff -v-
Roland B. Shoemaker, Lily I.
Shoemaker, Treasurer of Marion
County, and Banc One Financial
Services, Inc., Defendant(s)

The State of Indiana to the
defendant(s) above named, and any other
person who may be concerned.

You are notified that you have been
sued in the Court above named.

The nature of the suit against you is:
Foreclosure action on real estate:
Lot #6 in the Re-Subdivision of Lots
6 to 23 in South Park, an
Addition to the City of
Indianapolis, as per plat thereof
recorded in Plat Book 12, page
153, in the office of the Recorder
of Marion County, Indiana.

More commonly referred to as: 515
E. Orange St., Indianapolis, IN
This summons by publication is
specifically directed to the following
named defendant(s) whose addresses are:
Roland B. Shoemaker, 515 E. Orange,
Indianapolis, IN; Banc One Financial
Services, Inc., 111 Monument Circle,
Indianapolis, IN; and to the following
defendant(s) whose whereabouts are un-
known: Lily I. Shoemaker.

In addition to the above named
defendants being served by this sum-
mons there may be other defendants who
have an interest in this law suit.

If you have a claim for relief against
the plaintiff arising from the same trans-
action or occurrence, you must assert it
in your written answer.

You must answer the Complaint in
writing, by you or your attorney, on or
before the 13th day of December, 1990,
(the same being within 15 days after
the Third Notice of Suit), and if you
fail to do so a judgment against you for
what it demanded.

**MANTEL, COHEN, G
REISWERG & FISH
By: GERALD L. McIN
Attorney for Plaintiff
(SEAL)
ATTEST:**

If you have a claim for
the plaintiff arising from
transaction or occurrence
set it in your written ans-
wer
You must answer the
writing, by you or your
before the 13th day of D-
(the same being within 15
after the Third Notice of
you fail to do so a jud-
entered against you for w
has demanded.
J. GREGORY GARRI
Attorney for Plaintiff
(SEAL)
ATTEST:
Faye L. Mowery
Clerk of the Marion
Municipal Court
J. Gregory Garrison
7351 Shadeland Station,
Indianapolis, IN 46256
(317) 842-8283
90-8298-10:30-11:6-13

**SUMMONS
SERVICE BY PUBLI**

NOTICE OF SUIT

State of Indiana, County
In the Marion Superior C
Civil Division
Cause No. 49D06-9010-
INB National Bank, a n-
association, Plaintiff -v-
a/k/a Rev. Hoy H. H.
Shirlene Thurman, Hual
Jointly and Severally;
Corporation a/k/a A
Services; Finance Ameri
Byron Falender, Truste
Falender Revocable Liv
June 7, 1988, and Mary
Marion County Treasurer
The State of Indiana t
above named, and any o
may be concerned.
You are notified that
sued in the above Court.

The nature of the suit
Mortgage foreclosure ac-
real estate and improvem
known and described as
Street, Indianapolis, In
Indiana.

This Summons by
specifically directed to
named Defendant(s) who
Hoy Thurman a/k/a
Thurman, 2847 An
Indianapolis, Indiana 4
Thurman, 2847 An
Indianapolis, Indiana
Security Corporation
Financial Services, c/o I
Found, 6070 North K
Indianapolis, Indiana 4
America Corporation,
Officer Found, 9932 E
Street, Indianapolis, In
Byron Falender, Truste
Falender Revocable Liv
June 7, 1988, 7544 Mor
Indianapolis, IN 462
Buckler, as Marion Cot
c/o City-County Legal
City-County Building,
Indiana 46204; and to
Defendant(s) whose w
unknown: a/a.

In addition to the
Defendants being se
Summons there m
Defendants who have a
law suit.

If you have a claim f
transaction or occurre
set it in your written an-
swer

You must answer th
writing, by you or your
before the 13th day of I
(the same being within 1
after the Third Notice of
fail to do so a judgment
against you for what it
demanded.

WALTHER CANCER EDUCATION, INC. - INDIANAPOLIS, INDIANA

Fiscal Year Ended June 30, 1990

35-1650573

FORM 990-PF - PART I

Line 1 - Contributions:

Central Newspapers Foundation \$2,000

Line 16(b) - Accounting fees:

Ernst & Young - Form 990-PF \$4,400

Line 23 - Other expenses:

Legal notifications \$ 46