Return of Private Foundation

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

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	partment of the Treasury ternal Revenue Service To not enter social security numbers on this form as it may be made public. Open to Public Inspection						
		ndar year 2017 or tax year beginning		, and	ending		
	ne of for		· · · · · ·	,		r identification number	•
<u>.GE</u>	RALD	D. & HELEN M. STEPHENS FOUNDATION					
		street (or PO box number if mail is not delivered to street address)	om/suite	- 	37-1224611		
		ARCELLO WAY			B Telephone	e number (see instruction	ins)
		, state or province, country, and ZIP or foreign postal code	04110			(000) 057 00	· .
	PLES	ntry name Foreign province/state/county	34110	notal sada	ļ	(309) 657-224	
POI	eigii cou	mily hame Foreign province/state/county	Foreign p	ostal code	C If exempt	ion application is pendir	ng, check here ► 🔲 🕻
G	Check	all that apply: Initial return Initial return	of a former publ		D 1 Foreign	n organizations, check ł	nore 🛌
-		Final return Amended re		ic chanty	1	_	_
		☐ Address change ☐ Name chang			_	n organizations meeting here and attach comput	
H	Check	type of organization: X Section 501(c)(3) exempt p		172	4	foundation status was to	erminated under
		on 4947(a)(1) nonexempt charitable trust Other tax		\smile	section 50	07(b)(1)(A), check here	►U
$\overline{\mathbf{I}}$		arket value of all assets at J Accounting method		Accrual	1_ <i></i> .		
		year (from Part II, col. (c), Other (specify)	<u> </u>	, 1001.00.		ndation is in a 60-month ction 507(b)(1)(B), check	
		6) \$ 1,595,040 (Part I, column (d) must be	e on cash basis)			557 (5)(1)(2), 5,155.	
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily	expenses per	(b) Ne	et investment ncome	(c) Adjusted net	for charitable purposes
		equal the amounts in column (a) (see instructions))	books		ncome	income	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)				TO DESCRIPTION OF THE PARTY.	Maria Maria
	2	Check ▶☐ if the foundation is not required to attach Sch. B		THE YELLOW	Minte.	Liber W.	STATE OF THE STATE
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	21,88	33	21,883		
	5a	Gross rents		2002 2004 3106 300			
4	b	Net rental income or (loss)	44.0				
Revenue	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 81,124		56 😿 💉			
Ş.	7	Capital gain net income (from Part IV, line 2)		COLUMN TO SERVICE SERV	7	E MANAGER 6	
æ	8	Net short-term capital gain		A811 .2	Real S		100
	9	Income modifications	2 3 3 3 3 3 3		AUG3:		
	10a	Gross sales less returns and allowances	19017052			MOGDIENE	
	b	Less: Cost of goods sold	MARKET.	er etk k	Ø 10.02 m		Tarable in
	С	Gross profit or (loss) (attach schedule)			OF MARKET		
	11	Other income (attach schedule)					**************************************
	12	Total. Add lines 1 through 11	761,64	47	21,883	0	- ************************************
es	13	Compensation of officers, directors, trustees, etc.					
Su:	14 15	Other employee salaries and wages		+			<u> </u>
ğ	16a	Pension plans, employee benefits	20	05	205	l	205
û	b	Accounting fees (attach schedule)	30		305	 -	305
<u>š</u>	c	Other professional fees (attach schedule)		 			
rat	17	Interest					
Administrative Expense	18	Taxes (attach schedule) (see instructions)	50	05	505		505
Ή	19	Depreciation (attach schedule) and depletion					The state of the
뒫	20	Occupancy					
Ϋ́	21	Travel, conferences, and meetings					
aŭ	22	Printing and publications		40			
ğ	23	Other expenses (attach schedule)		10	10		10.
Operating and	24	Total operating and administrative expenses.		20	000	1	200
erŝ	25	Add lines 13 through 23		20 20 x	820	0	<u>820</u>
Õ	26 26	Total expenses and disbursements. Add lines 24 and 25				1	50,000
_	27	Subtract line 26 from line 12:	50,82	2U	820	0	50,820
	a a	Excess of revenue over expenses and disbursements .	710,8		444		
	b	Net investment income (if negative, enter -0-)	710,6		<u> «የቅዥ ማሊማቸው።</u> 21 በቡር		
		Adjusted net income (if negative, enter -0-)	- 22 2 32 3				

For Paperwork Reduction Act Notice, see instructions.

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Pa	art II	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		of year
_			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 2	Cash—non-interest-bearing Savings and temporary cash investments			
	3		-3-7		
	٦	Accounts receivable ► Less. allowance for doubtful accounts ►			
	4		498407 077000 1000		
	•				
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			<u> </u>
	١	disqualified persons (attach schedule) (see instructions)			
	7				
	′				
Ø	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
SS	1 . 1	•	21,739	767.40	767,425
•	10a	Investments—U.S. and state government obligations (attach schedule) Investments—corporate stock (attach schedule)	389,384		
	b	Investments—corporate bonds (attach schedule)	309,304	325,21	490,979
	C 11	Investments—land, buildings, and equipment basis			
	' '	Less accumulated depreciation (attach schedule)		274220000000000	
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	300,764	330,63	330,636
	14	Land, buildings, and equipment basis			
	' -	Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	711,887	1,423,28	1,595,040
_	17	Accounts payable and accrued expenses		1112-412-4	
' A	18	Grants payable			
ě	19	Deferred revenue			
Ę	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	o		0
alances		Foundations that follow SFAS 117, check here ▶ □ and complete lines 24 through 26, and lines 30 and 31.			
5	24	Unrestricted			
ale	25	Temporarily restricted			
	26	Permanently restricted			
Net Assets or Fund B		Foundations that do not follow SFAS 117, check here ▶ and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
Ş	28	Paid-in or capital surplus, or land, bldg., and equipment fund	711,887	1,423,28	30
še	29	Retained earnings, accumulated income, endowment, or other funds			
ĕ	30	Total net assets or fund balances (see instructions)	711,887	1,423,28	30
let	31	Total liabilities and net assets/fund balances (see		,	
~		instructions)	711,887	1,423,28	BO
Pa	art III	Analysis of Changes in Net Assets or Fund Balances			
1		net assets or fund balances at beginning of year-Part II, column			
		of-year figure reported on prior year's return)			711,887
2	Enter	r amount from Part I, line 27a			
		r increases not included in line 2 (itemize) INVESTMENTS UI		3	566
		lines 1, 2, and 3		4	1,423,280
		eases not included in line 2 (itemize)			
_6	Total	net assets or fund balances at end of year (line 4 minus line 5)-F	Part II, column (b), lin	e 30 . 6	1,423,280

Part.	a) List and describe the ki	und(s) of property sold (for example, real esuse, or common stock, 200 shs MLC Co)		J.116	(b) How acquired P—Purchase D—Donation		Pate acquired o , day, yr)	(d) Date sold (mo , day, yr)
1a								
b								
C								
d		· <u>·</u>						
<u>e</u>				1				
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		g) Cost or o				n or (loss) f) minus (g))
<u>a</u>								
b_			 					
_ <u>c</u>			 					
<u>d</u>			 					
<u>e</u>		40			10/01/00			
	Complete only for assets sh	nowing gain in column (h) and owner					• • • •	(h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess				t less than -0-) or rom col (h))
<u>a</u>							 	
b								
<u> </u>			 					
d								
е			<u> </u>		4.1. June 2	 		
2	Capital gain net income o	r (not canital loce) 1	also ento		•	ا ۾ ا		
_	Nisk should be used as a second of second	•), enter -(•	2		
3		n or (loss) as defined in sections] [
	· ·	I, line 8, column (c). See instruct	=		ler-0-101 }	ا ۾ ا		
Part		der Section 4940(e) for Red			J	3		
		e section 4942 tax on the distribu qualify under section 4940(e). Do				ase p	eriod?	Yes No
1		ount in each column for each ye	ar; see th	e instru	ctions before ma	aking a	any entries.	
	(a) Base period years	(b)	1.		(c)		Dis	(d) stribution ratio
Cal	endar year (or tax year beginning ir	Adjusted qualifying distribution	ns N	let value of	noncharitable-use a	ssets		divided by col (c))
	2016		3,301			6,749		0.22864
	2015		5,858			8,601		0.04629
	2014		5,263			4,676		0.03534
	2013		7,345			3,757		0.86635
	2012	10	4,412		1,49	5,730	, - -	0.06980
•								4.04044
2	Total of line 1, column (d						2	1 24644
3	_	for the 5-year base period—divi						0.04000
	the number of years the f	oundation has been in existence	e ir iess tr	ian 5 ye	ars	•	3	0.24928
4	Enter the net value of nor	ncharitable-use assets for 2017	from Part	X, line s	5		4	578,06
5	Multiply line 4 by line 3 .						5	144,10
6	Enter 1% of net investme	ent income (1% of Part I, line 27t	o)				6	21
7	Add lines 5 and 6	· · · · · · · · · · · · · · · · · · ·				. ,	7	144,31
8		ons from Part XII, line 4					8	50,82
-		ater than line 7, check the box in				at pai		

Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see i	nstruc	ctions)	
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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1	4	121
	here ▶ ☐ and enter 1% of Part I, line 27b			
С	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-)	2		0
3	Add lines 1 and 2	3		121
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	_4_		
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5		121
6	Credits/Payments:			
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6a			
b	Exempt foreign organizations—tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d	7		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	<u>8</u> 9		101
9 10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	10		421 0
11	Enter the amount of line 10 to be. Credited to 2018 estimated tax	11		0
	VII-A Statements Regarding Activities			<u> </u>
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or d	id ıt	Y	es No
	participate or intervene in any political campaign?		1a	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	e		
	instructions for the definition		1b	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater	rials	<i>1</i>	
	published or distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?		. 1c	<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation. ▶\$ (2) On foundation managers. ▶\$		\$5.6	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax im	posed		
2	on foundation managers. > \$			
2	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			
A ~	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	•	3	- X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year?		4a 4b 1	WA A
ь 5	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	X
J	If "Yes," attach the statement required by General Instruction T.	•		
6	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 direction			
	conflict with the state law remain in the governing instrument?			X
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	X
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	KAN a service Well to less 7 her the foundation for included a service for 200 DE to the Absence O			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney G			
0	(or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942		. 8b	X
9	or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part X			
	"Yes," complete Part XIV	, v . 11	9	×
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	 1a thei		- ^-
	names and addresses			X

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Part VII-A

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	2693	Yes	No
	the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	امدا	l	v
40	person had advisory privileges? If "Yes," attach statement. See instructions	12 13	X	_ <u>X</u> _
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶	[13]		
14	The books are in care of ► GERALD D. STEPHENS Telephone no. ► (309) 65	7-224	5	
	Located at ► P.O. BOX 469 MORTON IL ZIP+4 ► 61550	·		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here		. 1	▶ □
16	and enter the amount of tax-exempt interest received or accrued during the year ► 15		Yes	No
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	165	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the	10		
	name of the foreign country			
Pari	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	- A. E. Z. S. S.		***************************************
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	2.84	Yes	No
1a	During the year, did the foundation (either directly or indirectly):	9.37		
··u	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			4.3
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	7		
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	24		4
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	7		7
	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.)		* 1	1
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			48.
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance, check here	3		1
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	37		
_	were not corrected before the first day of the tax year beginning in 2017?	1c	SACURAL.	X www.
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	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 before 2017?		3	
	If "Yes," list the years ▶ 20, 20, 20,		\$ ee	
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
b	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		7	
=	▶ 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	27		
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or	1		
	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	1		
	foundation had excess business holdings in 2017.)	3b	N/A	<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .	4a	JOHN CT 2	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	1	2.3	12.1
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X

⊾ ^u .a

Part	VIII Statements Regarding Activities for	or Whi	ch Form 47	<u>20 Ma</u>	y Be Requ	uired (<u>continue</u>	<u>(d)</u>		
5a	During the year, did the foundation pay or incur ar (1) Carry on propaganda, or otherwise attempt to			(sectio	on 4945(e))	? .	Yes	X No	3	
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?					X No				
	(3) Provide a grant to an individual for travel, study	y, or ot	her sımılar pı	urposes	s?		Yes	X No		
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? See instructions	charit		-		ed in	☐ Yes	⊠ No		
	(5) Provide for any purpose other than religious, c purposes, or for the prevention of cruelty to ch				•		Yes	X No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice					•		bed in	5b	N/A
С	Organizations relying on a current notice regarding if the answer is "Yes" to question 5a(4), does the because it maintained expenditure responsibility for the latest than the property of th	founda	ition claim ex grant?	emptio	n from the t	ax	Yes	► □ □ No		
6а	If "Yes," attach the statement required by Regulation Did the foundation, during the year, receive any furn on a personal benefit contract?	ınds, d	rectly or indi	rectly, t	o pay prem		Yes	⊠ No		
b	Did the foundation, during the year, pay premiums If "Yes" to 6b, file Form 8870.	s, direc	tly or indirect	ly, on a	ı personal t	enefit (contract?	_	6b	X See See
7a h	At any time during the tax year, was the foundation a pa If "Yes," did the foundation receive any proceeds						Yes	X No	W. 1000 M. 1000	N/A
	VIII Information About Officers, Directo									
	and Contractors		,		`	,	.		. ,	,
1	List all officers, directors, trustees, and foundate	ation n	nanagers an	d their	compensa	ation. S	See instr	uctions	•	
	(a) Name and address	hou	e, and average rs per week ed to position	`´(lf ı	mpensation not paid, nter -0-)	emplo	Contribution oyee benefit erred compe	plans		nse account, allowances
See A	ttached Statement		.00		0					
			00		0					
			.00		0					
		/ a 4 la a	00		0	1		:		
2	Compensation of five highest-paid employees "NONE."	(otner	than those	inciua	ea on line	ı—see	ınstruct	ions). I	none,	enter
	(a) Name and address of each employee paid more than \$50,000	1	(b) Title, and a hours per w devoted to po	veek	(c) Comper	nsation	(d) Contrib employee plans and compen	benefit deferred		ense account, allowances
NON					ı <u>=</u>					
				<u> </u>						
Total	number of other employees paid over \$50,000 .		<u> </u>	· · ·				. ▶		

3 Five highest-paid independent contractors for professional services. See in	istructions. If none. enter "NONE	<u>:</u> ."
(a) Name and address of each person paid more than \$50,000		Compensation
ONE		
otal number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year include relevant statistical inform organizations and other beneficiaries served, conferences convened, research papers produced, etc	ation such as the number of	Expenses
1 NONE		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 an	2 t	Amount
1 NONE		
2		
<u> </u>		
All other program-related investments. See instructions		
3		

Form 990-PF (2017) Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 520,998 1a 1b 65,870 1c Fair market value of all other assets (see instructions) d 1d 586,868 Reduction claimed for blockage or other factors reported on lines 1a and 2 Acquisition indebtedness applicable to line 1 assets 2 3 586,868 3 Cash deemed held for charitable activities. Enter 11/2 % of line 3 (for greater amount, see 8,803 578,065 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 6 Minimum investment return. Enter 5% of line 5 . . . 6 28,903 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations, check here

and do not complete this part.) 1 28,903 Minimum investment return from Part X, line 6 1 Tax on investment income for 2017 from Part VI, line 5 2a Income tax for 2017. (This does not include the tax from Part VI.) 2b b 2c 421 Add lines 2a and 2b . . . 3 28,482 3 4 4 5 5 28,482 6 6 7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, 28,482 line 1 Part XII Qualifying Distributions (see instructions) #1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26 . . . 50,820 1a 1b b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 3 Amounts set aside for specific charitable projects that satisfy the. За а 3ь Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 4 50,820 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. 5

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

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

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50,820

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Form 990-PF (2017)

Part	XIII Undistributed Income (see instructions)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
	line 7				28,482
2	Undistributed income, if any, as of the end of 2017.				
а	Enter amount for 2016 only	2		0	
b	Total for prior years: 20, 20, 20				عن تعديد المساحد المساحد
3	Excess distributions carryover, if any, to 2017:				
а	From 2012	Marine Control of the			
b	From 2013				
С	From 2014				
d	From 2015	Ž.			
е	From 2016				
f	Total of lines 3a through e	1,651,601			
4	Qualifying distributions for 2017 from Part XII,				
	line 4: ▶ \$ 50,820				
а	Applied to 2016, but not more than line 2a				i
b	Applied to undistributed income of prior years				
	(Election required—see instructions)	<u> </u>			22 1 x 20 5 2
С	Treated as distributions out of corpus (Election		"我 "一个说		
	required—see instructions)				
d	Applied to 2017 distributable amount				28,482
е	Remaining amount distributed out of corpus .	22,338			The Mark Con-
5	Excess distributions carryover applied to 2017.		PROBLEM 3.		
	(If an amount appears in column (d), the same	. 1: THE			
	amount 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	1,673,939		**************************************	
b	Prior years' undistributed income. Subtract				
_	line 4b from line 2b		0	969) (398)	
С	Enter the amount of prior years' undistributed	AFEET		WALLEY TO	
	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	**************************************			
u	amount—see instructions				
_	Undistributed income for 2016. Subtract line				
·	4a from line 2a. Taxable amount—see				
	Instructions			0	
f	Undistributed income for 2017. Subtract lines				
_	4d and 5 from line 1. This amount must be				
	distributed in 2018				0
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)	31,973			
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a	1,641,966			
10	Analysis of line 9:				
а	Excess from 2013 1,507,159				
b	Excess from 2014				
С	Excess from 2015				
d	Excess from 2016				
e	Excess from 2017		4.00		No.

GERALD D. & HELEN M. STEPHENS FOUNDATION

Form 990-PF (2017)

37-1224611

Page **10**

Form 990-PF (2017)

Total

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year EASTER SEALS OF CENTRAL ILLINOIS PC **DONATION** 25,000 **507 E ARMSTRONG AVE** PEORIA, IL 61603 PC DONATION WD BOYCE COUNCIL SCOUTS BSA 25,000 614 NE MADISON **PEORIA, IL 61603** За 50,000 Approved for future payment

		-A Analysis of Income-Producing Ac	HAIRIES				
Ente	r gros	s amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by section	on 512, 513, or 514	(e)
			(2)	(b)	(6)	(d)	Related or exempt
			(a) Business code	Amount	(c) Exclusion code	Amount	function income
1	Progr	ram service revenue:					(See instructions)
	a						
	. —						
	-				 		
	_			· 	 		
	e _				 		
	† _						
	g F	ees and contracts from government agencies					
2	Meml	bership dues and assessments					
3	Intere	st on savings and temporary cash investments .			}		
4		ends and interest from securities			14	21,883	
5		ental income or (loss) from real estate:	10	12 2 1 Table 1 (42.1)			
•		Debt-financed property	****				
		· · · · · · · · · · · · · · · · · · ·			 		
_		lot debt-financed property			 		
6		ental income or (loss) from personal property			 		
7		r investment income			 		
8		or (loss) from sales of assets other than inventory		<u> </u>	<u> </u>		
9	Net in	ncome or (loss) from special events			<u> </u>		
10	Gross	s profit or (loss) from sales of inventory					1
11		r revenue: a					
	1.						
	- c		-		t t		
	· -				 		 _
	d _				 		
	e _						
12	Subte	otal. Add columns (b), (d), and (e)	7-10 THE R. LEW			21,883	0
13	Total	I. Add line 12, columns (b), (d), and (e)				13	21,883
13 (See	Total work	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation 	 ns.)			13	21,883
13 (See	Total work	I. Add line 12, columns (b), (d), and (e)	 ns.)			13	21,883
13 See Par	Total work	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total work t XV	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par Line	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par Line	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par Line	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
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13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)
13 See Par Line	Total works t XVI e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which income	ns.) ccomplishme	ent of Exemple	t Purposes XVI-A contributed	importantly to the)

Paid

Preparer

Use Only

Firm's name

Firm's address 🕨

GERALD D. & HELEN M. STEPHENS FOUNDATION 37-1224611 Form 990-PF (2017) Page 13 Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations** No Did the organization directly or indirectly engage in any of the following with any other organization described Yes in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of: 1a(1) (2) Other assets . 1a(2) Other transactions: (1) Sales of assets to a noncharitable exempt organization . . . 1b(1) 1b(2) (2) Purchases of assets from a noncharitable exempt organization . . . (3) Rental of facilities, equipment, or other assets 1b(3) 1b(4) (4) Reimbursement arrangements . . . 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (b) Amount involved (a) Line no Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? . . . If "Yes," complete the following schedule. (c) Description of relationship (b) Type of organization (a) Name of organization that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, Under per iter (other than taxpayer) is based on all information of which preparer has any knowledge Sign May the IRS discuss this return with the preparer shown below Here

Yes No

See instructions

self-employed

Firm's EIN

Phone no

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Employer identification number

GERALD D. & HELEN M.	STEPHENS FOUND/	ATION	37-1224611
Organization type (check			
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1)	nonexempt charitable trust not treated as a private for	oundation
	527 politic	al organization	
Form 990-PF	501(c)(3)	exempt private foundation	
	4947(a)(1)	nonexempt charitable trust treated as a private found	ation
	X 501(c)(3) t	axable private foundation	
Check if your organization	ı ıs covered by the G€	eneral Rule or a Special Rule.	
Note: Only a section 5010 instructions.	c)(7), (8), or (10) orga	anization can check boxes for both the General Rule a	nd a Special Rule. See
General Rule			
	y or property) from an	0-EZ, or 990-PF that received, during the year, contrib y one contributor. Complete Parts I and II. See instruc	
Special Rules			
regulations under 13, 16a, or 16b, a	r sections 509(a)(1) ar and that received from	n 501(c)(3) filing Form 990 or 990-EZ that met the 33 nd 170(b)(1)(A)(vi), that checked Schedule A (Form 99 any one contributor, during the year, total contribution Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1	90 or 990-EZ), Part II, line ns of the greater of (1)
contributor, during	g the year, total contri	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that butions of more than \$1,000 exclusively for religious, the prevention of cruelty to children or animals. Comp	charitable, scientific,
contributor, during contributions total during the year for General Rule ap	g the year, contributio led more than \$1,000 or an <i>exclusively</i> religi plies to this organizati	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that ons exclusively for religious, charitable, etc., purposes. If this box is checked, enter here the total contribution ious, charitable, etc., purpose. Don't complete any of the lon because it received nonexclusively religious, charitable.	, but no such ins that were received the parts unless the itable, etc., contributions
Caution: An organization 990-EZ, or 990-PF), but it	that isn't covered by t must answer "No" o	the General Rule and/or the Special Rules doesn't file n Part IV, line 2, of its Form 990; or check the box on	Schedule B (Form 990, line H of its Form 990-EZ or on its

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization Employer identification number GERALD D. & HELEN M. STEPHENS FOUNDATION 37-1224611

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	GERALD D. STEPHENS 29150 MARCELLO WAY NAPLES FL 34110 Foreign State or Province: Foreign Country:	\$750,820	Person X Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province: Foreign Country:	\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province: Foreign Country:	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province Foreign Country:	\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province: Foreign Country:	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
	Foreign State or Province. Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			

Name of organization
GERALD D. & HELEN M. STEPHENS FOUNDATION

Employer identification number 37-1224611

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				

Name of org					Employer identification number			
	 8 HELEN M. STEPHENS FOUNDATION Exclusively religious, charitable, etc., c 	ontributions.	to organizations door	ribod	37-1224611			
Part III	(10) that total more than \$1,000 for the							
	the following line entry. For organizations							
	contributions of \$1,000 or less for the year							
	Use duplicate copies of Part III if additiona				· · · · · · · · · · · · · · · · · · ·			
(a) No. from	(b) Purpose of gift		Use of gift	(d) Description of how gift is held			
Part I								
				- -				
	•	(e) T	ransfer of gift					
			-					
	Transferee's name, address, and 2	ZIP + 4	Relationsh	ip of	transferor to transferee			
(a) No.	For Prov Country							
from	(b) Purpose of gift	ese of gift (c) Use of gift		(d) Description of how gift is held			
Part I								
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
	For Prov. Country							
(a) No.	For Prov. Country			1				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he				
<u> </u>								
				<u> </u>				
	(e) Transfer of gift							
		71D . 4	Relationship of transferor to transferee					
	Transferee's name, address, and	Helationsr	transferor to transferee					
	For Prov Country							
(a) No.		1-) lice of sift	1-	d) Description of how gift is held			
from Part I	(b) Purpose of gift	(0) Use of gift	"	a) Description of now gift is field			
		/-> 4	Franciar of sift	1				
		(e) I	ransfer of gift					
	Transferee's name, address, and	7IP + 4	Relationel	nin of	transferor to transferee			
	Transieros s name, address, and		110101101101	<u> 01</u>				
	I Fan Bress		i					

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Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

Ę	S	0	-11,056			Net Gain	or Lőss	169	-1,105	.120	-1,484	-5,589	-2 589
Net Gain	or Loss			-			Adjustments						
sis, Expenses,	4 Adjustments	0	92,180				Depreciation						
Cost or Other Basis, Expenses,	Depreciation and Adjustments				Expense of Sale	and Cost of	Improvements						
ş	Ş	0	81,124			Valuation	Method						
Gross	Sales					Cost or	Other Basis	1,839	15,112	1,809	23,723	32,106	17 591
Totals		Capital Gains/Losses	Other sales			Gross Sales	Price	1,670	14,007	1,689	22,239	26,517	15,0021
		రొ				Date	Sold	6/2/2017	6/2/2017	8/1/2017	8/1/2017	9/18/2017	9/8/2017
						Date	Acquired	12/27/2016	1/23/2016	1/15/2017	1/13/2016	1/13/2016	1/13/2016
						Acquisition	Method	<u> </u>	۵	۵	۵	Ь	•
				Check 'X' if	Purchaser	is a	Business		-				
							Purchaser						
					Check X	to include	in Part IV						
Amount		0	0				CUSIP #						
		Long Term CG Distributions	Short Term CG Distributions				Description	1 29 RLI CORP	2 245 RLI CORP	3 29 ALI CORP	4 386 RLI CORP		

Part I, Line 16a (990-PF) - Legal Fees

		305	305	. 0	305
					Disbursements
		Revenue and			for Charitable
		Expenses per	Net Investment	Adjusted Net	Purposes
	Description	Books	Income	Income	(Cash Basis Only)
1	SUTKOWSKI LAW FIRM	305	305		305

w 19 .

Part I, Line 18 (990-PF) - Taxes

		505	505	0	505
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Real estate tax not included in line 20	0			
2	Tax on investment income	505	505		505
3	Income tax	0			

Part I, Line 23 (990-PF) - Other Expenses

		10	10	0	10
		Revenue and			Disbursements
		Expenses	Net Investment	Adjusted Net	for Charitable
	Description	per Books	Income	Income	Purposes
1 5	STATE FEES	10	10		10

17

Part II, Line 10a (990-PF) - Investments - U.S. and State Government Obligations

	rederai	21,/39	701,425	21,/39	/6/,425		
	State/Local	0	0	0	0		
	Num. Shares/	Book Value	Book Value	FMV	FMV	State/Local	_
Description	Face Value	Beg. of Year	End of Year	Beg. of Year	End of Year	Obligation	_
LIQUID ASSET FUND		21,739	767,425	21,739	767,425		_

13

Part II, Line 10b (990-PF) - Investments - Corporate Stock

496,979	582,399	325,219	389,384	8,192	RLI CORP STOCK
End of Year	Beg. of Year	End of Year	Beg. of Year	Face Value	Description
FMV	FMV	Book Value	Book Value	Num. Shares/	
496,979	582,399	325,219	389,384		

Part II, Line 13 (990-PF) - Investments - Other

			300,764	330,636	330,636
!		Basis of	Book Value	Book Value	FMV
	Asset Description	Valuation	Beg. of Year	End of Year	End of Year
1 PAAG	1 ³	AT COST	300,764	330,636	330,636

¥

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Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

ि						
	Expense Account		•			
J	Benefits					
0	Compensation	0	0	0	0	0
	Avg Hrs Per Week					
	Title	PRES DIR	SEC DIR	DIR.	DIR	DIR
	Foreign Country					
	Zip Code	FL 34110	34110	61602	61550	61550
	State	7	겁			:
	City	NAPLES	NAPLES		1 1	MORTON
	Street	29150 MARCELLO WAY	29150 MARCELLO WAY		430'N PENNSYLVANIA	430 N PENNSYLVANIA
	Check "X"					!
	Name	GERALD D STEPHENS	HELEN M STEPHENS	EDWARD F SUTKOWSKI	JĒFĒREY ŠTEPHĒNŠ	JANET STEPHENS
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