## Form **990-PF**

## **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0052

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

2017

_		Tue Service ► Go to www.irs.gov/Form990PF fo	r instructions	and the late	st information	on. Open	to Public Inspection
Fo	or calen	dar year 2017 or tax year beginning		, 2017, and			, 20
N	ame of for	undation			A Employe	r identification numbe	er
T	HE CH	ARITABLE FOUNDATION			36-43	182930	
$I_{-\ell}$	lumber an	d street (or P O. box number if mail is not delivered to street address)		Room/suite	B Telephon	e number (see instruct	ions)
3	049 PI	EBBLE BEACH CIRCLE			(707	338-7797	
		n, state or province, country, and ZIP or foreign postal code				ion application is pend	ing check here▶
F	ATRET	ELD CA 94534				or approador to porta	g, 0.100K 11010 F
			of a former	public charity	D 1 Foreign	n organizations, check	here ►
		☐ Final return ☐ Amended r		<b>,</b>	1		·
		☐ Address change ☐ Name char			2. Foreigi	n organizations meeting here and attach compl	g the 85% test,
H	1 Check type of organization: Section 501(c)(3) exempt private foundation					foundation status was	terminated under
X		n 4947(a)(1) nonexempt charitable trust			section 5	07(b)(1)(A), check here	▶□
뜯		arket value of all assets at J Accounting method			ł		
•		f year (from Part II, col. (c),	. M Casii	Accidai	F If the four	ndation is in a 60-mont ction 507(b)(1)(B), chec	h termination k here ▶ □
			on oach back	. 1	under 360	such sor (b)(1)(b), check	Kileio P
			On Cash Dasis	·· <i>)</i>	<u> </u>	<del></del>	
-	Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue expenses p		tinvestment	(c) Adjusted net	(d) Disbursements for chantable
		the amounts in column (a) (see instructions).)	books	e,   ' '	ncome	ıncome	purposes (cash basis only)
	1 -						(Justi Dasis Utily)
	1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check ► ☑ if the foundation is not required to attach Sch. B		<del></del>			
	3	Interest on savings and temporary cash investments	1 0	7.6			
	4	Dividends and interest from securities	1,8	/6.	1,876.		
	5a	Gross rents					
_	b	Net rental income or (loss)		<del></del>			
9	6a	Net gain or (loss) from sale of assets not on line 10					
	_b	Gross sales price for all assets on line 6a					
á	7	Capital gain net income (from Part IV, line 2)		<del></del>	11,261.	11 061	
u	-   -	Net short-term capital gain				11,261.	
	9	Income modifications		<del> </del>			
	10a	Gross sales less returns and allowances		<del></del>			
	b	Less: Cost of goods sold		<del></del> i		<del></del>	
	l_c	Gross profit or (loss) (attach schedule)		<del>-</del>	1		
	11	Other income (attach schedule) See . Stmt		1.	1.	11 261	
_	12	Total. Add lines 1 through 11	1,8	77.	13,138.	11,261.	
9	2   13	Compensation of officers, directors, trustees, etc.					
900	14	Other employee salaries and wages Pension plans, employee benefits EIVED					
		l =					
Š	16a	Accounting fees (attach schedule)  Other professional fees (attach schedule)	<del> </del>		1 000	<u> </u>	<del></del>
9	Ь	Accounting fees (attach schipplye) 8. 2018	1,0	00.	1,000.	<u> </u>	<del> </del>
-	C			<del></del>			<del>                                     </del>
ì	17	Interest  Taxes (attach schedule) (see instructions) See Stmt	1 -	22	1 500		
Constitution and Administrative Ever	18		1,5	22.	1,522.		<del></del>
	19	Depreciation (attach schedule) and depletion				<del></del>	<u> </u>
Ž	20	Occupancy	<u> </u>			<del></del>	<del> </del>
7	21	Travel, conferences, and meetings	<del> </del>			<del></del>	<del> </del>
8	22	Printing and publications			<del></del>	<del></del>	<del> </del>
Ş	23	Other expenses (attach schedule)		<del></del>		<del></del>	<del> </del>
į	24	Total operating and administrative expenses.					
į	5	Add lines 13 through 23		22.	2,522.	<del></del>	, ,,
ć	25	Contributions, gifts, grants paid		00.	2 522		4,500.
_	26	Total expenses and disbursements. Add lines 24 and 25	/,0	22.	2,522.		4,500.
	27	Subtract line 26 from line 12:		1			•

For Paperwork Reduction Act Notice, see instructions.

Excess of revenue over expenses and disbursements

Net investment income (if negative, enter -0-) .

c Adjusted net income (if negative, enter -0-)

REV 01/03/18 PRO

10,616.

11,261.



Form **990-PF** (2017)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	beginning or year		Ena o	<u>.                                    </u>
			(a) Book Value	(b) Book Valu	ie	(c) Fair Market Value
	1 4					
ľ	2	Savings and temporary cash investments				
l	3	Accounts receivable ▶				
ļ		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
ĺ		Less: allowance for doubtful accounts ▶				
Į	5	Grants receivable		<del></del>		
ļ	6	Receivables due from officers, directors, trustees, and other				
ļ	•	disqualified persons (attach schedule) (see instructions)				
ĺ	-	· · · · · · · · · · · · · · · · · · ·				
-	7	Other notes and loans receivable (attach schedule) ▶				
	_	Less: allowance for doubtful accounts ▶	<del></del>	<del></del>		
Assets	8	Inventories for sale or use		<del></del>		
SS	9	Prepaid expenses and deferred charges				
₹	10a	Investments—U.S. and state government obligations (attach schedule)	121,587.	175,0	00.	175,000.
	b	Investments—corporate stock (attach schedule)		·		
	С	Investments - corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment: basis ▶				
	•	Less: accumulated depreciation (attach schedule) ▶				
i	15	Other assets (describe				
	16	Total assets (to be completed by all filers—see the	<del></del>			
	10	instructions. Also, see page 1, item I)	121 507	175 0	^^	175 000
	-		121,587.	175,0	00.	175,000.
	17	Accounts payable and accrued expenses				
ģ	18	Grants payable				
逹	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ia	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe ►				
	23	Other liabilities (describe ►) <b>Total liabilities</b> (add lines 17 through 22)				
		Foundations that follow SFAS 117, check here L				
alances	i	and complete lines 24 through 26, and lines 30 and 31.				
Ĕ	24	Unrestricted				
큠	25	Temporarily restricted				
8	26	Permanently restricted				
Net Assets or Fund B		Foundations that do not follow SFAS 117, check here ▶ 🏻				
亞	l	and complete lines 27 through 31.	}		1	į.
5	27	Capital stock, trust principal, or current funds	121,587.	175,0	00-	
2	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
Se	29	Retained earnings, accumulated income, endowment, or other funds				
ğ	30	Total net assets or fund balances (see instructions)	121,587.	175,0	00	
¥	31	Total liabilities and net assets/fund balances (see	121,307.	1/3,0	<del>50.</del>	
ž	"	instructions)	121 507	175 0	00	
		Analysis of Changes in Net Assets or Fund Balances	121,587.	175,0	00.	L
	rt III	al net assets or fund balances at beginning of year—Part II, colu	mp (a) line 30 /m	t agree with		
1		al net assets or fund balances at beginning of year—Part II, colu -of-year figure reported on prior year's return)		-	ا ما	121 502
					1	121,587.
2		er amount from Part I, line 27a			2	-5,145.
3		er increases not included in line 2 (itemize) ▶ capital gains		yions	3	58,558.
4		Hines 1, 2, and 3			4	175,000.
5	Dec	reases not included in line 2 (itemize) ▶			5	
_6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)—	6	175,000.		

Capital Gains and Losses for Tax on Investment Income

Part IV

		s) of property sold (for example, real esta or common stock, 200 shs. MLC Co)	P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)		(d) Date sold (mo., dey, yr.)		
1a	SEE SCHEDULE ATTACHE	ED .		P	01/	01/2017	12/31/2017	
b					<u> </u>	02,202.		
С								
d								
е							-	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	<del></del>	other basis nse of sale		(h) Gain or (loss) ((e) plus (f) minus (g))		
a	172,476.			161,215.			11,261.	
b								
c								
d								
е								
	Complete only for assets show	ng gain in column (h) and owned by	the foundation	on 12/31/69.		(I) Gains (Co	l. (h) gain minus	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col. (i) (j), if any			t less than -0-) <b>or</b> from col. (h))	
a				_			11,261.	
b								
С								
d								
е								
2	Capital gain net income or (	not canital locel ( -	lso enter in Pa enter -0- in Pai		2		11,261.	
3	Net short-term capital gain	or (loss) as defined in sections 1	1222(5) and (6)	•				
	If gain, also enter in Part I,	line 8, column (c). See instruct	tions. If (loss)	, enter -0- in }	3		11,261.	
Part	V Qualification Under	Section 4940(e) for Reduc	ed Tax on N	let Investment	Inco	me		
If "Ye	s," the foundation doesn't qu	ection 4942 tax on the distribute alify under section 4940(e). Do r	not complete t	his part.			☐ Yes ☐ No	
_1_	(a)	nt in each column for each year	; see the instit	<del></del>	aking	any entries.	(d)	
Cale	Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of	(c) f nonchantable-use a	ssets		(d) tnbution ratio divided by col. (c))	
	2016	<del> </del>	0.		0.		0.000000	
	2015	<del></del>	0.		0.		0.000000	
	2014	<del></del>	0.		0.		0.000000	
	2013	<del></del>	0.		0.		0.000000	
	2012	<u> </u>	0.[		0.	<del></del>	0.000000	
2	Total of line 1, column (d)				L	2	0.000000	
3		or the 5-year base period—divion ndation has been in existence if				3	0.000000	
4	Enter the net value of nonch	naritable-use assets for 2017 fro	om Part X, line	5	- }	4	0.	
5	Multiply line 4 by line 3 .				-	5	0.	
6	Enter 1% of net investment	income (1% of Part I, line 27b)				6	106.	
7	Add lines 5 and 6					7	106.	
8	Enter qualifying distributions of the street	s from Part XII, line 4	Part VI, line 1b		. that p	8 art using a	4,500. 1% tax rate. See the	



	ee ins	truction	ons)				
		N/A					
Domestic foundations that meet the section 4940(e) requirements in Part V, check		106.					
here ► 🗵 and enter 1% of Part I, line 27b							
All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of			-				
Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0.	.				
Add lines 1 and 2							
Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0.					
Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		106.					
Credits/Payments:							
2017 estimated tax payments and 2016 overpayment credited to 2017   6a			1				
Exempt foreign organizations—tax withheld at source 6b			1				
Tax paid with application for extension of time to file (Form 8868) . 6c							
Backup withholding erroneously withheld 6d							
Total credits and payments. Add lines 6a through 6d							
Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached 8							
<del></del>		106.					
Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10		0.					
Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11							
	d it	Ye	s No				
participate or intervene in any political campaign?	_	а	×				
Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See instructions for the definition		b	×				
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater published or distributed by the foundation in connection with the activities.	ials						
Did the foundation file Form 1120-POL for this year?	. 1	c	X				
Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:							
Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impose on foundation managers. ▶ \$	ed						
		2	×				
Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		<u>.                                     </u>	×				
•	_						
	-		×				
Was there a liquidation, termination, dissolution, or substantial contraction during the year?	_		×				
	}	-	1				
	į		}				
	<b>.</b>	1					
		_					
- · · · · · · · · · · · · · · · · · · ·			×_				
	^v  _`	<u> </u>	+				
·							
If the encury is "Vee" to line 7, has the foundation furnished a copy of Form 900-PF to the Attorney Gen	eral	1	J				
(or designate) of each state as required by General Instruction G? If "No," attach explanation	<u> </u>	b x					
(or designate) of each state as required by General Instruction G? If "No," attach explanation	. 8	b x	-				
(or designate) of each state as required by General Instruction G? If "No," attach explanation	. 8 ) or	b x					
(or designate) of each state as required by General Instruction G? If "No," attach explanation	. 8 ) or ⊇s,"	b x	×				
	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.  Due of nuling or determination letter:  Quitach copy of letter if necessary—see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check  All other obmestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).  Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)  Add lines 1 and 2  Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)  Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  Credits/Payments:  2017 estimated tax payments and 2016 overpayment credited to 2017  Exempt foreign organizations—tax withheld at source  Tax paid with application for extension of time to file (Form 8868)  Backup withholding erroneously withheld  Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached  Tax due. If the total of lines 5 and 8 is more than line 7, enter amount over  Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Tenter the amount of line 10 to be: Credited to 2018 estimated tax ▶  Refunded  Tenter the amount of line 10 to be: Credited to 2018 estimated tax ▶  Refunded  Till the sax year, did the foundation attempt to influence any national, state, or local legislation or diparticipate or intervene in any political campaign?  During the tax year, did the foundation attempt to influence any national, state, or local legislation or diparticipate or intervene in any political campaign?  During the tax year, did the foundation attempt to influence any national, state, or local legislation or diparticipate or intervene in any political campaign?  During the tax year, did the foundation attempt to influence any national, state, or local legislation or diparticipate or intervene in any political campaign?  Th	Exempt foreign (sundations described in section 494(q(x)), check here ▶ ☐ and enter *TNA* on line 1.	Exempt operating foundations described in section 4940(g)(2), check here ▶ □ and enter "NA" on line 1.  Da'e of nulling or determination letter:  N/A  Domestic foundations that meet the section 4940(e) requirements in Part V, check  All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).  Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)  Add lines 1 and 2  Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)  Add lines 1 and 2  Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)  Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)  Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-  Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-  Carditary Payments.  105.  Credits/Payments.  207.  Exempt foreign organizations—  Exempt foreign organizations				

Part	VII-A Statements Regarding Activities (continued)			<u> </u>
			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	•	×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	├─		<del></del>
	person had advisory privileges? If "Yes," attach statement. See instructions	12		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	
	Website address ► N/A			
14	The books are in care of ▶ VALERIE C. SMITH HUNT Telephone no. ▶ (847)	41-	7317	,
	Located at ▶ 101 BIRCH ST. WINNETKA, ILLIN IL ZIP+4 ▶ 60093			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here and enter the amount of tax-exempt interest received or accrued during the year ▶ 15		•	▶ [
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			,
	the foreign country ►	<u> </u>		l
Part	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.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):	}		ĺ
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?   Yes  No  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	ĺ	'	1
	disqualified person?	}		1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	ł		j
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1		1
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			l
	the benefit or use of a disqualified person)?	ļ		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	ļ		
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			]
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			ļ
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		L
•	Organizations relying on a current notice regarding disaster assistance, check here	1		
С	were not corrected before the first day of the tax year beginning in 2017?	1c		×
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	-: <u>-</u> -		<u> </u>
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	i		
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	١		}
	6e, Part XIII) for tax year(s) beginning before 2017?	1		1
_	If "Yes," list the years ▶ 20 , 20 , 20 , 20	{		1
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	ľ		
	all years listed, answer "No" and attach statement—see instructions.)	2b		_
^	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	-20		×
·	► 20 , 20 , 20 , 20	Į		[
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	1		1
ь	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or	Ì		]
-	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	}		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			<u> </u>
_	foundation had excess business holdings in 2017.)	3b		×
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	×
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?	AL		-
	chantable purpose that had not been removed non-jeopardy before the first day of the tax year beginning in 2017:	4b	L	<u> </u>

rait	MILE Statements negaring Activities			4/20	viay be n	equire	u (corta	lueu)			
5a	During the year, did the foundation pay or incur	-							<u> </u>	Yes	No
	(*) Carry on propaganda, or otherwise attempt to	o influe	nce legislatio	n (sect	ion 4945(e)	)? .	Yes	⊠ No			
	(2) Influence the outcome of any specific public	election	on (see secti	on 495	5); or to ca	arry on,			{		( i
	directly or indirectly, any voter registration dri	ive?					☐ Yes	⊠ No			
	(3) Provide a grant to an individual for travel, stu-	dv. or d	ther similar r	ouroose	es?		Yes	⊠ No			i
	(4) Provide a grant to an organization other than	•	•	•			_	٠.٠٠	1		
						.500	☐ Yes	⊠ No	1		
	(5) Provide for any purpose other than religious,		<del>-</del>				_	<u> </u>	]		
	purposes, or for the prevention of cruetty to c						□Yes	<b>S</b>			
_	If any answer is "Yes" to 5a(1)-(5), did any of the							× No	1		
b	Regulations section 53.4945 or in a current notice							ibea in	<b></b>		اــــا
	· ·	-	-			ructions	s		5b		
	Organizations relying on a current notice regarding disaster assistance, check here								[ ]		
C	, , , , , , , , , , , , , , , , , , ,										ĺ
	because it maintained expenditure responsibility		_				∐ Yes	☐ No			
	If "Yes," attach the statement required by Regula								-		1 1
6a	Did the foundation, during the year, receive any	funds,	directly or ind	directly.	, to pay pre	emiums			} :		
	on a personal benefit contract?						☐ Yes	X No	1		
b	Did the foundation, during the year, pay premiun	ns, dire	ctly or indired	tly, on	a personal	benefit	contract	? .	6b		×
	If "Yes" to 6b, file Form 8870.										
7a	At any time during the tax year, was the foundation a	a party t	to a prohibited	I tax she	elter transac	tion?	Yes	⊠ No	1		
b	If "Yes," did the foundation receive any proceeds	s or hav	e any net inc	come at	ttributable :	to the t	ransaction	n? .	7b		
Par	VIII Information About Officers, Direc	tors, 7	rustees, Fo	ounda	tion Mana	agers,	Highly F	Paid E	mploy	ees,	
	and Contractors	•									
1	List all officers, directors, trustees, and found	ation r	nanagers an	d their	compens	ation. S	See instr	uctions	<u> </u>		
		(b) Title	e, and average	(c) Co	mpensation	(d)	Contribution	s to		nse aco	count
	(a) Name and address		rs per week ed to position		not paid, nter -0-)	employee benefit plans and deferred compensation		(e) Expense account other allowances			
	EDTE C CMIMU UIDM		IDENT		····						
	ERIE C SMITH HUNT	11430.	0.00		0.	Ì		0.			0.
	PEBBLE BEACH CIRCLE FAIRFIELD CA 94534	CECDI	ETARY		<del></del>	<del> </del>					<u> </u>
	RY HENDERSON	BECK	0.00		0.	ł		0.			0.
3045	PEBBLE BEACH CIRCLE FAIRFIELD CA 94534	<b>}</b> -	0.00	<u> </u>	<del> </del>	<del> </del>		0.	<del></del>		
		ł				1					
		<del> </del>				ļ					
	, 	ŀ				1			ı		
			46 46				!		-\ M		
2	Compensation of five highest-paid employed	es (otn	er man mo:	se inci	uaea on II	ne 1-	see instr	uctions	s). IT N	one,	enter
	"NONE."		1		<del>,</del>		<del>,</del>	<del></del>			
			(b) Title, and a				(d) Contribi employee	L F 1	(e) Expe	nse ac	count.
	(a) Name and address of each employee paid more than \$50,00	00	hours per v		(c) Compe	nsation	plans and	deferred	other	allowan	nces
							compen	sation			
NON	<u></u>		1		<b>\</b>		[				
			<u> </u>		<u> </u>		ļ				
			<b>!</b>		1		ļ				
					<u> </u>		<u></u>				
					1						
			<u> </u>		L		L				
			<u> </u>						<del></del>		
				— <u></u> -							
										·	
Total	number of other employees paid over \$50,000 .							. •	0		

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers and Contractors (continued)	s, Highly Paid En	nployees,
3 Five	highest-paid independent contractors for professional services. See instructions. If	none, enter "NON	E." •
		e of service	(c) Compensation
NONE			
		<del> </del>	
			}
Total numb	per of others reaciving ever \$50,000 for professional continue		<del> </del>
Total numi	per of others receiving over \$50,000 for professional services	· · · · · · · · · · · · · · · · · · ·	10
Part IX-A	Summary of Direct Charitable Activities		
	undation's four largest direct chantable activities during the tax year. Include relevant statistical information one and other beneficiaries served, conferences convened, research papers produced, etc.	such as the number of	Expenses
1			
2			
		<del></del>	
3			
			] _
4	<del></del>		<del> </del>
•			†
Part IX-E	Summary of Program-Related Investments (see instructions)		<u></u>
	he two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	<del></del>	Amount
1	•		
			<u> </u>
2			
			ļ
			ļ
•	rogram-related investments See instructions.		
3			
			}
Total Add	lines 1 through 3		
- Juli Auu	mileo i direogni e i i i i i i i i i i i i i i i i i i	· · · · · · · · · · · · · · · · · · ·	Form 990-PF (2017)

Part		gn four	ndations,
	see instructions.)		
1	Pair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	[ _ [	
	purposes:		
	Average monthly fair market value of securities	1a	
þ	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	
е	Reduction claimed for blockage or other factors reported on lines 1a and	1	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	1 1	
	instructions)	4	0.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ►  and do not complete this part.)	oundat	ions
1	Minimum investment return from Part X, line 6	1	
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.) 2b	1	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	4,500.
b	Program-related investments—total from Part IX-B	16	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1 1	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	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	4,500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	1 . 1	
	Enter 1% of Part I, line 27b. See instructions	5	106.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	4,394.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g wheth	er the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		- 000 DE /
DAA	REV 01/02/18 PRO		Form <b>990-PF</b> (2017)

Part	XIII Undistributed Income (see instruction	ons)			•
1	Distributable amount for 2017 from Part XI, line 7	(a) Corpus	(b) Years pnor to 2016	<b>(c)</b> 2016	(d) 2014
2			<del></del>		
2	Undistributed income, if any, as of the end of 2017: Enter amount for 2016 only	,			
a	•				
Ъ	Total for prior years: 20,20,20		<del></del>		
3	Excess distributions carryover, if any, to 2017:			1	
а	From 2012				
D	From 2013	ŀ			
C	From 2014				
đ	From 2015				
e	From 2016				
1	Total of lines 3a through e				
4	Qualifying distributions for 2017 from Part XII, line 4: ▶ \$				
	·				
a	Applied to 2016, but not more than line 2a .  Applied to undistributed income of prior years				
þ	(Election required—see instructions)				į
С	Treated as distributions out of corpus (Election	<del></del>	<del></del>		<u> </u>
Ç	required—see instructions)	'			
d	Applied to 2017 distributable amount				
e	Remaining amount distributed out of corpus	<del> </del>			<u> </u>
5	Excess distributions carryover applied to 2017	<del></del>			L
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)	" 			
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract				<del> </del>
_	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				} 
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable	_			
	amount-see instructions				
e	Undistributed income for 2016. Subtract line				1
	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	"	ĺ		
_	distributed in 2018				ļ
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)				1
8	Excess distributions carryover from 2012 not			<del></del>	
U	applied on line 5 or line 7 (see instructions).				1
9	Excess distributions carryover to 2018.				
_	Subtract lines 7 and 8 from line 6a	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			
10	Analysis of line 9:			<del></del>	<del></del>
a	Excess from 2013				1
b	Excess from 2014			İ	
c	Excess from 2015	i			
d	Excess from 2016				
e	Excess from 2017				

arı 🧷	(IV Private Operating Founda	<b>tions</b> (see instr	uctions and Parl	VII-A, question 9		N/A
la	If the foundation has received a ruling foundation, and the ruling is effective for	or determination	n letter that it is a	private operating	·	
	Check box to indicate whether the four		e operating founda		ction 🗌 4942(j)(	3) or, 🗌 4942(j)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	<u> </u>	Prior 3 years		(e) Total
	investment return from Part X for each year listed	(a) 2017	<b>(b)</b> 2016	(c) 2015	<b>(d)</b> 2014	
	85% of line 2a		<del> </del>	<del> </del>		
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					
	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:				1	
а	"Assets" alternative test-enter:					
	(1) Value of all assets		<del> </del>	<b>/</b> ///////////////////////////////////		
	(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 listed				1	
С	"Support" alternative test—enter:		<del>                                     </del>			
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income		<u> </u>			
art	XV Supplementary Information	•	•	the foundation h	ad \$5,000 or me	ore in assets
	any time during the year- Information Regarding Foundation		ons.)			
a	List any managers of the foundation before the close of any tax year (but o	who have contrib				by the foundat
b	List any managers of the foundation ownership of a partnership or other e			•	•	rge portion of
2	Information Regarding Contribution Check here ► ☑ if the foundation unsolicited requests for funds. If the foundation the complete items 2a b c and d See it	only makes con oundation makes	tributions to pres	elected charitable of		
а	The name, address, and telephone nu		ddress of the pers	on to whom applica	tions should be ac	ddressed:
b	The form in which applications should	d be submitted ar	nd information and	I materials they sho	uld include:	
						<del></del>

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of any foundation manager or substantial contributor Amount contribution Name and address (home or business) recipient a Paid during the year US GYMNASTICS FOUNDATION 132 E. WASHINGTON S 700 INDIANAPOLIS IN 46204 YES EXERCISE FOR YOUTH 2,000. 2000 WALLS OF WITTENBURG PO BOX 188 WITTENBERG WI 54499 YES ENCOURAGEMENT OF ART FOR YOUTHS 0. HELPING FOUNDATION 500 PO BOX 413 WITTENBERG WI 54499 YES AQUATIC CENTER FOR YOUTH 2,500. PARK CITY CHRISTIAN CENTER 200 1283 DEEERVALLEY DRIVE PARK CITY UT 84060 YES CHRISTIAN CENTER 0. 3a 4,500. **b** Approved for future payment Total 3b

nter	gross amounts unless otherwise indicated.	(a) Business code	(b) Amount	(c)	(d)	Related or exempt function income
1	Program service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
	a					
	b				·	
	<u> </u>			<del></del>	<del></del>	<del></del>
	d	<del> </del>		<del></del>		<del>- </del>
	e •	<del></del>			<del></del>	<del> </del>
	g Fees and contracts from government agencies			<del></del>		<del> </del>
2	<b>g</b> Fees and contracts from government agencies Membership dues and assessments	<del></del>		<del>+</del>	<del></del>	<del> </del>
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities	123456	1,876.	<del></del>		
5	Net rental income or (loss) from real estate:					
	a Debt-financed property		<del></del>		<del></del>	<del> </del>
	<b>b</b> Not debt-financed property					·
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory	123456				
9	Net income or (loss) from special events					]
10	Gross profit or (loss) from sales of inventory					
11	Other revenue: a CAPITAL GAIN DISTRIBUTIONS	123456				
	b					<u> </u>
	C					
	d					
	e					
40	Outstand Antal and common (b) (all amond (a)					
	Subtotal. Add columns (b), (d), and (e)	<u></u>	1,876.	<u> </u>		
13	Total. Add line 12, columns (b), (d), and (e)		1,876.		13	1,876.
1 <b>3</b> See	<b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	s.)			13	1,876.
1 <b>3</b> See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
1 <b>3</b> See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
1 <b>3</b> See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
1 <b>3</b> See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
1 <b>3</b> See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
1 <b>3</b> See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
1 <b>3</b> See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
1 <b>3</b> See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
13 See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
13 See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
13 See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
13 See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
1 <b>3</b> See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
1 <b>3</b> See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
1 <b>3</b> See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
1 <b>3</b> See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
1 <b>3</b> See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
1 <b>3</b> See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
13 See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
13 See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
13 See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
1 <b>3</b> See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
1 <b>3</b> See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
1 <b>3</b> See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		1,876.  Importantly to the uctions.)
1 <b>3</b> See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		

Form 99	0-PF (20	)17)							Pa	ige <b>13</b>
Part	XVII	Information Organizatio		sfers to and Trans	actions and F	Relationships W	ith Nonchar	iţable	<u>.</u>	•
1	in se			engage in any of the fo 501(c)(3) organization				-	Ÿes	No
а	_		orting foundation to	a noncharitable exer	npt organization	of:	ļ		1	1
								1a(1)		×
		ther assets .						1a(2)		×
b		transactions:								iÌ
				mpt organization .  able exempt organizat				1b(1)		<u> </u>
				r assets				1b(2) 1b(3)		×
			• •				• • • •	1b(3)		- <u>^</u> -
		oans or loan guar	•					1b(5)		×
	(6) P	erformance of se		ip or fundraising solic				1b(6)		×
C		-		sts, other assets, or pa				1c		×
d				s," complete the follo						
				ces given by the repo ement, show in colum						
(a) Line		b) Amount involved		nantable exempt organizatio		nption of transfers, tran				
		,			(4,7-33					
	_		<del></del>	<del></del>						
			<del></del> .							
		<del></del>	<del></del>	<del></del>						
	-+				<del></del>					
							<del></del>			
	descr	ribed in section 5	01(c) (other than se	filiated with, or related ction 501(c)(3)) or in so		re tax-exempt orç	janizations	Yes	X	—— No
<u>b</u>	IT TYE	s," complete the (a) Name of organi	following schedule	(b) Type of orga	nization	(c) Dec	scription of relation	ehin		
		(a) Name or organi	Lation	(b) Type of orga	TIIZZI(OTI	(0) Dec	Chphon of relation	isi iip		
		<del></del>				<del></del>				
					-					
Sign Here	coffe			ad this return, including accome taxpayer) is based on all info	ormation of which pre	parer has any knowledge	May the IR	S discu	ss this	return
11016		ature of officer er hus	tee	Date	PRESIDEN Title		See instruc	tions.	_Yes[	□No
Paid	<u> </u>	Print/Type preparer	s name	Preparer's signature	<del></del>	Date	Check X if P	TIN		
Prep		STEPHEN G.	MITCHELL CPA			05/14/2018	self-employed P	0149	<u> 53</u> 9	2
Use		Firm's name	STEPHEN G. M				s E!N ▶			
		Firm's address ▶	560 GREEN BA	Y RD.			eno. (847)44			
BAA			WINNETKA		IL 60093	5	Fo	m <b>99</b>	U-PF	(2017)