For Paperwork Reduction Act Notice, see the separate instructions.

DLN: 93493039008651

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Internal Revenue Service **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990 for instructions and the latest information.

A F	or the 2019 c		alendar year, or tax year begin	ning 06-01-2019 , and endi	ng 05-31	2020				
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/termina			C Name of organization TKE FOUNDATION INC				D Employer identification number 51-0166412			
		-	Doing business as				51-0166	0412		
			•							
☐ Amended return ☐ Application pending			Number and street (or P.O. box if mail is not delivered to street address) Room/suite 7439 WOODLAND DRIVE				E Telephone number			
							(317) 872-6533			
			City or town, state or province, country, and ZIP or foreign postal code INDIANAPOLIS, IN 46278				G Gross receipts \$ 2,487,977			
			F Name and address of principal officer:			H(a) Is this a group return for				
			BRETT A WIDNER 7439 WOODLAND DRIVE				inates?		□Yes 🗹 No	
Tax-exempt status: Website: ► WV K Form of organization			№ 501(c)(3)			H(b) Are all include		es	☐ Yes ☐No	
								•	e instructions)	
						H(c) Group exemption number ▶				
			n: ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶		L	L Year of formation: 1962 M		M State	M State of legal domicile: IN	
Pa	art I	Sum	marv							
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO ESTABLISH AND SUPPORT SCHOLARSHIPS AND LEADERSHIP TRAINING PROGRAMS WHICH PROMOTE ACADEMIC ACHIEVEMENT AN STRENGTHEN MORAL, SOCIAL AND COMMUNITY VALUES.								ACHIEVEMENT AND	
ove	3 (Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.								
<u>ა</u>			ber of voting members of the governing body (Part VI, line 1a)							
လ တ	4 1	Number o	of independent voting members of	the governing body (Part VI, lin	e 1b) .			4	17	
Ě	5	Total nun	I number of individuals employed in calendar year 2019 (Part V, line 2a)							
Ş	6 -	Total number of volunteers (estimate if necessary)						6	40	
	l		nrelated business revenue from Part VIII, column (C), line 12					7a		
	bi	Net unrel	ated business taxable income fror	n Form 990-T, line 39				7b	-	
Rəvenue	٫ ,	Causaib	ione and supple (Doub)/III line 1h)			Pric	r Year	06.6	Current Year	
	l		ributions and grants (Part VIII, line 1h)				1,262,966 1,74		1,741,782	
	l	Program service revenue (Part VIII, line 2g)					175,2	-	187,984	
æ	l						5,280		-7,987	
	l	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)					1,443,540 1,921,7			
		Grants and similar amounts paid (Part IX, column (A), lines 1–3)					494,033 468			
	14 E	Benefits p	efits paid to or for members (Part IX, column (A), line 4)				0			
8	15 9	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)					485,003			
SUS	16 a	Professio	ofessional fundraising fees (Part IX, column (A), line 11e)						(
s Expenses	b∃	otal fundraising expenses (Part IX, column (D), line 25) ▶255,954								
	l	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)				359,792			512,424	
		Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)				1,338,828			1,522,163	
	19	Revenue	evenue less expenses. Subtract line 18 from line 12				104,712 Beginning of Current Year		399,616	
Net Assets or Fund Balances						beginning (or current to	ear	End of Year	
	20	Total assets (Part X, line 16)					7,321,8	45	8,035,271	
	21						78,658		232,856	
	22 1	Vet asset	et assets or fund balances. Subtract line 21 from line 20					.87	7,802,415	
Under knowl		lties of pa	ature Block erjury, I declare that I have exam f, it is true, correct, and complete							
ally K	HOWIE	lı								
_		****** Signati	**** 202 nature of officer Date				-02-01			
Sign Here		,								
			A WIDNER CFO r print name and title							
		ј' Р	rint/Type preparer's name	Preparer's signature	Date			TIN		
Paid Preparer					202:		k ∐ if ∣p employed	0001924	1 3	
		r F	Firm's name KSM BUSINESS SERVICES INC				Firm's EIN ▶ 35-2123203			
	Onl	⊢	irm's address ▶ PO BOX 40857			Phor	ie no. (317) 5	580-2000)	
			INDIANAPOLIS, IN 46	240			, , -			
Mav t	he IRS	discuss	this return with the preparer show					▽	Yes 🗆 No	

Cat. No. 11282Y

Form 990 (2019)