

Form **990-PF** 

Return of Private Foundation 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.lrs.gov/Form990PF for instructions and the latest information.

		t of the Treasury venue Service				social security numbers irs.gov/Form990PF for in				Open to Public Inspection
		dar year 2017 o	r tax year be					ending		a pair to 1 de la mapagnan
		f foundation					<del></del>		A Employer identification	number
R	OB:	ERT A &	PATRI	CIA K	HANS	ON CHARITABI	ΣE			
F	OŪ.	NDATION	C/O F	IRST M	IDWE	ST BANK			36-3406431	
Nur	nbera	and street (or PO be	ox number if ma	all is not delivere	d to street a	address)		Room/suite	B Telephone number	
5	06	15TH S'	rreet,	P.O.	BOX	990		<u> </u>	309-797-76	<u> 27                                    </u>
		own, state or pro				ostal code			C If exemption application is pe	ending, check here
_M	<u>OL</u>	INE, IL	<u>6126</u>	6-0990					}	
G (	Check	all that apply:	===	nitial return		Initial return of	a former public	charity	0 1. Foreign organizations	s, check here
			=	ınal return		Amended return	1		2. Foreign organizations me	eting the 85% test.
	<del></del>	<del></del>		ddress chang		Name change			2. Foreign organizations me check here and attach con	mputation
H (	_	type of organiza				xempt private foundation		0	E If private foundation star	
		ection 4947(a)(1) arket value of all				Other taxable private four ing method: X Cas		rual	under section 507(b)(1)	• • •
		arket value of all Part II, col. (c), li		u Ui yeai	r	ther (specify)	, ACC	i vai	F If the foundation is in a under section 507(b)(1)	
•	\$ -\$			331. P		nn (d) must be on cash b	asis.)		under Section 307(b)(1)	(D), Check liefe
	irt I	Analysis of Re	evenue and E	Expenses		(a) Revenue and		nvestment	(c) Adjusted net	(d) Disbursements
تت		(The total of amo	unts in columns	s (b), (c), and (d)	may not	expenses per books		come	income	for charitable purposes (cash basis only)
	1	Contributions,	gifts, grants,	etc., received			din Ni		N/A	
- . •	2	Check X	if the foundation is	not required to atta			6 3 W W	4 Y 3		
	3	Interest on saving cash investments	s and temporar	у						A 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	4	Dividends and	ınterest from	securities		27,087	. 2	27,087.		STATEMENT 1
	5a	Gross rents								
	b	Net rental income	or (loss)			3 3 3 3 3				
<u>a</u>	6a	Net gain or (loss) f Gross sales price				39,007	• * * * *			- * * * * * * * * * * * * * * * * * * *
Revenue	_b	assets on line 6a		111,8	321.			0 007		
<u> </u>	7	Capital gain net in		t IV, line 2)				19,007.	*	2 2 2 2 2 4 3
	8	Net short-term Income modific								
	100	Gross sales less r and allowances								WIES &
	ì	Less Cost of good	ds sold				1 7 1		RECE	VED O
		Gross profit or	_				* <b>% %</b>			
	11	Other income							1 YAM 18	8 ZU18 *   Z   * *
	12	Total. Add line	s 1 through	11		66,094		6,094.	(0)	· * * * * * * *
	13	Compensation of	officers, directo	rs, trustees, etc		3,784	•	2,838.	OCDE	N 117 946.
	14	Other employer	e salaries and	d wages					400	1111
	i .	Pension plans,	employee be	nefits		\			<del> </del>	<u> </u>
9		Legal fees				ļ			<u></u>	<b></b>
e c	] b	Accounting fee				ļ	+		<del> </del>	<del> </del>
Ä	ء را	Other profession	nai tees			<del></del>	+		<del> </del>	<del> </del>
ij	17			сты	т 2	442	+	427.	<del> </del>	0.
17.	18 19	Taxes Depreciation ar	nd deniation	SIM		142	<del></del>	<u> </u>	<del> </del>	
į	20	Occupancy	ia ashierinii				<del></del>		<del>                                     </del>	** ** ** * ** ** ** ** ** ** ** ** ** *
r d	21	Travel, confere	nces, and me	etinas			<del>                                     </del>		<del>                                     </del>	<del>                                     </del>
Ę	22	Printing and pu					1			
Operating and Administrative Expense	23	Other expenses		STM	т 3	1,175		1,175.		0.
. <u>‡</u>	24	Total operating	g and admini	istrative						
9	į	expenses. Add				5,401		4,440.	<del></del>	946.
C	25	Contributions,	-			48,450	•	* * *	* * *	48,450.
	26	•		sements.		F2 254				10.000
	-	Add lines 24 ar				53,851	· <del> </del>	4,440.		49,396.
	27					12,243				1
	i	Net investmen				14,443		1,654.	<del> </del>	<del> </del>
	ı	Adjusted net in			• •		<del></del>	<u>,                                    </u>	N/A	
_				., 3 /		<del></del>				

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2017) FOUNDATION C/O FIRST MIDWEST BANK

36-3406431 Page 2

Beginning of year End of year

P	ärt	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cook and interest bearing	(a) Book value	(b) Book value	(c) rail ividiket value
	l	Cash - non-interest-bearing	31,040.	72,588.	72,588.
		Savings and temporary cash investments	31,040.	72,500.	12,386.
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable -	ra Midle sapilla in ra Materia	alliana	
	_	Less: allowance for doubtful accounts			<del> </del>
	5	Grants receivable	<u> </u>		<del></del>
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons	6. 8.45 W V 864 / 17 / 1888	(30, 3) (2)	A 100 - 100
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	<u> </u>		
•	1	Investments - U.S. and state government obligations	650 462	600 035	1 120 512
		Investments - corporate stock STMT 4	650,463.	620,937.	1,130,743.
		Investments - corporate bonds	** /.** 3 **	800 90 9 800 8 80 8	
	11	Investments - land, buildings, and equipment basis		e. Vile li k	
		Less accumulated depreciation		ļ	
	12	Investments - mortgage loans		<u> </u>	
	13	Investments - other	W 8 XW / ^* \		
	14	Land, buildings, and equipment basis	A A. C. A.		
		Less accumulated depreciation			
		Other assets (describe		ļ	
	16	Total assets (to be completed by all filers - see the	601 503	603 505	1 000 001
_	_	instructions. Also, see page 1, item I)	681,503.	693,525.	1,203,331.
		Accounts payable and accrued expenses		<del> </del>	
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>.</u>	21	Mortgages and other notes payable	<del></del>	<del> </del>	
	22	Other habilities (describe	<del></del>	<del> </del>	
	22	Total liabilities (add lines 17 through 22)	0.	0.	
_	23	Foundations that follow SFAS 117, check here			
	1	and complete lines 24 through 26, and lines 30 and 31.			
Ś	24	Unrestricted			
lances	1	Temporarily restricted			
_	26	Permanently restricted		<del></del>	
9	20	Foundations that do not follow SFAS 117, check here		<del></del>	
5		and complete lines 27 through 31.			
or Fund Ba	27	Capital stock, trust principal, or current funds	10.	10.	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
55	29	Retained earnings, accumulated income, endowment, or other funds	681,742.	693,515.	
e e	ı	Total net assets or fund balances	681,752.	693,525.	
z					
	31	Total liabilities and net assets/fund balances	681,752.	693,525.	
	art			<del></del>	
<u> </u>	ai L	III			<del></del>
1		net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		<u>  1</u>	681,752.
		r amount from Part I, line 27a		2	12,243.
		r increases not included in line 2 (itemize)			0.
		lines 1, 2, and 3		4	693,995.
		eases not included in line 2 (itemize) OTHER DECREASE		5	470.
6	ı ota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30		693,525.
					Form <b>990-PF</b> (2017)

	DATION C/O FIRST			CDD AMMA	****	36-340		Page 3
* ** / **	le kind(s) of property sold (for example kind(s) and property sold (for example kind(s)) and (for exam			SEE ATTA		STATEM e acquired		te sold
	chouse; or common stock, 200 shs		ισ,	(b) How acquired P - Purchase D - Donation	(mo.,	day, yr.)		lay, yr.)
a								
b								
<u>c</u>					-			
<u>d</u>								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis			Gain or (loss us (f) minus		
8			•		****		(0))	
b								
С								
0								
e 111,821.			72,81	4.				<u>,007.</u>
Complete only for assets showing	gain in column (h) and owned by t				(I) Gains (	(Col. (h) gain t not less thai	minus	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	1 1	cess of col. (i) col. (j), if any			s (from col. (		
<u>a</u>	<del> </del>							
<u>D</u>								
d								
e							39	,007.
Capital gain net income or (net capital)	If gain, also enter of the loss)	r in Part I, line	7	} 2				,007.
, , , ,	•		,	7   *   -				,007.
Net short-term capital gain or (loss if gain, also enter in Part I, line 8, co		10 (6):		٦				
If (loss), enter -0- in Part I, line 8	•			<u>}</u> 3		N/A		
Part V Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	Investment Ir	come			
For optional use by domestic private f	oundations subject to the section 4	1940(а) tах оп	net investment in	come.)				
f section 4940(d)(2) applies, leave this	s part blank.							
.,,,,			the bees now	40				X No
Vas the foundation liable for the section f "Yes," the foundation doesn't qualify			•	100 /			Yes	LAL NO
Enter the appropriate amount in ea				ntries.				
(a) Base period years	(b)			(c)		D	(d) oution ratio	
Calendar year (or tax year beginning		tributions	Net value of no	ıncharıtable-use ass	ets	Distrit (col. (b) div	oution ratio vided by col.	. (c))
2016	5	0,124.		995,6	31.			50344
2015		7,941.		1,023,1				<u>46855</u>
2014	<del></del>	4,539.		1,002,1				44445
2013		0,191.	<del> </del>	919,3				43715
2012		5,098.		823,8	5 / •	1	. 0	42601
Tetal of line 1 column (d)							2	27960
<ul> <li>Total of line 1, column (d)</li> <li>Average distribution ratio for the 5-</li> </ul>	wear hace period - divide the total i	on line 2 hy 5 (	or by the numb	er of years	2	<u> </u>	• 4	<u> </u>
the foundation has been in existence	•	on time 2 by o.c	o, or by the number	or or years	3		. 0	45592
the realisation has been in execute	o ii iooo iiian o yaaro					<del> </del>		
Enter the net value of noncharitable	-use assets for 2017 from Part X,	line 5			4		1,115	<u>,711.</u>
Multiply line 4 by line 3					5_		50	,867.
Enter 1% of net investment income	(1% of Part I, line 27b)				6			617.
Add lines 5 and 6					7		51	,484.
Cotor qualifying distributions form	Doct VII. lung 4							,396.
B Enter qualifying distributions from I	•				8	<u> </u>	49	, 330.
If line 8 is equal to or greater than I	ine 7, check the box in Part VI, line	1b, and comp	iete that part usin	g a 1% tax rate.				

ROBERT A & PATRICIA K HANSON CHARITABLE FOUNDATION C/O FIRST MIDWEST BANK 36-3406431 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) 233 b Domestic foundations that meet the section 4940(e) requirements in Part V, check here | and enter 1% of Part I. line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% 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-) 3 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: a 2017 estimated tax payments and 2016 overpayment credited to 2017 b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6с d Backup withholding erroneously withheld 6d 7 Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 8 732 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax Part VII-A | Statements Regarding Activities Yes Nο 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X any political campaign? X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 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: (1) On the foundation. > \$ 0. (2) On foundation managers. ► \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 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? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 48 N/A b 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? If "Yes," attach the statement required by General Instruction T6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: · By language in the governing instrument, or . By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 8a Enter the states to which the foundation reports or with which it is registered. See instructions.

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV

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

of each state as required by General Instruction G? If "No," attach explanation

Form **990-PF** (2017)

10

IL

Form 990-PF (2017) FOUNDATION C/O FIRST MIDWEST BANK

Part VII-A | Statements Regarding Activities (continued)

36-3406431

Page 5

<u></u> ₹	Continued)			
			Yes	No
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)? If "Yes," attach schedule. See instructions	_11_		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1 1		7.5
	If "Yes," attach statement. See instructions	12	77	<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
44	Website address ► N/A  The books are in care of ► FIRST MIDWEST BANK, TRUST DIVISION Telephone no. ► 309-79	7_7	627	
14	Located at 506 15TH STREET, P.O. BOX 990, MOLINE, IL			<u>an</u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	203	- 0 9	
13	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	Ño
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	1	,	£ 60°,
	foreign country		, j. i.	¥.;
Pa	rt VII-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.	3.1	Yes	No
1a	During the year, did the foundation (either directly or indirectly):		7.	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	31		
	a disqualified person?		ě	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No	1	- × 56	133
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No	5.	ž	350
	(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)?  Yes X No	`	ĺ	*
			`	
	(6) Agree to pay money or property to a government official? (Exception. 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.)	-		
h	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	\$9		
٠	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions  N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here		3 ,	
C	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 2017?	1c	***************************************	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		*	X 33
	defined in section 4942(j)(3) or 4942(j)(5)):	1 1	(	* *
8	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	1		
	before 2017?	<u>``</u> .		
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
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			Ĺŝ.
	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.)  N/A	- L	أسنسك	لنندا
	statement - see instructions.)  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b	V-3.4	** · . 1
·	in the provisions of section 4342(a)(2) are being applied to any of the years listed in 2a, list the years liefe.	1		
38	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?  Yes X No			***
b	If "Yes," did it have excess business holdings in 2017 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		eters, and	
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,		Autoria i	
	Form 4720, to determine if the foundation had excess business holdings in 2017.)  N/A	3b		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	48		X
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 2017?	4b		X
	Foi	m <b>99</b> 0	)-PF	(2017)

Page 6

Part VII-B Statements Regarding Activities for Which Fe	orm 4720 May Be Re	equired (continu	ued)		
5a During the year, did the foundation pay or incur any amount to:				∦ ∶ Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No		/ ,2% (**)
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire		{}		
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?		Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	i described in section	<del></del>	[₹ <del>₹</del> ]		
4945(d)(4)(A)? See instructions		Ye	s X No	8	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or to		<b>₽</b>		
the prevention of cruelty to children or animals?			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	· ·	1 Regulations	N/A	5b	
section 53.4945 or in a current notice regarding disaster assistance? See instru  Organizations relying on a current notice regarding disaster assistance, check h			<b>№</b> / <b>A</b>	30	1854
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from		ned			
expenditure responsibility for the grant?		/A 🗀 Ye	s No		<i>(</i> )
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		,			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	oav premiums on				
a personal benefit contract?	,,,	☐ Y€	s X No		1 1 22
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a pe	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.					18
7a At any time during the tax year, was the foundation a party to a prohibited tax sl	helter transaction?	Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribut	table to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Truste	es, Foundation Man	agers, Highly			
Paid Employees, and Contractors	·				
List all officers, directors, trustees, and foundation managers and th	· · · · · · · · · · · · · · · · · · ·	(c) Compensation	(d) Contributions to	/-> Tur	
(a) Name and address	<b>(b)</b> Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Exp account	, other
	to position	enter -0-)	compensation	allowa	ınces
	TRUSTEE	!		İ	
486 SOUTH BEACH RD HOBESOUND, FL 33455	0.00	0.	0.	1	0.
	TRUSTEE		<del>0.</del>	<del> </del>	<u> </u>
506 15TH STREET, P.O. BOX 990	INOSIBB				
MOLINE, IL 612650990	0.00	0.	0.		0.
1001110, 110 012030330	- 0.00				<u> </u>
				}	
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."	(4)		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp	cense other
	devoted to position	(0)	compensation	allowa	inces
NONE					
			<u> </u>	<del> </del>	
				<del> </del>	
		<del> </del>		<del> </del>	
	·	-		1	
<del></del>				}	
Total number of other employees paid over \$50,000		· · · · · · · · · · · · · · · · · · ·			0
1 and the same ambigland bare and dealload	_ <del></del>		Forn	990-PF	

FOUNDATION C/O FIRST MIDWEST BANK		406431 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation I Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NON	IE."	
(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		<b>&gt;</b> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infinite number of organizations and other beneficiaries served, conferences convened, research papers produced, e	formation such as the stc.	Expenses
1 ALZHEIMER'S ASSOCIATION, GREATER		
PTGGB ADE AGGGEN		5,000.
2 FIGGE ART MUSEUM		
3 CRESTVIEW PRESBYTERIAN CHURCH		5,000.
		5,000.
4 JEFFREY THOMAS HAYDEN FOUNDATION		
Dort IV/P   O		5,000.
Part X=B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2	Атоипт
1 N/A	uno 2.	Amount
2		
All other program-related investments. See instructions.		
3		
Total Add lines 1 through 3		0.

36-3406431 Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<del></del>
·a	Average monthly fair market value of securities	1a	1,098,010.
b	Average of monthly cash balances	1b	34,692.
c	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	1,132,702.
e	Reduction claimed for blockage or other factors reported on lines 1a and	7. T	
	1c (attach detailed explanation) 1e 0.	8	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,132,702.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	16,991.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,115,711.
6	Minimum investment return. Enter 5% of line 5	6	55,786.
	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar	id certain	
ا	foreign organizations, check here  and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	55,786.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,233.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	54,553.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	54,553.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	54,553.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	49,396.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	3.	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	49,396.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	49,396.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	jualifies for	r the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	( <b>d)</b> 2017
1 Distributable amount for 2017 from Part XI, line 7			· · ·	54,553.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			48,449.	
b Total for prior years:		0.		
Excess distributions carryover, if any, to 2017:				
a From 2012				
<b>b</b> From 2013				
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e	0.			, , , , , , , , , , , , , , , , , , , ,
4 Qualifying distributions for 2017 from				
Part XII, line 4: ► \$ 49,396.				*
a Applied to 2016, but not more than line 2a		`` <b>```</b> ``` <b>`</b>	48,449.	<u> </u>
<b>b</b> Applied to undistributed income of prior				٠
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			¥
d Applied to 2017 distributable amount				947.
e Remaining amount distributed out of corpus	0.			****
Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount	0.		,	0.
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	0.	K (K)	ž X /	
b Prior years' undistributed income. Subtract		_		
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable	; (4			
amount - see instructions	A 4 8 8	0.		
e Undistributed income for 2016. Subtract line			_	
4a from line 2a. Taxable amount - see instr.		* * * * * * * * * * * * * * * * * * * *	0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				E2 606
be distributed in 2018		7.		53,606.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)  8 Excess distributions carryover from 2012			*	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.		*		* * * * * * * * * * * * * * * * * * * *
Subtract lines 7 and 8 from line 6a	0.	,	. *,	
10 Analysis of line 9:	4	۸ ,		<b>\</b>
a Excess from 2013	* * * *		**·	
b Excess from 2014	•			**
c Excess from 2015				
d Excess from 2016	·			
e Excess from 2017	<u> </u>	<u> </u>		
723581 01-03-18	- <del>-</del>			Form <b>990-PF</b> (2017)

ROBERT A & PATRICIA K HANSON CHARITABLE FOUNDATION C/O FIRST MIDWEST BANK 36-3406431 Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 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 2017, 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(1)(5) Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (e).Total (a) 2017 (b) 2016 (c) 2015 (d) 2014 income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, 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 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 X, line 6 for each year 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(1)(3)(B)(III) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) 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).) PATRICIA K. HANSON 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. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here X 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. a The name, address, and telephone number or email address of the person to whom applications should be addressed:

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

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

c Any submission deadlines:

Form 990-PF (2017) FOUNDATION C/O FIRST MIDWEST BANK 36-3406431 Page 11

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year ALZHEIMER'S ASSOCIATION, GREATER NONE 501(C)(3) UNRESTRICTED 5,000. AMBROSE FUND FOR ACADEMIC EXCELLENCE NONE 501(C)(3) UNRESTRICTED 500. AMERICAN RED CROSS NONE UNRESTRICTED 501(C)(3) 500. ARROWHEAD RANCH NONE 501(C)(3) UNRESTRICTED 775. BETHANY FOR CHILDREN & FAMILIES NONE 501(C)(3) UNRESTRICTED 1,000. SEE CONTINUATION SHEET(S) 48,450. <u>3a</u> Total b Approved for future payment NONE Total

Form 990-PF (2017) Part XVI-A

**Analysis of Income-Producing Activities** 

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
Effet gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	Tanction income
<u>a</u>					
b			<del> </del>		
c					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments			L		
3 Interest on savings and temporary cash					
investments				00.000	
4 Dividends and interest from securities			14	27,087.	
5 Net rental income or (loss) from real estate:	<u> </u>		5% · X		## # 2 / 2 S S S S S S S S S S S S S S S S S
a Debt-financed property			1		
b Not debt-financed property			1		<del></del>
6 Net rental income or (loss) from personal					
property 7 Other investment income			<u> </u>		
8 Gain or (loss) from sales of assets other					
than inventory			18	39,007.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			ļ		
11 Other revenue:			İ		
8	ļ		ļ		
b			-		
c					
d			<b></b>		
12 Subtotal. Add columns (b), (d), and (e)	<del>7 7 .</del>	0.	ş <sup>3</sup>	66,094.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<del>1</del>				66,094.
(See worksheet in line 13 instructions to verify calculations.)				_	
Part XVI-B Relationship of Activities to	o the Acco	mplishment of Ex	empt	Purposes	
Line No. Explain below how each activity for which inco					nnlishment of
▼ the foundation's exempt purposes (other than	by providing fu	nds for such purposes).			
3,4, THE ROBERT A. & PATRICI	AK. H	ANSON CHARITA	ABLI	FOUNDATION 1	S A
8 NON-OPERATING PRIVATE F	OUNDAT	ION. THE IN	reri	ST, DIVIDENDS	S, AND
GAINS FROM SALE OF ASSE			CON	RIBUTIONS REC	EBIVED DURING
PRIOR YEARS OF THE FOUN	IDATION				
	-				
					····
		<u> </u>		<del> </del>	
				<u> </u>	
					<del></del>

Form 990-PF (2017)

36-3406431

Page 13

Form 990-PF (2017) FOUNDATION C/O FIRST MIDWEST BANK 36-3406431

[Part:XVIII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the	organization directly or indir	rectly engage in any e	of the followin	ig with any other organization	on described in sect	tion 501(c)		S NO
(other t	than section 501(c)(3) organ	izations) or in section	n 527, relatınç	g to political organizations?				
a Transfe	ers from the reporting founda	ition to a noncharitat	ole exempt orç	ganization of:			32	
(1) Ca	sh						1a(1)	Х
(2) Oti	her assets						1a(2)	X
<b>b</b> Other to	ransactions:						202	8 16.
(1) Sa	les of assets to a noncharitat	ble exempt organizat	ion				1b(1)	X
	rchases of assets from a nor						1b(2)	X
• • •	ntal of facilities, equipment,	•	•				1b(3)	X
	imbursement arrangements						1b(4)	X
• •	ans or loan guarantees						1b(5)	X
	rformance of services or mei	mhershin or fundrais	una calicitatio	ne				X
٠,,	of facilities, equipment, mai	•	•				1b(6)	$\frac{x}{x}$
	nswer to any of the above is				waya ahaw tha fair		1c	
	ices given by the reporting fo			o iess man iair market vait	ie in any transactior	or snaring arrangemer	it, snow in	
	(b) Amount involved				1 (3) -			
a)Line no	(b) Amount involved	(c) Name of		e exempt organization	(0) Descriptio	n of transfers, transactions,	and sharing arranger	ments
			N/A					
							_	
					<del>                                     </del>		<del></del>	
					<del></del>	<del>-</del> ·		
								<del></del>
		_			_			
				<del></del>	<del></del>	· · · ·		
	oundation directly or indirect			or more tax-exempt organi	zations described		r	
	on 501(c) (other than section		ction 527?				Yes L	X No
b If Yes,	complete the following sche			I	<del></del>	<del> </del>		
	(a) Name of org	anization		(b) Type of organization		(c) Description of relati	onship	
	N/A	<del></del>						
							_	
						<del></del>	- · - · · · · · · · · · · · · · · · · ·	
				•				
	der penalties of perjury, I declare the						May the IRS discus	ss this
Sign   👢	belief, it is true, correct, and com		_ ` .	taxpayer) is based on all informat	tion of which preparer h	as any knowledge	return with the prep shown below? See	parer
Here	NV Ish Isal	IL UP I	FMB	15-9-18			X Yes	No
Š	ignature of officer or trustee			Date	Title		103	
	Print/Type preparer's na	me	Preparer's si		Date	Check if P7	TN .	
				-		self- employed		
Paid	JILL LUNDI	R	Qùt	E. Lundie	5/7/18	, , , I	0053203	0
Prepare			LLP		<u> </u>	Firm's EIN ► 86-		
Use Onl	Time shame > 222	OTITE TWY	חחב			FIRM'S EIN P 86-	.1000//2	
<del>-</del>	·	EU B E35.	D GMDE:	om Gurma 444		<del></del>		
				BT, SUITE 11	J	- F63	200 445	_
	DA'	VENPORT,	TA 228	U /		Phone no. 563-		
							Form <b>990-P</b>	<b>F</b> (2017)

# ROBERT A & PATRICIA K HANSON CHARITABLE FOUNDATION C/O FIRST MIDWEST BANK Part IV | Capital Gains and Losses for Tax on Investment Income

CONTINUATION FOR 990-PF, PART IV 36-3406431 PAGE 1 OF 1

p   Capital Gaine and E	COCCO ICI I LA CII III COCIIII CIII III COIII C				
. (a) List a 2-story	nd describe the kind(s) of property sol brick warehouse; or common stock, 2	ld, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
	LARGE CAP EQUITY		P		12/31/17
b APPLE COMPUTER		TOND	P		$\frac{12/31/17}{11/24/17}$
c MARATHON OIL (			P		$\frac{11/24/17}{11/24/17}$
	LARGE CAP EQUITY	FUND	P		11/24/17
e VAREX IMAGING			P		11/24/17
f VERIZON COMMUN	NICATIONS COM		P		11/24/17
g WALGREENS BOOT	TS ALLIANCE INC		P	VARIOUS	11/24/17
h FIRST MIDWEST	LARGE CAP EQUITY	FUND	P	VARIOUS	12/31/17
<u> </u>					<u></u>
<u></u>		· · · · · · · · · · · · · · · · · · ·			
_k					
1		· · · · · · · · · · · · · · · · · · ·			<u> </u>
m		·			ļ <del>-</del>
<u>n</u>					
0	(I) Day 1 - 1 - 1 - 1	1 (10)		<u> </u>	<u>L</u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		) Gain or (loss) Ilus (f) minus (g)	
a 5,644	_ <del></del>	processing on care		(1)	5,644.
b 17,283		1,431.			15,852.
c 3,977		3,955.			22.
d 50,000	<del></del>	52,995.			-2,995.
e 2,667		1,006.			1,661.
f 5,124		5,342.			-218.
g 12,397	•	8,085.			4,312.
h 14,729	•				14,729.
1					
1					
<u>k</u>					
<u> </u>	<del></del>				_ <del></del>
<u>m</u>					<u> </u>
<u>n</u>	<del></del>				
Complete only for accets show	ving gain in column (h) and owned by	the foundation on 12/31/60	/D.L		
Complete only for assets show	(j) Adjusted basis	(k) Excess of col. (i)		ses (from col. (h)) of col. (h) gain over	
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any		ot less than "-0-")	(.,,,
a					5,644.
h					15,852.
<u>C</u>					22.
d					-2,995.
е					1,661.
f					-218.
9					4,312.
h	<del></del>				14,729.
1	<del></del>				
	<del></del>				
<u>k</u>	<del> </del>				<del></del>
1	<del> </del>				
<u>m</u>	<del> </del>	<del> </del>			
<u>n</u>					
0		<u> </u>	<del></del>		
2 Capital gain net income or (net	capital loss) { If gain, also enter "-1"	r in Part I, line 7 0-" in Part I, line 7	2		39,007.
If gain, also enter in Part I, line		nd (6):			
If (loss), enter "-0-" in Part I, lin	e x	J I	2 I	N/A	

FORM 990-PF	DIVIDEND	S AND INTER	EST	FROM SECUR	ITIES S'	PATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DOMESTIC DIVIDENDS FOREIGN DIVIDENDS	16,216 3,488		0.	16,216. 3,488.	16,216. 3,488.	
LONG TERM CAPITAL GAIN DIVIDENDS NONQUALIFIED	4,633	•	0.	4,633.	4,633.	
DOMESTIC DIVIDENDS NONQUALIFIED	809	•	0.	809.	809.	
FOREIGN DIVIDENDS NONQUALIFIED SHORT TERM CAPITAL GAIN	524	•	0.	524.	524.	
DIVIDENDS QUALIFIED FOREIGN	462	•	0.	462.	462.	
ST CAP GAIN/DIV QUALIFIED SHORT TERM CAPITAL GAIN	24	•	0.	24.	24.	
DIVIENDS USGI REPORTED AS NON QUALIFIED	771	•	0.	771.	771.	
DIVIDENDS	160	•	0.	160.	160.	
TO PART I, LINE 4	27,087	•	0.	27,087.	27,087.	
FORM 990-PF		TAX	ES		Si	PATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST- IT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INCOME TAX FOREIGN TAX	_	15. 427.	-	0. 427.		0.
TO FORM 990-PF, PG	1, LN 18 =	442.		427.		0.
FORM 990-PF	<del></del>	OTHER E	VDEN	icpc		PATEMENT 3
			APEN			C INAMATA:
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) 'INVEST- IT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMEN	NT FEES	1,175.		1,175.	<del></del>	0
TO FORM 990-PF, PG	1, LN 23	1,175.		1,175.		0.
	=					<del></del>

FORM 990-PF CORPORATE S	STOCK	STATEMENT 4
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK	620,937.	1,130,743.
TOTAL TO FORM 990-PF, PART II, LINE 10B	620,937.	1,130,743.

3 Grants and Contributions Paid During the				<del></del>
Recipient	If recipient is an individual,	T		<b></b>
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
BIX BEIDERBECKE MEMORIAL SOCIETY	NONE	501(C)(3)	UNRESTRICTED	300
CHILDREN'S THERAPY CENTER	NONE	501(C)(3)	UNRESTRICTED	1,000
COMMUNITY FOUNDATION OF THE GREAT	NONE	501(C)(3)	UNRESTRICTED	2,400
100 Mydwyd		E01/61/21		
FIGGE ART MUSEUM	NONE	501(c)(3)	UNRESTRICTED	5,000
HOBE SOUND COMMUNITY CHEST	NONE	501(C)(3)	UNRESTRICTED	350
JEFFREY THOMAS HAYDEN FOUNDATION	NONE	501(C)(3)	UNRESTRICTED	5,000
JUNIOR ACHIEVEMENT	NONE	501(C)(3)	UNRESTRICTED	1,000
JUPITER ISLAND HISTORICAL SOCIETY	NONE	501(C)(3)	UNRESTRICTED	500
JUPITER ISLAND MEDICAL CENTER FOUNDATION	NONE	501(C)(3)	UNRESTRICTED	2,900
JUPITER ISLAND MEIDCAL CLINIC	NONE	501(C)(3)	UNRESTRICTED	
				1,000
Total from continuation sheets	<u>.</u>			40,675

36-3406431

Part:XV Supplementary Information	on			
3. Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	-	ļ
LIVING LANDS AND WATERS	NONE	501(C)(3)	UNRESTRICTED	400.
				100.
MAYO FOUNDATOIN	NONE	501(C)(3)	UNRESTRICTED	
		<del> </del>	<del></del>	1,000.
				i
NIABI ZOO	NONE	501(C)(3)	UNRESTRICTED	500.
				<u> </u>
PUTNAM MUSEUM	NONE	501(C)(3)	UNRESTRICTED	500
		<del> </del>	<del> </del>	500.
SKIP-A-LONG DAY CARE CENTER	NONE	501(C)(3)	UNRESTRICTED	
DRIT A HONG DAT CARD CHATER				500.
STUDENT HUNGER DRIVE	NONE	501(C)(3)	UNRESTRICTED	500.
TOWN OF JUPITER ISLAND	NONE	501(C)(3)	UNRESTRICTED	
			<del> </del>	500.
TRINITY HEALTH FOUNDATION	NONE	501(c)(3)	UNRESTRICTED	500.
TWO RIVERS YMCA	NONE	501(C)(3)	UNRESTRICTED	1,000.
UNITED EDUCATION FOUNDATION	NONE	501(C)(3)	UNRESTRICTED	
Total from continuation sheets				1,000.
Total Hotel Continuation Succes		<del></del>		L

Part XV Supplementary Informatio				
3. Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
UNITED WAY OF MARTIN COUNTY	NONE	501(C)(3)	UNRESTRICTED	
		501(0)(3)		1,000
UNITED WAY OF THE QUAD CITIES	NONE	501(C)(3)	UNRESTRICTED	1,000
WOPT	NONE	501(C)(3)	UNRESTRICTED	75
				, ,
wvik	NONE	501(C)(3)	UNRESTRICTED	
	<del>                                     </del>		<del></del>	3,000
CRESTVIEW PRESBYTERIAN CHURCH	NONE	501(C)(3)	UNRESTRICTED	
				5,000
JUPITER ISLAND HOLDINGS	NONE	501(C)(3)	UNRESTRICTED	
		<del> </del>	<del> </del>	750
LEUKEMIA & LYMPHOMA SOCIETY	NONE	501(C)(3)	UNRESTRICTED	
				4,000
	1			
	1			
Total from continuation sheets		·	<u> </u>	