



# INDIANA ECONOMIC IMPACT - PROPOSALS AND CONTRACTS

State Form 51778 (R4 / 1-06)  
DEPARTMENT OF ADMINISTRATION  
Approved by State Board of Accounts, 2006

This information is required by the Indiana Department of Administration for all contractors, vendors/suppliers to the State of Indiana (complete all 22 items).

|    |  |  |
|----|--|--|
| 1  | <b>Legal Name of firm:</b>   | The Lutheran Foundation, Inc.  |
| 2  | <b>Address/City/State/Zip Code:</b>  | 3024 Fairfield Ave., Fort Wayne, IN 46807  |
| 3  | <b>Telephone #/Fax #/Website:</b>  | (260) 458-2112, Fax: (260) 458-3069, <a href="https://thelutheranfoundation.org/">https://thelutheranfoundation.org/</a> |
| 4  | <b>Federal Tax Identification Number:</b>  | 35-0886840   |
| 5  | <b>State/Country of domicile/incorporation:</b>  | Indiana  |
| 6  | <b>Location of firm's headquarters or principal place of business:</b>   | Fort Wayne, Indiana  |
| 7  | <b>Name of parent company or holding company (if applicable):</b>  |  |
| 8  | <b>State/Country of domicile/incorporation of company listed in #7:</b>  |  |
| 9  | <b>Address of company listed in #7:</b>  |  |
| 10 | <b>IN Department of Workforce Development (DWD) account number:</b>  | 73263  |
| 11 | <b>IN Department of Revenue (DOR) account number:</b>  | 18149070001  |
| 12 | <b>Number of Indiana resident employees per most recently completed IRS Form W-2 distribution:</b>                       | 16   |
| 13 | <b>Total number of employees per most recently completed IRS Form W-2 distribution:</b>                                  | 16   |
| 14 | <b>Total amount of payroll paid to Indiana resident employees per most recently completed IRS Form W-2 distribution:</b> | \$1,190,576.35   |
| 15 | <b>Total amount of payroll paid to all employees per the most recently completed IRS Form W-2 distribution:</b>          | \$1,190,576.35   |
| 16 | <b>Total amount of this proposal, bid, or current contract:</b>  | \$2,670,376.95   |

## ACCOUNTING OF INDIANA RESIDENT EMPLOYEES


|    |  |                         |
|----|--|-------------------------|
| 17 | <b>Prime Contractor Company Name:</b>  | The Lutheran Foundation |
| 18 | <b>Number of Full Time Equivalent (FTE) employees that are Indiana residents specifically for this proposal or contract:</b> | 0.15                    |

|    |   |  |            |                |            |
|----|---|--|------------|----------------|------------|
| 19 | <b><u>Subcontractor Company</u></b><br><b><u>Name: Geminus Corporation</u></b>  |  |            |                |            |
| 20 | Address/Contact<br>Person/Telephone Number/Tax<br>ID Number:  | 8400 Louisiana St,<br>Merrillville, IN 46410 | Eric Evans | (219) 757-1883 | 35-1859562 |
| 21 | <b><u>Number of Full Time</u></b><br><b><u>Equivalent (FTE) employees</u></b><br>that are Indiana residents<br>specifically for this proposal or<br>contract: | 1.60   | 0.00       | 0.00           | 0.00       |

|    |   |   |                |              |            |
|----|---|---|----------------|--------------|------------|
| 19 | <b><u>Subcontractor Company</u></b><br><b><u>Name: Schools Care, Inc. dba</u></b><br><b><u>School Care Team</u></b>   |   |                |              |            |
| 20 | Address/Contact<br>Person/Telephone Number/Tax<br>ID Number:  | 116 E Berry St #1300,<br>Fort Wayne, IN 46802 | Heather Miller | 260-402-5267 | 85-3484829 |
| 21 | <b><u>Number of Full Time</u></b><br><b><u>Equivalent (FTE) employees</u></b><br>that are Indiana residents<br>specifically for this proposal or<br>contract: | 14.17   | 0.00           | 0.00         | 0.00       |

|    |   |   |                   |                |            |
|----|---|---|-------------------|----------------|------------|
| 19 | <b><u>Subcontractor Company</u></b><br><b><u>Name: Upstream Prevention, Inc.</u></b>  |   |                   |                |            |
| 20 | Address/Contact<br>Person/Telephone Number/Tax<br>ID Number:  | 3209 W Smith Valley<br>Rd, Greenwood, IN<br>46142 | Kathleen Ratcliff | (317) 824-9617 | 47-5502996 |
| 21 | <b><u>Number of Full Time</u></b><br><b><u>Equivalent (FTE) employees</u></b><br>that are Indiana residents<br>specifically for this proposal or<br>contract: | 0.05  | 0.00              | 0.00           | 0.00       |

|    |   |  |                 |                |            |
|----|---|--|-----------------|----------------|------------|
| 19 | <b><u>Subcontractor Company</u></b><br><b><u>Name: Purdue University</u></b>  |  |                 |                |            |
| 20 | Address/Contact<br>Person/Telephone Number/Tax<br>ID Number:  | 2101 E. Coliseum<br>Blvd DSB 327A, Fort<br>Wayne, IN 46805 | Rachel Blakeman | (260) 481-0274 | 35-6002041 |
| 21 | <b><u>Number of Full Time</u></b><br><b><u>Equivalent (FTE) employees</u></b><br>that are Indiana residents<br>specifically for this proposal or<br>contract: | 0.15   | 0.00            | 0.00           | 0.00       |

|    |  |   |  |  |  |
|----|--|---|--|--|--|
| 22 | <b><u>Affirmation by authorized official:</u></b> I affirm under penalties of perjury that the foregoing representations are true to be the best of my knowledge and belief: |   |  |  |  |
|    | Signature:   |  |  |  |  |
|    | Name of auththorized official:   | Mark Dixon  |  |  |  |
|    | Title:   | President and CEO   |  |  |  |
|    | Date:  | March 25, 2024  |  |  |  |