

Department of the Treasury  
Internal Revenue Service

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](http://www.irs.gov/Form990PF) for instructions and the latest information.

**2022**

Open to Public Inspection

For calendar year **2022** or tax year beginning and ending

Name of foundation <b>3RIVERS CREDIT UNION FOUNDATION, INC.</b>		<b>A Employer identification number</b> 47-2259834
Number and street (or P.O. box number if mail is not delivered to street address)	Room/suite	<b>B Telephone number (see instructions)</b> (260) 490-8328
City or town, state or province, country, and ZIP or foreign postal code FORT WAYNE, IN 46825		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> Check all that apply:		<b>D</b> 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
<input type="checkbox"/> Address change	<input type="checkbox"/> Name change	
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 586,010.		
<b>J</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d), must be on cash basis.)		

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)				
<b>Revenue</b>				
1 Contributions, gifts, grants, etc., received (attach schedule)	250,000.			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B.				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	742.	742.	NONE	
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)				
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 <b>Total.</b> Add lines 1 through 11	250,742.	742.	NONE	
<b>Operating and Administrative Expenses</b>				
13 Compensation of officers, directors, trustees, etc.	NONE			
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)				
b Accounting fees (attach schedule) <sup>STMT 1</sup>	2,125.	NONE	NONE	2,125.
c Other professional fees (attach schedule)				
17 Interest				
18 Taxes (attach schedule) (see instructions) <sup>**</sup>	10.	NONE	NONE	NONE
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule)				
24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23.	2,135.	NONE	NONE	2,125.
25 Contributions, gifts, grants paid	236,000.			236,000.
26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	238,135.	NONE	NONE	238,125.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	12,607.			
b Net investment income (if negative, enter -0-)		742.		
c Adjusted net income (if negative, enter -0-)			-0-	

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 . . . . .	570,903.	586,010.	586,010.
	2	Savings and temporary cash investments . . . . .			
	3	Accounts receivable			
		Less: allowance for doubtful accounts _____			
	4	Pledges receivable _____			
		Less: allowance for doubtful accounts _____			
	5	Grants receivable. . . . .			
	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	<b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) . . . . .	570,903.	586,010.	586,010.	
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	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	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	NONE	NONE		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 24, 25, 29, and 30.				
	24	Net assets without donor restrictions . . . . .			
	25	Net assets with donor restrictions . . . . .			
	Foundations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/> 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 . .	570,903.	586,010.	
	29	<b>Total net assets or fund balances</b> (see instructions) . . . . .	570,903.	586,010.	
30	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .	570,903.	586,010.		

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) . . . . .	1 570,903.
2	Enter amount from Part I, line 27a . . . . .	2 12,607.
3	Other increases not included in line 2 (itemize) <u>SEE STATEMENT 3</u>	3 2,500.
4	Add lines 1, 2, and 3 . . . . .	4 586,010.
5	Decreases not included in line 2 (itemize) _____	5
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 . . . .	6 586,010.

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

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a				
b				
c				
d				
e				
(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.				(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a				
b				
c				
d				
e				
2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	
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 . . . . .	{ }	3	

**Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)	1	10.
b	All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) 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	
3	Add lines 1 and 2 . . . . .	3	10.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	NONE
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	5	10.
6	Credits/Payments:		
a	2022 estimated tax payments and 2021 overpayment credited to 2022 . . . . .	6a	
b	Exempt foreign organizations - tax withheld at source . . . . .	6b	NONE
c	Tax paid with application for extension of time to file (Form 8868) . . . . .	6c	NONE
d	Backup withholding erroneously withheld . . . . .	6d	
7	Total credits and payments. Add lines 6a through 6d . . . . .	7	NONE
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached . . . . .	8	
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	9	10.
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	10	
11	Enter the amount of line 10 to be: <b>Credited to 2023 estimated tax</b> <span style="float:right"><b>Refunded</b></span>	11	

Part VI-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?
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?
c Did the foundation file Form 1120-POL for this year?
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers.
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?
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?
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?
4b If "Yes," has it filed a tax return on Form 990-T for this year?
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:
7 Did the foundation have at least \$5,000 in assets at any time during the year?
8a Enter the states to which the foundation reports or with which it is registered.
8b 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?
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 2022 or the tax year beginning in 2022?
10 Did any persons become substantial contributors during the tax year?
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)?
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?
14 The books are in care of TIM SHEPPARD, PRESIDENT Telephone no. 260-490-8328 Located at 1605 NORTHLAND BLVD FORT WAYNE, IN ZIP+4 46825
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.
16 At any time during calendar year 2022, 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?

**Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required**

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

	Yes	No
<b>1a</b> During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . . . . .	<b>1a(1)</b>	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .	<b>1a(2)</b>	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . .	<b>1a(3)</b>	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . .	<b>1a(4)</b>	X
(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)? . . . . .	<b>1a(5)</b>	X
(6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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.) . . . . .	<b>1a(6)</b>	X
<b>b</b> If any answer is "Yes" to 1a(1)-(6), did <b>any</b> 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 . . . . .	<b>1b</b>	X
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here. <input type="checkbox"/>		
<b>d</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2022? . . . . .	<b>1d</b>	X
<b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
<b>a</b> At the end of tax year 2022, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2022? . . . . .	<b>2a</b>	X
If "Yes," list the years _____, _____, _____, _____		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement - see instructions.) . . . . .	<b>2b</b>	X
<b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. _____, _____, _____, _____		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .	<b>3a</b>	X
<b>b</b> If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2022.) . . . . .	<b>3b</b>	
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>	X
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2022?	<b>4b</b>	X

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

	Yes	No
<b>5a</b> During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.		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?		X
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
<b>d</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).		
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?		
<b>8</b> Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X

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

**1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 5		NONE	NONE	NONE

**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** . . . . . NONE

**Part VII 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 . . . . . NONE

**Part VIII-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 NONE
2
3
4

**Part VIII-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 NONE
2
All other program-related investments. See instructions.
3 NONE
<b>Total.</b> Add lines 1 through 3 . . . . .

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities . . . . .	<b>1a</b>	
<b>b</b>	Average of monthly cash balances . . . . .	<b>1b</b>	498,084.
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	NONE
<b>d</b>	<b>Total</b> (add lines 1a, b, and c) . . . . .	<b>1d</b>	498,084.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets . . . . .	<b>2</b>	NONE
<b>3</b>	Subtract line 2 from line 1d . . . . .	<b>3</b>	498,084.
<b>4</b>	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	7,471.
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 . . . . .	<b>5</b>	490,613.
<b>6</b>	<b>Minimum investment return.</b> Enter 5% (0.05) of line 5. . . . .	<b>6</b>	24,531.

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

<b>1</b>	Minimum investment return from Part IX, line 6. . . . .	<b>1</b>	24,531.
<b>2a</b>	Tax on investment income for 2022 from Part V, line 5. . . . .	<b>2a</b>	10.
<b>b</b>	Income tax for 2022. (This does not include the tax from Part V.) . . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	10.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	<b>3</b>	24,521.
<b>4</b>	Recoveries of amounts treated as qualifying distributions . . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4 . . . . .	<b>5</b>	24,521.
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 . . . . .	<b>7</b>	24,521.

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

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 . . . . .	<b>1a</b>	238,125.
<b>b</b>	Program-related investments - total from Part VIII-B . . . . .	<b>1b</b>	NONE
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .	<b>2</b>	NONE
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required) . . . . .	<b>3a</b>	NONE
<b>b</b>	Cash distribution test (attach the required schedule) . . . . .	<b>3b</b>	NONE
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4 . . . . .	<b>4</b>	238,125.



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

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X, line 7				24,521.
2 Undistributed income, if any, as of the end of 2022:				
a Enter amount for 2021 only. . . . .			NONE	
b Total for prior years: 20 20 ,20 19 ,20 18		NONE		
3 Excess distributions carryover, if any, to 2022:				
a From 2017 . . . . .	144,117.			
b From 2018 . . . . .	222,159.			
c From 2019 . . . . .	175,595.			
d From 2020 . . . . .	170,660.			
e From 2021 . . . . .	226,962.			
f Total of lines 3a through e . . . . .	939,493.			
4 Qualifying distributions for 2022 from Part XI, line 4: \$ 238,125.				
a Applied to 2021, but not more than line 2a . . .			NONE	
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 2022 distributable amount. . . . .				24,521.
e Remaining amount distributed out of corpus. . .	213,604.			
5 Excess distributions carryover applied to 2022 (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 3f, 4c, and 4e. Subtract line 5	1,153,097.			
b Prior years' undistributed income. Subtract line 4b from line 2b . . . . .		NONE		
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 . . . . .		NONE		
e Undistributed income for 2021. Subtract line 4a from line 2a. Taxable amount - see instructions . . . . .			NONE	
f Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2023. . . . .				NONE
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) . . . . .				
8 Excess distributions carryover from 2017 not applied on line 5 or line 7 (see instructions) . . .	144,117.			
9 Excess distributions carryover to 2023. Subtract lines 7 and 8 from line 6a . . . . .	1,008,980.			
10 Analysis of line 9:				
a Excess from 2018 . . . . .	222,159.			
b Excess from 2019 . . . . .	175,595.			
c Excess from 2020 . . . . .	170,660.			
d Excess from 2021 . . . . .	226,962.			
e Excess from 2022 . . . . .	213,604.			

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9)

NOT APPLICABLE

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2022, enter the date of the ruling . . . . .
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed . . . . .
b 85% (0.85) of line 2a . . . . .
c Qualifying distributions from Part XI, 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 IX, 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 XIV 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).)
3RIVERS FEDERAL CREDIT UNION
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.
N/A
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 email address of the person to whom applications should be addressed:
SEE STATEMENT 11
b The form in which applications should be submitted and information and materials they should include:
SEE STATEMENT 12
c Any submission deadlines:
SEE STATEMENT 13
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
SEE STATEMENT 14

**Part XIV** 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
<b>a</b> <i>Paid during the year</i>				
SEE STATEMENT 15				236,000.
<b>Total</b> .....				<b>3a</b> 236,000.
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> .....				<b>3b</b>



**Part XVI** 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
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of: <ul style="list-style-type: none"> <li>(1) Cash . . . . . <b>1a(1)</b></li> <li>(2) Other assets . . . . . <b>1a(2)</b></li> </ul>	<input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
<b>b</b> Other transactions: <ul style="list-style-type: none"> <li>(1) Sales of assets to a noncharitable exempt organization . . . . . <b>1b(1)</b></li> <li>(2) Purchases of assets from a noncharitable exempt organization . . . . . <b>1b(2)</b></li> <li>(3) Rental of facilities, equipment, or other assets . . . . . <b>1b(3)</b></li> <li>(4) Reimbursement arrangements . . . . . <b>1b(4)</b></li> <li>(5) Loans or loan guarantees . . . . . <b>1b(5)</b></li> <li>(6) Performance of services or membership or fundraising solicitations . . . . . <b>1b(6)</b></li> </ul>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . . <b>1c</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
- 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.

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

**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
3RIVERS FCU	501 (C) (14) (A)	COMMON CONTROL

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

Signature of officer or trustee	Date	PRESIDENT Title
---------------------------------	------	--------------------

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

<b>Paid Preparer Use Only</b>	Print/Type preparer's name LAUREN R DENTON	Preparer's signature 	Date 4/21/2023	Check <input type="checkbox"/> if self-employed	PTIN P01571860
	Firm's name FORVIS, LLP	Firm's EIN 44-0160260		Phone no. 260-460-4000	
	Firm's address 111 E. WAYNE ST., SUITE 600 FORT WAYNE, IN 46802				

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

Employer identification number

3RIVERS CREDIT UNION FOUNDATION, INC.

47-2259834

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

[ ] 501(c)( ) (enter number) organization

[ ] 4947(a)(1) nonexempt charitable trust not treated as a private foundation

[ ] 527 political organization

Form 990-PF

[x] 501(c)(3) exempt private foundation

[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation

[ ] 501(c)(3) taxable private foundation

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

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

Special Rules

[ ] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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 (entering "N/A" in column (b) instead of the contributor name and address), 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), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization <b>3RIVERS CREDIT UNION FOUNDATION, INC.</b>	Employer identification number <b>47-2259834</b>
--	---

**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	<div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em;"></div>	\$ 250,000.	<div style="display: flex; flex-direction: column; gap: 2px;"> <div style="display: flex; justify-content: space-between;"><b>Person</b> <input checked="" type="checkbox"/></div> <div style="display: flex; justify-content: space-between;"><b>Payroll</b> <input type="checkbox"/></div> <div style="display: flex; justify-content: space-between;"><b>Noncash</b> <input type="checkbox"/></div> </div> <p style="font-size: 0.8em; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>
	<div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em;"></div>	\$ _____	<div style="display: flex; flex-direction: column; gap: 2px;"> <div style="display: flex; justify-content: space-between;"><b>Person</b> <input type="checkbox"/></div> <div style="display: flex; justify-content: space-between;"><b>Payroll</b> <input type="checkbox"/></div> <div style="display: flex; justify-content: space-between;"><b>Noncash</b> <input type="checkbox"/></div> </div> <p style="font-size: 0.8em; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>
	<div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em;"></div>	\$ _____	<div style="display: flex; flex-direction: column; gap: 2px;"> <div style="display: flex; justify-content: space-between;"><b>Person</b> <input type="checkbox"/></div> <div style="display: flex; justify-content: space-between;"><b>Payroll</b> <input type="checkbox"/></div> <div style="display: flex; justify-content: space-between;"><b>Noncash</b> <input type="checkbox"/></div> </div> <p style="font-size: 0.8em; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>
	<div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em;"></div>	\$ _____	<div style="display: flex; flex-direction: column; gap: 2px;"> <div style="display: flex; justify-content: space-between;"><b>Person</b> <input type="checkbox"/></div> <div style="display: flex; justify-content: space-between;"><b>Payroll</b> <input type="checkbox"/></div> <div style="display: flex; justify-content: space-between;"><b>Noncash</b> <input type="checkbox"/></div> </div> <p style="font-size: 0.8em; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>
	<div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em;"></div>	\$ _____	<div style="display: flex; flex-direction: column; gap: 2px;"> <div style="display: flex; justify-content: space-between;"><b>Person</b> <input type="checkbox"/></div> <div style="display: flex; justify-content: space-between;"><b>Payroll</b> <input type="checkbox"/></div> <div style="display: flex; justify-content: space-between;"><b>Noncash</b> <input type="checkbox"/></div> </div> <p style="font-size: 0.8em; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>
	<div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em;"></div>	\$ _____	<div style="display: flex; flex-direction: column; gap: 2px;"> <div style="display: flex; justify-content: space-between;"><b>Person</b> <input type="checkbox"/></div> <div style="display: flex; justify-content: space-between;"><b>Payroll</b> <input type="checkbox"/></div> <div style="display: flex; justify-content: space-between;"><b>Noncash</b> <input type="checkbox"/></div> </div> <p style="font-size: 0.8em; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>
	<div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em; margin-bottom: 2px;"></div> <div style="border-bottom: 1px solid black; height: 1.2em;"></div>	\$ _____	<div style="display: flex; flex-direction: column; gap: 2px;"> <div style="display: flex; justify-content: space-between;"><b>Person</b> <input type="checkbox"/></div> <div style="display: flex; justify-content: space-between;"><b>Payroll</b> <input type="checkbox"/></div> <div style="display: flex; justify-content: space-between;"><b>Noncash</b> <input type="checkbox"/></div> </div> <p style="font-size: 0.8em; margin-top: 5px;">(Complete Part II for noncash contributions.)</p>

Name of organization

3RIVERS CREDIT UNION FOUNDATION, INC.

Employer identification number

47-2259834

**Part II** **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____



Name of organization <b>3RIVERS CREDIT UNION FOUNDATION, INC.</b>	Employer identification number <b>47-2259834</b>
--	---

**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
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
_____ _____ _____		_____ _____ _____	

FORM 990PF, PART I - ACCOUNTING FEES  
 =====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	ADJUSTED NET INCOME -----	CHARITABLE PURPOSES -----
ACCOUNTING FEES	2,125.	NONE	NONE	2,125.
TOTALS	2,125.	NONE	NONE	2,125.
	=====	=====	=====	=====

FORM 990PF, PART I - TAXES  
 =====

DESCRIPTION -----	REVENUE AND EXPENSES PER BOOKS -----	NET INVESTMENT INCOME -----	ADJUSTED NET INCOME -----	CHARITABLE PURPOSES -----
EXCISE TAX	10.	NONE	NONE	NONE
TOTALS	10.	NONE	NONE	NONE
	=====	=====	=====	=====

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES  
=====

DESCRIPTION -----	AMOUNT -----
CASH ADJUSTMENT	2,500.
	-----
TOTAL	2,500.
	=====

3RIVERS CREDIT UNION FOUNDATION, INC.

47-2259834

FORM 990PF, PART VI-A, LINE 10 - NEW SUBSTANTIAL CONTRIBUTORS  
=====

NAME AND ADDRESS  
-----

3RIVERS FEDERAL CREDIT UNION  
1605 NORTHLAND BLVD  
FORT WAYNE, IN 46825

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:  
TIM SHEPPARD

ADDRESS:  
1605 NORTHLAND BLVD  
FORT WAYNE, IN 46825

TITLE:  
PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1.00

COMPENSATION ..... NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS ..... NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES ..... NONE

OFFICER NAME:  
LYNDSEY EMERICK

ADDRESS:  
1605 NORTHLAND BLVD  
FORT WAYNE, IN 46825

TITLE:  
TREASURER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1.00

COMPENSATION ..... NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS ..... NONE

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

EXPENSE ACCOUNT AND OTHER ALLOWANCES ..... NONE

OFFICER NAME:  
JULIE GOODMAN

ADDRESS:  
1605 NORTHLAND BLVD  
FORT WAYNE, IN 46825

TITLE:  
MEMBER AT LARGE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1.00

COMPENSATION ..... NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS ..... NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES ..... NONE

OFFICER NAME:  
MELISSA SHAW

ADDRESS:  
1605 NORTHLAND BLVD  
FORT WAYNE, IN 46825

TITLE:  
MEMBER AT LARGE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1.00

COMPENSATION ..... NONE

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS ..... NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES ..... NONE

OFFICER NAME:  
JACKIE KOCKS

ADDRESS:  
1605 NORTHLAND BLVD  
FORT WAYNE, IN 46825

TITLE:  
MEMBER AT LARGE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1.00

COMPENSATION ..... NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS ..... NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES ..... NONE

OFFICER NAME:  
KRISTIN SMITH

ADDRESS:  
1605 NORTHLAND BLVD  
FORT WAYNE, IN 46825

TITLE:  
MEMBER AT LARGE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1.00



FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES  
=====

COMPENSATION .....	NONE
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS .....	NONE
EXPENSE ACCOUNT AND OTHER ALLOWANCES .....	NONE

OFFICER NAME:  
ROBIN HENRY

ADDRESS:  
1605 NORTHLAND BLVD  
FORT WAYNE, IN 46825

TITLE:  
SECRETARY

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1.00

COMPENSATION .....	NONE
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS .....	NONE
EXPENSE ACCOUNT AND OTHER ALLOWANCES .....	NONE

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

KATE ALYEA

ADDRESS:

1605 NORTHLAND BLVD  
FORT WAYNE, IN 46825

TITLE:

MEMBER AT LARGE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1.00

COMPENSATION ..... NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS ..... NONE

EXPENSE ACCOUNT AND OTHER ALLOWANCES ..... NONE

OFFICER NAME:

HEATHER CLOSSON

ADDRESS:

1605 NORTHLAND BLVD  
FORT WAYNE, IN 46825

TITLE:

MEMBER AT LARGE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1.00

COMPENSATION ..... NONE

CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS ..... NONE

FORM 990PF, PART VII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

=====

EXPENSE ACCOUNT AND OTHER ALLOWANCES ..... NONE

TOTAL COMPENSATION: NONE

=====

TOTAL CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS: NONE

=====

EXPENSE ACCOUNT AND OTHER ALLOWANCES: NONE

=====

FORM 990PF, PART XIV - NAME, ADDRESS, PHONE AND E-MAIL FOR APPLICATIONS  
=====

3RIVERS FEDERAL CREDIT UNION  
1605 NORTHLAND BLVD  
FORT WAYNE, IN 46825  
260-490-8328

990PF, PART XIV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS  
=====

IT IS PREFERRED THAT ALL APPLICANTS UTILIZE A FORM PROVIDED BY THE FOUNDATION TO MAKE APPLICATION FOR A GRANT. A FINANCIAL NEEDS FORECAST WILL BE REQUIRED.

990PF, PART XIV - SUBMISSION DEADLINES  
=====

ALL COMPLETED APPLICATIONS ARE TO BE SUBMITTED TO 3 RIVERS FEDERAL CREDIT UNION. AN APPOINTED COMMITTEE MADE UP OF 3 RIVERS FEDERAL CREDIT UNION STAFF WILL CONSIDER EACH APPLICATION AND MAKE RECOMMENDATIONS TO THE BOARD OF DIRECTORS.

990PF, PART XIV - RESTRICTIONS OR LIMITATIONS ON AWARDS

=====

NONE

FORM 990PF, PART XIV, LINE 3A - CONTRIBUTIONS, GIFTS, GRANTS PAID  
=====

RECIPIENT NAME:

SEE ATTACHED

ADDRESS:

1605 NORTHLAND BLVD

FORT WAYNE, IN 46825

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

SEE ATTACHED

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID..... 236,000.

TOTAL GRANTS PAID: 236,000.  
=====



**Electronic Filing Information: PDF attachments Included in this Return**

**Tax Year:** 2022  
**Name:** 3RIVERS CREDIT UNIO  
**Return No:** E9487IX2

**Jurisdiction:** Federal  
**No of Attachments:** 1

<u>PDF Attachment Description</u>	<u>PDF File Name</u>	<u>File Size</u>
Schedule of Donations	E9487IX2_FE_Schedule of Donations.pdf	70,049

**Three Rivers Credit Union Foundation  
Schedule of Donations  
12/31/2022**

<b>RECIPIENT NAME</b>	<b>Address</b>	<b>RELATIONSHIP</b>	<b>STATUS OF RECIPIENT</b>	<b>PURPOSE OF GRANT OR CONTRIBUTION</b>	<b>AMOUNT</b>
Fort Wayne Philharmonic	4901 Fuller Drive, Fort Wayne, IN 46835	NONE	Public Charity	PROGRAM SUPPORT	\$ 1,250.00
History Center - Allen County	Fort Wayne Historical Society Inc 302 East Berry Street, Fort Wayne, IN 46802	NONE	Public Charity	PROGRAM SUPPORT	\$ 1,500.00
Judy A Morrill Recreation Center	1200 East Houston Street, Garrett, IN 46738	NONE	Public Charity	PROGRAM SUPPORT	\$ 2,000.00
Science Central Inc.	1950 N Clinton, Fort Wayne, IN 46805	NONE	Public Charity	PROGRAM SUPPORT	\$ 2,500.00
Cancer Services of NE Indiana	6316 Mutual Drive, Fort Wayne, IN 46825	NONE	Public Charity	PROGRAM SUPPORT	\$ 3,200.00
Difference Makers Inc	4821 W 200 S, Columbia City, IN 46725	NONE	Public Charity	PROGRAM SUPPORT	\$ 5,000.00
Adult Life Training	3301 E Coliseum Blvd., Fort Wayne, IN 46805	NONE	Public Charity	PROGRAM SUPPORT	\$ 5,000.00
Visually Impaired Preschool Services	1100 West 42nd Street, Suite 228, Indianapolis, IN 46208	NONE	Public Charity	PROGRAM SUPPORT	\$ 5,000.00
Healthier Moms and Babies	1025 W Rudisill Blvd. Box 9, Fort Wayne, IN 46807	NONE	Public Charity	PROGRAM SUPPORT	\$ 5,000.00
GiveHear dba HearCare Connection Inc	130 W Main Street Suite 150, Fort Wayne, IN 46802	NONE	Public Charity	PROGRAM SUPPORT	\$ 5,000.00
Out of a Jam Incorporated	3506 Stelhorn Road, Fort Wayne, IN 46815	NONE	Public Charity	PROGRAM SUPPORT	\$ 6,000.00
Specialized Alternatives for Families and Youth of Indiana (SAFY of IN)	7209 Engle Rd Suite 200, Fort Wayne, IN 46804	NONE	Public Charity	PROGRAM SUPPORT	\$ 1,500.00
Interfaith Hospitality Network of Greater FW	2925 E State Blvd, Fort Wayne, IN 46805	NONE	Public Charity	PROGRAM SUPPORT	\$ 2,000.00
Vincent Village	2827 Holton Avenue, Fort Wayne, IN 46806	NONE	Public Charity	PROGRAM SUPPORT	\$ 3,000.00
McMillen Health	600 Jim Kelley Blvd, Fort Wayne, IN 46816	NONE	Public Charity	PROGRAM SUPPORT	\$ 3,000.00
YWCA Northeast Indiana	5920 Decatur Rd, Fort Wayne, IN 46816	NONE	Public Charity	PROGRAM SUPPORT	\$ 3,000.00
Mustard Seed Furniture Bank of Fort Wayne Inc.	3636 Illinois Road, Fort Wayne, IN 46804-2062	NONE	Public Charity	PROGRAM SUPPORT	\$ 4,000.00
The Literacy Alliance	709 Clay Street Ste 100, Fort Wayne, IN 46802	NONE	Public Charity	PROGRAM SUPPORT	\$ 4,000.00
Amani Family Services	5104 N Clinton Street, Fort Wayne, IN 46825	NONE	Public Charity	PROGRAM SUPPORT	\$ 4,000.00
Redemption House	PO Box 12008, Fort Wayne, IN 46802	NONE	Public Charity	PROGRAM SUPPORT	\$ 6,000.00
Thirteen Step House Inc	1317 W Washington Blvd, Fort Wayne, IN 46802	NONE	Public Charity	PROGRAM SUPPORT	\$ 6,000.00
Every Child Can Read Inc	33 South 7th Street, Richmond, IN 47374	NONE	Public Charity	PROGRAM SUPPORT	\$ 10,000.00
The Lighthouse	3000 E State Blvd, Fort Wayne, IN 46805	NONE	Public Charity	PROGRAM SUPPORT	\$ 950.00
Children First Center	PO Box 562, Auburn, IN 46706	NONE	Public Charity	PROGRAM SUPPORT	\$ 1,000.00
St Joseph Missions Women's Shelter	2200 Lake Avenue Suite 120, Fort Wayne, IN 46805	NONE	Public Charity	PROGRAM SUPPORT	\$ 2,500.00
Courageous Healing	2013 S Anthony Blvd, Fort Wayne, IN 46803	NONE	Public Charity	PROGRAM SUPPORT	\$ 4,000.00
Hoosiers Feeding the Hungry Inc	4490A State Road 327, Garrett, IN 46738	NONE	Public Charity	PROGRAM SUPPORT	\$ 2,500.00
Mad Antonys Children's Hope House	7922 West Jefferson Blvd, Fort Wayne, IN 46804	NONE	Public Charity	PROGRAM SUPPORT	\$ 2,500.00
My Autism Ally Inc	PO Box 15, Huntertown, IN 46748	NONE	Public Charity	PROGRAM SUPPORT	\$ 4,000.00
Sunrise Inc	2670 Minneman Rd., Richmond, IN 47374	NONE	Public Charity	PROGRAM SUPPORT	\$ 5,000.00
Anthony Wayne Area Council Boy Scouts of America	8315 West Jefferson Blvd, Fort Wayne, IN 46804	NONE	Public Charity	PROGRAM SUPPORT	\$ 5,000.00
Junior Achievement Of Eastern Indiana	PO Box 1204, Richmond, IN 47375-1204	NONE	Public Charity	PROGRAM SUPPORT	\$ 5,000.00
Circle U Help Center	19 North 13th Street, Richmond, IN 47374	NONE	Public Charity	PROGRAM SUPPORT	\$ 5,000.00
Dr Bill Lewis Center for Children	500 W Main Street, Fort Wayne, IN 46802	NONE	Public Charity	PROGRAM SUPPORT	\$ 6,000.00
NeighborLink Fort Wayne Foundation Inc	2826 S Calhoun St, Fort Wayne, IN 46807	NONE	Public Charity	PROGRAM SUPPORT	\$ 3,000.00
Euell A. Willson Center	1512 Oxford St, Fort Wayne, IN 46806	NONE	Public Charity	PROGRAM SUPPORT	\$ 5,000.00
Crossroad Child and Family Services Inc.	1825 Beacon Street, Fort Wayne, IN 46805	NONE	Public Charity	PROGRAM SUPPORT	\$ 5,000.00
Homebound Meals Inc	611 W Berry St., Fort Wayne, IN 46802	NONE	Public Charity	PROGRAM SUPPORT	\$ 3,000.00
Fort Wayne Children's Choir	Purdue FW Rhinehart Music Center 2101 E Coliseum Blvd, Fort Wayne, IN 46805	NONE	Public Charity	PROGRAM SUPPORT	\$ 6,000.00
Christ Child Society of Fort Wayne	PO Box 12708 915 South Clinton St., Fort Wayne, IN 46864	NONE	Public Charity	PROGRAM SUPPORT	\$ 1,600.00
Lexi's Voice	2305 Westbrook Drive, Fort Wayne, IN 46805	NONE	Public Charity	PROGRAM SUPPORT	\$ 2,000.00
Dare to Dream Youth Ranch	6020 W Wallen Road, Fort Wayne, IN 46818	NONE	Public Charity	PROGRAM SUPPORT	\$ 3,000.00
Lutheran Military Veterans & Family Min	3480 Stelhorn Road, Fort Wayne, IN 46815	NONE	Public Charity	PROGRAM SUPPORT	\$ 3,500.00
East Allen Family Resouce Center Inc	DBA LEARN Resource Center 610 Professional Park Drive, New Haven, IN 46774	NONE	Public Charity	PROGRAM SUPPORT	\$ 4,000.00
Hope Alive Inc	1747 N Wells Street, Fort Wayne, IN 46808	NONE	Public Charity	PROGRAM SUPPORT	\$ 4,500.00
Visiting Nurse and Hospice Home	5910 Homestead Road, Fort Wayne, IN 46814	NONE	Public Charity	PROGRAM SUPPORT	\$ 8,000.00
Long Term Care Ombudsman Prog NE IN	114 3 Rivers East, Fort Wayne, IN 46802	NONE	Public Charity	PROGRAM SUPPORT	\$ 8,000.00
Heart of the City Mission Foundation	1651 Cass Street, Fort Wayne, IN 46808	NONE	Public Charity	PROGRAM SUPPORT	\$ 8,000.00
The Brandon Foundation	Caty Smith PO Box 15966, Fort Wayne, IN 46885	NONE	Public Charity	PROGRAM SUPPORT	\$ 10,000.00
Lutheran Social Services of Indiana	333 E Lewis Street, Fort Wayne, IN 46802	NONE	Public Charity	PROGRAM SUPPORT	\$ 10,000.00
Community in Schools of Wayne Co	33 South 7th Street, Richmond, IN 47374	NONE	Public Charity	PROGRAM SUPPORT	\$ 10,000.00
Whittington Homes & Svcs for Childen & Families	2423 Fairfield Avenue, Fort Wayne, IN 46807	NONE	Public Charity	PROGRAM SUPPORT	\$ 10,000.00
					<b>\$ 236,000.00</b>



## Public Disclosure Copy

This public disclosure copy is being provided to the organization pursuant to Section 6104(e).

Tax-exempt organizations are required to make a copy of the annual information return, e.g., Forms 990, 990-EZ, 990-PF, as well as Forms 990-T and 4720, if applicable, available for public inspection and to provide copies of such forms to individuals or organizations that request copies. The public inspection requirement applies to all required schedules and attachments of the annual information return. Most commonly, the public inspection copy redacts contributor information such as name and address from public record. The public inspection rules apply to annual information returns filed for the last three years. Failure to comply with disclosure requirements can result in an enforcement action by the IRS.

### Where Must Information Be Provided?

Generally, an organization must make its documents available for public inspection at any location where it has three or more employees. If the only services provided at the site are in furtherance of exempt purposes and the site does not serve as an office for management staff, the documents are not required to be made available there. As an alternative to providing copies, an organization may provide access to these forms through the organization's website. The website must provide instructions for downloading the document(s). The information on the website must be in such a format that it may be accessed, downloaded, viewed, or printed in the same format as the actual documents. An organization would need to make the web address available to the general public.

### How Quickly Must Organizations Reply?

Requests for copies can be made in person or in writing. When requests are made in person, the copies must generally be provided on the same business day. There are provisions for delays due to unusual circumstances. However, in no event may the period of delay exceed five business days. Unusual circumstances include times when those staff that are capable of fulfilling a request are absent. Requested copies generally must be mailed within 30 days from the date of the receipt of the written request. However, if the organization requires advance payment of a reasonable fee for copying and postage, it may provide the copies within 30 days from the date it receives payment rather than the date of the original request.

For more information about the IRS' public disclosure requirements, please visit:

*<https://www.irs.gov/charities-non-profits/exempt-organization-public-disclosure-and-availability-requirements>*

Please contact your FORVIS advisor if you have questions about these rules.