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## DLN: 93491190004028

OMB No 1545-0052

2017

## **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

Form 990-PF

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.
 ▶ Information about Form 990-PF and its instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

For	caler	ndar year 2017, or tax year beginning 01-01-20	017 , ar	nd ending 12-31-			
N/	IANOITA	Indation L RECREATION FOUNDATION INC			entification numbe	r	
C/	O SOPH	HIA B TWICHELL		13-6172514			
		d street (or P O box number if mail is not delivered to street address; TH WESTERN AVENUE NO 221	· ·	<b>B</b> Telephone number (see instructions) (224) 880-6550			
		n, state or province, country, and ZIP or foreign postal code ST, IL 600451820		<b>C</b> If exemption	application is pendin	g, check here	
<b>G</b> CI	heck al	Il that apply	former public charity	<b>2</b> Foreign or test, chec	ganizations, check he ganizations meeting k here and attach co	the 85% mputation	
H C	heck ty	vpe of organization $lacksquare$ Section 501(c)(3) exempt private	foundation		indation status was f n 507(b)(1)(A), chec		
	Section	n 4947(a)(1) nonexempt charitable trust 🔲 Other taxabl	le private foundation				
of	year <i>(f</i>	ket value of all assets at end from Part II, col (c),  • \$ 46,641,449   J Accounting method  ☐ Other (specify) (Part I, column (d) must	Cash Accru		ition is in a 60-mont n 507(b)(1)(B), chec		
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc , received (attach schedule)	10,000				
	2	Check $\blacktriangleright$ $\square$ if the foundation is <b>not</b> required to attach					
	3	Sch B Interest on savings and temporary cash investments	274,638	144,591		<del> </del>	
	4	Dividends and interest from securities	705,804				
	5a	Gross rents	,	,			
	ь	Net rental income or (loss)					
ē	6a	Net gain or (loss) from sale of assets not on line 10	2,678,330				
Revenue	ь	Gross sales price for all assets on line 6a					
šeķ	l _	14,108,629	9	0.507.505			
Œ	7	Capital gain net income (from Part IV, line 2)		2,687,696			
	8	Net short-term capital gain					
	10a	1				-	
	ь	Gross sales less returns and allowances Less Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	10,347	0			
	12	Total. Add lines 1 through 11	3,679,119	3,593,600			
	13	Compensation of officers, directors, trustees, etc	177,703	5,331		172,569	
	14	Other employee salaries and wages	,	·		· ·	
Ş	15	Pension plans, employee benefits	16,802	504		16,298	
ารย	16a	Legal fees (attach schedule)					
<u>8</u>	ь	Accounting fees (attach schedule)	30,658	15,329		15,208	
and Administrative Expenses	c	Other professional fees (attach schedule)	177,692	144,067		33,625	
tive	17	Interest					
stra	18	Taxes (attach schedule) (see instructions)	264,390	21,562		10,928	
Ī	19	Depreciation (attach schedule) and depletion					
重	20	Occupancy	16,535	0		16,535	
ďΑ	21	Travel, conferences, and meetings	67,389	0		0	
ä	22	Printing and publications	21,095	0		21,095	
biu	23	Other expenses (attach schedule)	13,890	7,231		13,890	
rati	24	Total operating and administrative expenses.					
Operating		Add lines 13 through 23	786,154	194,024		300,148	
0	25	Contributions, gifts, grants paid	1,401,124			1,370,542	
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	2,187,278	194,024		1,670,690	
	27	Subtract line 26 from line 12				_	
	а	Excess of revenue over expenses and disbursements	1,491,841				
	b	Net investment income (if negative, enter -0-)		3,399,576		<u> </u>	
	С	Adjusted net income(If negative, enter -0-)				<u> </u>	
ror	raper	work Reduction Act Notice, see instructions.		Cat No 11289	: For	m <b>990-PF</b> (2017)	

Page 2

40,385,883

195,970

46,641,449

40,385,883

46,641,449

84,059

1,213,080

254,050

1,551,189

45.090.260

45,090,260

46.641.449

40,658,563

1,491,841

2,939,856

45,090,260

45,090,260

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5 6

41,972,983

34,306

97,616

1,182,498

1,314,420

40.658.563

40,658,563

41.972.983

<u>ر</u>وه

195,970

	3	Accounts receivable ►			
		Less allowance for doubtful accounts ▶		3,393	3,393
	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 ▶			
S	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges	22,038	9,683	9,683
S I	10a	Investments—U S and state government obligations (attach schedule)	3,993,424	4,749,917	4,749,917
	b	Investments—corporate stock (attach schedule)	6,636,960	0	0
	c	Investments—corporate bonds (attach schedule)	1,267,838	1,009,209	1,009,209
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			

а	Investments—U.S. and state government obligations (attach schedule)	3,993,424	2
b	Investments—corporate stock (attach schedule)	6,636,960	
С	Investments—corporate bonds (attach schedule)	1,267,838	<b>%</b> j
	Investments—land, buildings, and equipment basis ▶		
	Less accumulated depreciation (attach schedule) ▶		
	Investments—mortgage loans		
	Investments—other (attach schedule)	28,132,263	<b>%</b> j
	Land, buildings, and equipment basis ▶		
	Less accumulated depreciation (attach schedule) ▶		
	Other assets (describe ►)	127,332	<b>%</b> J

Total assets (to be completed by all filers—see the

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). .

Total liabilities(add lines 17 through 22) . . . .

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Capital stock, trust principal, or current funds . . . .

Total net assets or fund balances (see instructions) .

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total liabilities and net assets/fund balances (see instructions) .

**Analysis of Changes in Net Assets or Fund Balances** 

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

instructions Also, see page 1, item I)

Grants pavable. . .

Other liabilities (describe

Deferred revenue .

Unrestricted

Temporarily restricted Permanently restricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 . . . . .

Decreases not included in line 2 (itemize)

Accounts payable and accrued expenses .

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13 14

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22

23

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27 28

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31 Part III

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Liabilities

Net Assets or Fund Balances

Page **3** 

Capital Callie t	and losses for tax on linest				
	(a) the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1aSee Additional Data Table	2				
b					
С					
d					
e					
<b>(e)</b> Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	h) ir (loss) ) minus (g)
a See Additional Data Table	9				
b					
c					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(	T)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	<b>(k)</b> of col (ı) (յ), ıf any	Gains (Col ( col (k), but not	h) gain minus less than -0-) <b>or</b> om col (h))
a See Additional Data Table			3,,	<u> </u>	
b					
d					
<u>е</u>					
	1	If gain, also enter in P	Part I. line 7		
	or (net capital loss)  gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructions)		1	3	2,687,696
iii i aic 1, iiie 3			1		
Part V Qualification L	Inder Section 4940(e) for Re	educed Tax on Net	Investment In	come	
(For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	et investment incom	 าe )	
If section 4940(d)(2) applies, le	ave this part blank	` '			
	e section 4942 tax on the distributal	, ,	· ·	?	es 🗹 No
•	t qualify under section 4940(e) Do				
	nount in each column for each year,	see instructions before	making any entrie		
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab		( <b>d)</b> Distribution rati (col (b) divided by c	ol (c))
2016	1,368,147		39,368,520		0 034752
2015	2,416,196		41,304,344		0 058497
2014	2,497,641		42,033,439		0 059420
2013	2,242,785		40,817,436		0 054947
2012	2,076,835		35,235,195	<del></del>	0 058942
2 Total of line 1, column (c	•		2		0 266558
number of years the foun	for the 5-year base period—divide to dation has been in existence if less incharitable-use assets for 2017 from	than 5 years 🔒	, or by the	<del> </del>	0 053312 43,117,078
5 Multiply line 4 by line 3		•	5	1	2,298,658
. , ,	ent income (1% of Part I, line 27b)		6	1	33,996
				+	2,332,654
	ons from Part XII, line 4 ,		8	<del> </del>	1,670,690
	eater than line 7, check the box in Pa			ıg a 1% tax rate Se	

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

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

1 List all officers, directors, trustee	es, foundation managers ar	nd their compensation	(see instructions).	
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table			Componibution.	
2 Compensation of five highest-pai	d employees (other than t	hose included on line :	L—see instructions). If nor  Contributions to	ie, enter "NONE."
(a) Name and address of each employee pa more than \$50,000	Title, and average hours per week  (b) devoted to position	(c) Compensation	employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE			(a) compensation	
	<del></del>			
<b>Total</b> number of other employees paid ove				
3 Five highest-paid independent co				0 E".
(a) Name and address of each person		1	e of service	(c) Compensation
NONE				
		-		
		_		
		-		
Total number of others receiving over \$50	,000 for professional services			0
Part IX-A Summary of Direct C				
List the foundation's four largest direct charitable organizations and other beneficiaries served, con			nation such as the number of	Expenses
1				
2				
3				
4				
<b>-</b>				
Part IX-B Summary of Program	m-Related Investments	(see instructions)		
Describe the two largest program-related inve	stments made by the foundation d	uring the tax year on lines 1	and 2	Amount
1				
<del></del>				
2				
All III	<u> </u>			
All other program-related investments  3	See instructions			
Total. Add lines 1 through 3 .		· · · · · <del>· · ·</del>		000 <b>PE</b> (2017)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

1a

1b

2

3a 3h

4

5

1,670,690

1.670.690

1.670.690

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Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

1

2

3

4

5

2,087,862

1,670,690

417,172

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Form 990-PF (20	017)
Part XIII	Undist

**b** Total for prior years

a From 2012. . . . .

d From 2015. . . . .

e From 2016. . . . .

indicated below:

**b** From 2013. . . . c From 2014. .

1 Distributable amount for 2017 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only. . . . . .

(Election required—see instructions). . . . . c Treated as distributions out of corpus (Election 

**d** Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . . . 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 e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . . . f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 . . . . . 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 2012 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . . **b** Excess from 2014. .

c Excess from 2015. . . . d Excess from 2016. . . e Excess from 2017. . .

Subtract lines 7 and 8 from line 6a . . . .

istributed Income (see instruc	ctions)			
	(2)	(b)	(c)	10

J-F1 (20	· · · · ·				
XIII	Undistributed Income (see instruc	ctions)			
		(a) Corpus	(b) Years prior to 2016	(c) 2016	<b>(d)</b> 2017

1.159.355

417.172

742,183

742,183

Excess distributions carryover, if any, to 2017

121.818 248,328 405 634

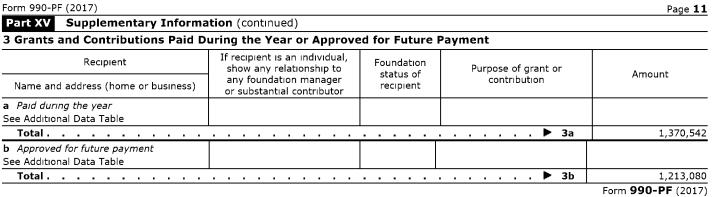
383.575

f Total of lines 3a through e. . . . . . . .

4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 1,670,690 a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years

**5** Excess distributions carryover applied to 2017 (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 a Corpus Add lines 3f, 4c, and 4e Subtract line 5

> 358,608 383.575



art XVI	-A Analysis of Income-Producing	ACCIVICIES				
er gross	amounts unless otherwise indicated	Т	siness income	Excluded by section		(e) Related or exemp function income
_	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See instructions
d						
	nd contracts from government agencies					
	ship dues and assessments					
	t on savings and temporary cash					
	nents			14	274,638 705,804	
	al income or (loss) from real estate			14	703,004	
a Debt-f	nanced property					
	bt-financed property					
	ital income or (loss) from personal property					
	vestment income					
	ry			18	2,678,330	
Net inco	me or (loss) from special events					
	rofit or (loss) from sales of inventory					
Other re	EVENUE  ED & CURRENT FEDERAL EXCISE TAX			01	10,347	
b	LED & CORRENT FEDERAL EXCISE TAX			01	10,347	
с						
d e						
d e			(	)	3,669,119	
d e Subtota Total. /	Add columns (b), (d), and (e)	ations )			3,669,119	
d e Subtota Total. /	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th	ations ) e Accomplish	ment of Exem	pt Purposes	<b>.</b>	3,669,11
d e Subtota Total. A (See wo	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,11
d e Subtota Total. A (See wo art XVII	Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Resheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which in	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,11
d e Subtota Total. A (See wo art XVII	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,11
d e Subtota Total. A (See wo Irt XVII	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,11
d e Subtota Total. A (See wo Irt XVII	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,11
d e Subtota Total. A (See wo Irt XVII	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,11
d e Subtota Total. A (See wo Irt XVII	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,1
subtota Total. A (See wo Int XVI	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,1
Subtota Total. A (See wo rt XVI	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,1
Subtota Total. A (See wo rt XVI	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,1
subtota Total. A (See wo Int XVI	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,11
d e Subtota Total. A (See wo Irt XVII	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,1
d e Subtota Total. A (See wo Irt XVII	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,11
d e Subtota Total. A (See wo Irt XVII	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,11
de Subtota Total. A (See wo Irt XVII	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,11
d e Subtota Total. A (See wo Irt XVII	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,11
de Subtota Total. A (See wo Irt XVII	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,11
d e Subtota Total. A (See wo art XVII	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,11
d e Subtota Total. A (See wo art XVII	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,11
d e Subtota Total. A (See wo art XVII	Add columns (b), (d), and (e)  add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calcul  B Relationship of Activities to th  Explain below how each activity for which is the accomplishment of the foundation's ex	ations ) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	3,669,11

orm 99	90-PF (2	2017)							Pa	ge <b>13</b>
Part	XVII	Information Re Exempt Organi		ansfers To a	ind Transaction	ons and Rel	ationships With Noncha	ritable		
		ianization directly or in Code (other than sectio					ization described in section 50 itical organizations?	ī	Yes	No
a Trai	nsfers f	rom the reporting foun	dation to a no	ncharitable exe	empt organization	n of				
(1)	Cash.							1a(1)		No
(2)	Other	assets						1a(2)		No
<b>b</b> Oth	er trans	sactions								
(1)	Sales	of assets to a nonchar	ıtable exempt	organization.				1b(1)		No
(2)	Purch	ases of assets from a r	oncharitable (	exempt organız	ation			1b(2)		No
(3)	Renta	l of facilities, equipmer	nt, or other as	sets				1b(3)		No
(4)	Reimb	oursement arrangemen	ts					1b(4)		No
(5)	Loans	or loan guarantees.						1b(5)		No
٠.		mance of services or m	•	<del>-</del>				1b(6)		No
	-							1c		No
	ny tran		ngement, sho		l) the value of the	e goods, other	eceived less than fair market variables assets, or services received non-of-transfers, transactions, and s		ingemer	nts
										-
des	cribed i	dation directly or indirent of the section 501(c) of the smaller the following some of organization (a) Name of organization	Code (other to	than section 50		tion 527?	-	Yes	<b>~</b>	No
						-				
Sign	of my		, it is true, co				panying schedules and statement of the than taxpayer) is based of the than taxpayer) is based of the taxpayer.	n all info	rmatioi	n of
Here	-	*****  ignature of officer or t	rustee		2018-07-05 Date		retu with belo	n the prepa	irer shov	wn
		1	-				(sea	e instr )?	<b>⊻</b> Yes	⊔ No
Paid		Print/Type preparer's		Preparer's Sign	aature	Date	Check if self- employed ▶ ✓	P00350	0393	
Prep	arer	Firm's name ► BAKI	 ER TILLY VIRC	CHOW KRAUSE	LLP		Firm's	FIN <b>▶</b> 39	-08500	

**Use Only** Firm's address ▶ 1650 MARKET STREET SUITE 4500 Phone no (215) 972-0701 PHILADELPHIA, PA 191037341 Form **990-PF** (2017)

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) Date acquired Date sold How acquired P-Purchase (mo, day, yr) (mo, day, yr) D-Donation PUBLICLY TRADED SECURITIES - HAWTHORN #2403 2016-01-01 2017-12-31 PUBLICLY TRADED SECURITIES - HAWTHORN #5189 2016-01-01 2017-12-31 PUBLICLY TRADED SECURITIES - HAWTHORN #6836 2016-01-01 2017-12-31 CREDOS FLOATING RATE FUND 2017-01-01 2017-12-31 CREDOS FLOATING RATE FUND 2016-01-01 2017-12-31 Ρ CAPITAL GAINS DIVIDENDS Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (h) (e) plus (f) minus (g) (f) (a) plus expense of sale 2,196,405 2,222,878 -26,473 671,873 1,279,563 607,690 10,408,571 8,526,182 1,882,389 4,448 4,448 4,918 4,918 214,724 214,724 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(1)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (1), if any -26,473 607,690 1,882,389 4,448 4,918 214,724

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, not paid, enter Contributions to (e) other allowances hours per week (b) devoted to position -0-) employee benefit plans and deferred compensation JOSEPH B ANDERSON JR TRUSTEE 0 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 LYNNE M O BRICKNER TRUSTEE 0 0 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 DAVID HAVEMEYER CARLETON 0 0 TRUSTEE 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 ROBERT W CRAWFORD JR TRUSTEE 0 ٥ 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 JOHN L CROMPTON 0 0 TRUSTEE 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 ENDICOTT P DAVISON JR **TRUSTEE** 0 0 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 JAMES R DONNELLEY TRUSTEE 0 0 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 ROBERT JAUNICH II TRUSTEE 0 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 ELSIE MCCABE THOMPSON 0 0 TRUSTEE 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 TONY A MOBLEY 0 0 TRUSTEE 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 J JAMES PEARCE JR TRUSTEE 0 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 NICHOLAS G PENNIMAN IV TRUSTEE 0 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 KATHRYN A PORTER PAST PRESIDENT 0 0 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 TIMOTHY L RICHARDSON TRUSTEE 0 0 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 ANDRA RUSH TRUSTEE 0 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If Expense account, (d) hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation JON J SEAL TRUSTEE 0 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 ALFRED A VALENZUELA TRUSTEE 0 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 JONATHAN D SCOTT TRUSTEE 0 1.00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 ROBERT A STUART JR PRESIDENT 0 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 JOHN W MCCARTER JR O O FIRST VICE PRESIDENT 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 EDITH R PEREZ 0 SECOND VICE 0 **PRESIDENT** 736 NORTH WESTERN AVENUE SUITE 221 1 00 LAKE FOREST, IL 60045 R THAYER TUTT JR TREASURER 0 0 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 FRANCIS P PANDOLFI PAST PRESIDENT ٥ ٥ (RESIGNED MAY '17) 736 NORTH WESTERN AVENUE SUITE 221 1 00 LAKE FOREST, IL 60045 PEGGY BURNET TRUSTEE 0 0 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 JOSEPHINE TEMPLETON **TRUSTEE** ٥ ٥ 1 00 736 NORTH WESTERN AVENUE SUITE 221 LAKE FOREST, IL 60045 SOPHIA B TWICHELL EXECUTIVE DIRECTOR 177,703 16,802 40 00 736 NORTH WESTERN AVENUE SUITE 221

LAKE FOREST, IL 60045

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient						
a Paid during the year								
ARTWELL 100 W OXFORD ST SUITE E-1200 PHILADELPHIA, PA 19122	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	50,000				
AUDUBON TEXAS 2201 MAIN STREET SUITE 600 DALLAS, TX 75201	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000				
BALTIMORE HERITAGE INC 11 1/2 W CHASE ST BALTIMORE, MD 21201	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	10,000				
BLOOMINGTON PARKS FOUNDATION PO BOX 3351 BLOOMINGTON, IN 47402	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000				
BOYS & GIRLS CLUBS OF AMERICA 1275 PEACHTREE ST NE ATLANTA, GA 30309	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	10,000				
Total				1,370,542				

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Form 990PF Part XV Line 3 - Gran	orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
BOYS & GIRLS CLUBS OF GREATER CINCINNATI 600 DALTON AVENUE CINCINNATI, OH 45203	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	100,000	
BOYS & GIRLS CLUBS OF SOUTHEASTERN MICHIGAN 26777 HALSTED ROAD SUITE 100 FARMINGTON HILLS, MI 483313560	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	10,000	
BOYS & GIRLS CLUBS OF THE PENNINSULA 401 PIERCE ROAD MENLO PARK, CA 94025	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000	
CAMP JOYPO BOX 157 CLARKSVILLE, OH 45113	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000	
CHESAPEAKE CENTER FOR YOUTH DEVELOPMENT 301 E PATAPSCO AVENUE BALTIMORE, MD 21225	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000	

1,370,542 Total .

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form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
COACHING CORPS 310 EIGHTH STREET SUITE 300 OAKLAND, CA 94607	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	33,000
COLORADO OUTWARD BOUND SCHOOL 5161 SHERIDAN BLVD DENVER, CO 80212	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	20,000
CRANBROOK EDUCATIONAL COMMUNITY HORIZONS-UPWARD BOUND 39221 WOODLAND AVE BLOOMFIELD HILLS, MI 48303	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	99,700
ELEVATE NEW ENGLAND 403 ANDOVER STREET LOWELL, MA 01852	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000
FAMILY CRISIS SERVICES 100 HUMPHREYS RD CAPE ELIZABETH, ME 04107	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000
Total				1,370,542

nt is an individual, ny relationship to ndation manager cantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	recipient		
	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000
	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000
	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	3,044
	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000
	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000
		PC PC	APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES  PC TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES  PC TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES  PC TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES  PC TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES

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1,370,542

Form 990PF Part XV Line 3 - Grant	Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
LATINO THEATER COMPANY 514 S SPRING STREET LOS ANGELES, CA 90013	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	100,000	
LAUREUS SPORT FOR GOOD FOUNDATION 645 FIFTH AVENUE FIFTH FLOOR NEW YORK, NY 10022	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	100,000	
MANNIE JACKSON CENTER FOR THE HUMANITIES FOUNDATION 1210 NORTH MAIN STREET EDWARDSVILLE, IL 62025	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000	
MERCY NEIGHBORHOOD MINISTRIES OF PHILADELPHIA INC 1939 W VENANGO STREET PHILADELPHIA, PA 19140	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000	
NEW ENGLAND SCIENCE & SAILING FOUNDATION 72 WATER ST STONINGTON, CT 06378	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	25,000	

Total . 3a 1,370,542

orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
NYC OUTWARD BOUND SCHOOLS 29-46 NORTHERN BLVD NEW YORK, NY 11101	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	100,000
ORCHARDS CHILDREN'S SERVICES 24901 NORTHWESTERN HIGHWAY SUITE 500 SOUTHFIELD, MI 48075	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000
SEA RESEARCH FOUNDATION 55 COOGAN BOULEVARD MYSTIC, CT 06355	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000
SERIOUSFUN CHILDREN'S NETWORK 228 SAUGATUCK AVENUE WESTPORT, CT 06880	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000
SOCCER IN THE STREETS 130 BOULEVARD NE SUITE 4 ATLANTA, GA 30312	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	10,000
Total				1,370,542

orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
SOUTH EASTERN MICHIGAN INDIANS INC 26641 LAWRENCE STREET CENTER LINE, MI 48015	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	10,000
THE NIGHT MINISTRY 4711 N RAVENSWOOD CHICAGO, IL 60640	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000
THE SUSAN L CURTIS CHARITABLE FOUNDATION 1321 WASHINGTON AVE SUITE 104 PORTLAND, ME 04103	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	30,000
THE TRUST FOR PUBLIC LAND 120 SOUTH LASALLE STREET 20TH FLOOR CHICAGO, IL 60603	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	100,000
UNITED STATES TENNIS ASSOCIATION FOUNDATION 70 W RED OAK LANE WHITE PLAINS, NY 10604	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	20,000

Total . . 3a 1,370,542

orm 990PF Part XV Line 3 - Gran	ts and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to		Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
VOLUNTEERS FOR OUTDOOR COLORADO 600 SOUTH MARION PARKWAY DENVER, CO 80209	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	10,000
WEST END NEIGHBORHOOD ASSOCIATION PO BOX 7898 PORTLAND, ME 04112	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	19,798
	•	•	•	

DENVER, CO 80209				
WEST END NEIGHBORHOOD ASSOCIATION PO BOX 7898 PORTLAND, ME 04112	NONE	PC	TO FUND PROGRAMS DIRECTLY APPLIED TO AT-RISK YOUTH AND HEALTHY LIFESTYLES	19,798
Total				1,370,542

3a

efile GRAPHIC print - DO NOT PROCESS	As Filed D	ata -		DLN: 93491190004028		
TY 2017 Accounting Fees Schedule						
Name:	NATIONA	AL RECREATION FO	UNDATION INC			
	C/O SOPHIA B TWICHELL					
EIN:	13-6172	514				
Accounting Fees Schedule						
Category Am	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
ACCOUNTING FEES	30,658	15,329		15,208		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491190004028				
TY 2017 Investments Corporate Bonds Schedule						
Name: NATIONAL RECREATION FOUNDATION INC						

1,009,209

1,009,209

**EIN:** 13-6172514 **Investments Corporate Bonds Schedule End of Year Fair** Name of Bond **End of Year Book** Value Market Value

C/O SOPHIA B TWICHELL

INVESTMENTS - CORPORATE BONDS

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491190004028
TY 2017 Investments - Other S	chedule	

Name: NATIONAL RECREATION FOUNDATION INC

C/O SOPHIA B TWICHELL **EIN:** 13-6172514

Investments Other Schedule 2			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
OTHER PUBLICLY TRADED SECURITIES - ALTERNATIVE INVESTMENTS	FMV	8,460,046	8,460,046
OTHER SECURITIES - MUTUAL FUNDS	FMV	16,050,213	16,050,213
EXCHANGE TRADED FUNDS	FMV	15.875.624	15.875.624

Name: NATIONAL RECREATION FOUNDATION INC.

C/O SOPHIA B TWICHELL

ACCRUED INCOME

Other Assets Schedule

**EIN:** 13-6172514

Description Beginning of Year -End of Year - Book

Value

195,970

End of Year - Fair Market Value

195,970

DLN: 93491190004028

127,332

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491190004028		
TY 2017 Other Expenses Sch	TY 2017 Other Expenses Schedule					
Name	: NATIONAL REC	REATION FOUND	ATION INC			
	C/O SOPHIA B TWICHELL					
EIN	: 13-6172514					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
INSURANCE	1,152	0		1,152		
ADMINISTRATIVE/OFFICE EXPENSE	1,718	0		1,718		

1,020

10,000

7,231

1,020

10,000

WEBSITE EXPENSE

RATE FUND K-1

GRADUATE STUDENT INTERN

PORTFOLIO DEDUCTIONS - CREDOS FLOATING

DLN: 93491190004028

Name: NATIONAL RECREATION FOUNDATION INC

C/O SOPHIA B TWICHELL

**EIN:** 13-6172514

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Other Income Cahadula

Other Income Schedule			
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
DEFERRED & CURRENT FEDERAL EXCISE TAX	10,347		10,347

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491190004028
TY 2017 Other Increases Sche	edule		
Name:	NATIONAL REG	CREATION FOUNDATION INC	
	C/O SOPHIA B	TWICHELL	
EIN:	13-6172514		
De	escription		Amount
UNREALIZED LOSS - FAIR MARKET VALU	JE		2,939,856

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491190004028			
<b>TY 2017 Other Liabilities Sche</b>	TY 2017 Other Liabilities Schedule					
Name:	NATIONAL REG	CREATION FOUNDATION INC				
	C/O SOPHIA B	TWICHELL				
EIN:	13-6172514					
Description	n	Beginning of Yo - Book Value				
DEFERRED FEDERAL EXCISE TAX		97,0	616 254,050			

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLI	N: 93491190004028
TY 2017 Other Professiona	al Fees Schedu	le		
Name: NATIONAL RECREATION FOUNDATION INC C/O SOPHIA B TWICHELL EIN: 13-6172514				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT/BANK FEES	141,408	141,408		0

2,659

32,644

981

35,303

981

OTHER PROFESSIONAL FEES

PAYROLL PROCESSING FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	D	DLN: 93491190004028		
TY 2017 Taxes Schedule	TY 2017 Taxes Schedule					
Name:	NATIONAL F	RECREATION FOUN	IDATION INC			
	C/O SOPHIA	A B TWICHELL				
EIN:	13-6172514					
	<del></del>	T		1 1		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable		
		111001110	Income	Purposes		
STATE CHARITABLE REGISTRATION FEE	750	0		750		
FOREIGN TAXES	21,248	21,248		0		
PAYROLL TAXES	10,476	314		10,178		
TAXES PAID	231,916	0		0		

efile GRAPHIC print - D	OO NOT PROCESS	As Filed Data -				DLN: 93491190004028
Schedule B		Schedu	le of Contributo	rs		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Information a	bout Schedule B (F	Form 990, 990-EZ, or 990- form 990, 990-EZ, or 990-P <u>ww irs gov/form990</u>		ons is at	2017
Name of the organizati NATIONAL RECREATION I					Employer id	lentification number
C/O SOPHIA B TWICHELL  Organization type (che					13-6172514	
Organization type (one	or one)					
Filers of:	Section:					
Form 990 or 990-EZ						
	☐ 4947(a)(1	1) nonexempt char	itable trust <b>not</b> treated as	s a private founda	tion	
	☐ 527 politi	cal organization				
Form 990-PF	<b>✓</b> 501(c)(3)	exempt private fo	undation			
	☐ 4947(a)(1	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	☐ 501(c)(3)	taxable private for	undation			
			PF that received, during t omplete Parts I and II So			
Special Rules						
under sections 5 received from ar	509(a)(1) and 170(b)	(1)(A)(vı), that che uring the year, tota	g Form 990 or 990-EZ that cked Schedule A (Form 9 al contributions of the gre plete Parts I and II	990 or 990-EZ), P	art II, line 13,	16a, or 16b, and that
during the year,	total contributions of	f more than \$1,000	or (10) filing Form 990 c exclusively for religious animals Complete Parts	, charitable, scient		
during the year, If this box is che purpose Don't c	contributions exclus cked, enter here the complete any of the p	ively for religious, total contributions parts unless the <b>G</b> e	or (10) filing Form 990 c charitable, etc., purposes that were received during eneral Rule applies to the or more during the year.	s, but no such con ng the year for an ns organization be	tributions tota exclusively re cause it recei	aled more than \$1,000 eligious, charitable, etc , ived <i>nonexclusively</i>
990-EZ, or 990-PF), but	ıt <b>must</b> answer "No	on Part IV, line 2	le and/or the Special Rul , of its Form 990, or chec t it doesn't meet the filing	k the box on line	H of its	
For Paperwork Reduction A for Form 990, 990-EZ, or 99		ructions	Cat No 30613X	Schedu	ıle B (Form 990	, 990-EZ, or 990-PF) (2017)

remediate B (i oi	11 000, 000 12, 01 000 11 / (2011 /		i ago <b>=</b>
lame of organi: IATIONAL RECRE :/O SOPHIA B TV	ATION FOUNDATION INC	Employer identification 13-6172514	number
Part I	Contributors (See instructions) Use duplicate copies of Part I if ac	dditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOSEPHINE TEMPLETON		Person 🗸
	601 PEMBROKE ROAD BRYN MAWR, PA19010	\$ 10,000	Noncash
			(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-			Person  Payroll
		\$	Noncash
			(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person  Payroll
		\$	Noncash
			(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-			Person  Payroll
		\$	Noncash
			(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person  Payroll
		\$	Noncash
			(Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_			Person
		\$	Payroll   Noncash
			(Complete Part II for noncash
		Sahadula B (Ed	contributions )

Schedule B (Form 9	990, 990-EZ, or 990-PF) (2017)		Page 4
Name of organizat NATIONAL RECREAT C/O SOPHIA B TWIC	ION FOUNDATION INC		Employer identification number 13-6172514
than \$1, organiza the year	000 for the year from any one contributo	r. Complete columns (a) throu of exclusively religious, chari- actions.) ► \$	d in section 501(c)(7), (8), or (10) that total more ugh <b>(e) and</b> the following line entry. For table, etc., contributions of <b>\$1,000 or less</b> for
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
	Transfered 3 frame, address, and		coadonship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, and	` ,	Relationship of transferor to transferee

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)