**Return of Private Foundation** 

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

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2017 or tax year beginning and ending A Employer identification number CHARLES & KIMBERLY HEMMER FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite 37-1379077 B Telephone number (see instructions) 5215 N ASHFORD DRIVE City or town, state or province, country, and ZIP or foreign postal code **PEORIA** 61615 (309) 676-7777 Foreign postal code Foreign country name Foreign province/state/county C If exemption application is pending, check here G Check all that apply D 1. Foreign organizations, check here ☐ Initial return Initial return of a former public charity ☐ Amended return ☐ Final return 2. Foreign organizations meeting the 85% test, ☐ Name change Address change check here and attach computation H Check type of organization ☐ Section 501(c)(3) exempt private foundation △Ч E If private foundation status was terminated under section 507(b)(1)(A), check here J Accounting method X Cash Accrual Fair market value of all assets at F If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here 1,063,081 (Part I, column (d) must be on cash basis) line 16) ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (c) Adjusted net for charitable (b) Net investment amounts in columns (b), (c), and (d) may not necessarily expenses per іпсоте purposes ıncome equal the amounts in column (a) (see instructions)) hooks (cash basis only) 279.355 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶☐ if the foundation is **not** required to attach Sch. B. 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities . . . 9,107 9,107 Gross rents . . . . . . . Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 2.496 6a Gross sales price for all assets on line 6a 2,496 Capital gain net income (from Part IV, line 2) RECEIVED Net short-term capital gain . Income modifications 10a Gross sales less returns and allowances Less Cost of goods sold . . . Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) . . . 290,973 11.618 Total. Add lines 1 through 11 . . 13 Compensation of officers, directors, trustees, etc. . 14 Other employee salaries and wages . . . . 15 Pension plans, employee benefits . . . . . 16a Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) . . . . 17 Interest . . . . . . . . . . 201 201 Taxes (attach schedule) (see instructions) . . 18 Depreciation (attach schedule) and depletion . 19 20 21 Travel, conferences, and meetings 22 Printing and publications 23 10 10 10 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 . . . . . . . Contributions, gifts, grants paid . . . . . . . . 25 32,700 32,700 26 Total expenses and disbursements. Add lines 24 and 25... 32.911 211 32,911 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements . 258,062 11,407 Net investment income (if negative, enter -0-) . Adjusted net income (if negative, enter -0-) . .



37-1379077 CHARLES & KIMBERLY HEMMER FOUNDATION Form 99Q-PF (2017) Page 2 End of year **Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.) Beginning of year Part II (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash—non-interest-bearing 194,378 165,712 165,712 2 Savings and temporary cash investments . . . . . 3 Accounts receivable Less allowance for doubtful accounts 4 Pledges receivable ▶ Less allowance for doubtful accounts 5 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . 7 Other notes and loans receivable (attach schedule) Less allowance for doubtful accounts 8 Inventories for sale or use . . . . . 9 Prepaid expenses and deferred charges 10a Investments—U.S. and state government obligations (attach schedule) 684.451 897.369 Investments—corporate stock (attach schedule) . . . . 398.366 b С Investments—corporate bonds (attach schedule) . . Investments—land, buildings, and equipment basis 11 Less accumulated depreciation (attach schedule) 12 Investments—mortgage loans . . . . . . . . 13 Investments—other (attach schedule) . . . . . . Land, buildings, and equipment basis ▶ 14 Less: accumulated depreciation (attach schedule) Other assets (describe 15 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item l) . . . . 592,744 850,163 1,063,081 Accounts payable and accrued expenses . . . . . . 17 18 Grants payable . . . . . . . . 19 Deferred revenue . . . . . . 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) Other liabilities (describe 

) 22 Total liabilities (add lines 17 through 22) . . . . 23 Foundations that follow SFAS 117, check here . . . . Net Assets or Fund Balances and complete lines 24 through 26, and lines 30 and 31. 24 Unrestricted 25 26 Foundations that do not follow SFAS 117, check here ▶ 🏻 and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds . . . . . . 28 Paid-in or capital surplus, or land, bldg., and equipment fund 592.744 850,163 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) . . . . 592,744 850,163 31 Total liabilities and net assets/fund balances (see 850,163 Analysis of Changes in Net Assets or Fund Balances Part III Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with 1 592,744 2 258,062 3 Other increases not included in line 2 (itemize) ► INVESTMENTS 3 4 850,806 

5 Decreases not included in line 2 (itemize) ► INVESTMENTS

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

643

850.163

5

6

Part	a) List and describe the kind	Losses for Tax on Investm I(s) of property sold (for example, real esta e, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation		Date acquired to , day, yr )	(d) Date sold (mo , day, yr )
1a	· · · · · · · · · · · · · · · · · · ·						
<u>b</u>						·-	· · · · · · · · · · · · · · · · · · ·
<u>c</u> _						<del></del>	
<u>d</u> e	Capital Gains Distributions	•					· · · · · ·
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale			n or (loss) f) minus (g))
a						*	
b							
c							
<u>d</u>							0.400
<u> </u>				40/04/00		-	2,496
	Complete only for assets show	wing gain in column (h) and owned					(h) gain minus t less than -0-) or
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	• •	ss of col (i) (j), if any			rom col (h))
<u>a</u>				:			
<u>b</u>						<del></del>	
d							
e			-			• •	2,496
2	Capital gain net income or (	(net canital loss)	also enter in Pa enter -0- in Pa	· · · · · · · · · · · · · · · · · · ·	2		2,496
3		or (loss) as defined in sections a line 8, column (c). See instruction	1222(5) and (6)		· <del>-</del>		<u> </u>
	<u> </u>			}	3		C
Part		r Section 4940(e) for Redu		et Investment	Incor	ne	
Was		e this part blank. ection 4942 tax on the distributa alify under section 4940(e). Do i			ase pe	eriod?	☐ Yes ☒ No
1	Enter the appropriate amou	int in each column for each year	, see the instru	ctions before mal	kıng aı	ny entries	
Cal	(a)  Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) of noncharitable-use a	ssets		(d) tribution ratio divided by col (c))
	2016	21	,438	641	1,929		0 033396
	2015	39	,117	644	1,573		0 060687
	2014		,699		0,785		0 045192
	2013		,869		3,870		0.042439
	2012	17	,520	459	9,630		0.038118
2		· · · · · ·				2	0.219832
3		or the 5-year base period—divide undation has been in existence i				3	0.043966
4	Enter the net value of noncl	haritable-use assets for 2017 fro	om Part X, line	5		4	777,127
5	Multiply line 4 by line 3 .				.	5	34,167
6	Enter 1% of net investment	income (1% of Part I, line 27b)				6	114
7	Add lines 5 and 6				.	7	34,281
8		s from Part XII, line 4				8	32,911
•		er than line 7, check the box in F			t part		

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instruction	ons)		
1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1.			1
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)		<del></del>	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		228	i
	here ▶ ☐ and enter 1% of Part I, line 27b		i	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of			
	Part I, line 12, col. (b).		ار	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)  Add lines 1 and 2		0 228	
3			220	
4 5	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		228	
6	Credits/Payments		220	<del></del>
а	2017 estimated tax payments and 2016 overpayment credited to 2017   6a			
b	Exempt foreign organizations—tax withheld at source 6b			
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		0	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		228	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10		0	
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ► Refunded ► 11		0	
Part	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			V
	Instructions for the definition	1b		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		×
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			$\stackrel{\sim}{-}$
•	(1) On the foundation. > \$ (2) On foundation managers.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	-		ŀ
	on foundation managers. ►\$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3		<u>X</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u>X</u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u> </u>
_	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			
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>			
	conflict with the state law remain in the governing instrument?	6		$\overline{\mathbf{x}}$
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	
, 8а	Enter the states to which the foundation reports or with which it is registered. See instructions.	<b>'-</b>	<del>  ^  </del>	<del></del> 1
va	IL			ĺ
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	,		
~	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			<u> </u>
-	or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If			
	"Yes," complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	.   10		Y

Par	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		Yes	No
	the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address N/A	1 620		
14	The books are in care of ► WILLIS HUNZIKER  Telephone no. ► (309) 69	1-038	2	
4-	Located at ► 6121 KNOLLAIRE DR PEORIA IL ZIP+4 ► 61614  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			
15	and enter the amount of tax-exempt interest received or accrued during the year	•	•	
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		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the			
	name of the foreign country			
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)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(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)?			
	<u> </u>			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			
D	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			1
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
_	were not corrected before the first day of the tax year beginning in 2017?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			İ
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?			
_	If "Yes," list the years 20 11 , 20 , 20			
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 all years listed, answer "No" and attach statement—see instructions.)			X
•	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20		<del>  ^  </del>
С	► 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?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose 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			
	foundation had excess business holdings in 2017.)	3b	N/A	L
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	<del></del>		<u> </u>
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X

Form 9	92-PF (2017)	CHARLES & KIMBERLY HEMM	IER FO	DUNDATION					37-13	379077	P	age 6
Par	t VII-B	Statements Regarding Activities f	or Wh	ich Form 47	'20 Ma	ıy Be Req	uired (	continue	d)			
5a		e year, did the foundation pay or incur ar on propaganda, or otherwise attempt to			(section	on 4945(e))	?	Yes	X No			
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?											
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions											
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?											
b		swer is "Yes" to 5a(1)–(5), did <b>any</b> of the ons section 53.4945 or in a current notice							bed in	5b	N/A	
С	If the ans	tions relying on a current notice regardin wer is "Yes" to question 5a(4), does the it maintained expenditure responsibility f	founda or the o	tion claim exe grant?	emption	n from the t	ax	 □ Yes	► □ No			
6a	Did the fo	attach the statement required by Regulat oundation, during the year, receive any fu onal benefit contract?	ınds, d	rectly or indir	ectly, t	o pay prem		Yes	<b>⊠</b> No			
b		oundation, during the year, pay premiums o 6b, file Form 8870.	s, direc	tly or indirectl	y, on a	personal b	enefit o	contract?		6b		X
		e during the tax year, was the foundation a pa did the foundation receive any proceeds							X No 		N/A	
Par		nformation About Officers, Directound Contractors	ors, Tr	ustees, Fo	undati	on Manaç	gers, F	lighly Pa	id Em	ploye	es,	
	List all o	fficers, directors, trustees, and found						ee instru Contribution				
		(a) Name and address	hou	e, and average irs per week ted to position	` (lf ı	mpensation not paid, nter -0-)	emplo	oyee benefit erred compe	plans	(e) Expe	nse ac allowan	
See A	Attached St	atement		.00		0						
		,		.00		0						
				.00		0						
				00		0						
2	Compens	sation of five highest-paid employees	(other	than those i	include	ed on line	1—see			none,	enter	<b>,</b>
	(a) Name an	d address of each employee paid more than \$50,000	0	(b) Title, and a hours per w devoted to po	eek _	(c) Compe	nsation	(d) Contribe employee plans and c compens	benefit deferred	(e) Expe	ense ac allowan	
NONE	<u> </u>											
		other employees paid over \$50,000		:								

P	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors (continued)	ployees,
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "No	ONE."
_	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NO		<del></del>
		······································
Tot	al number of others receiving over \$50,000 for professional services	
Р	art IX-A Summary of Direct Charitable Activities	
	st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	MIDWEST FOOD BANK	
	9005 INDUSTRIAL RD	
	PEORIA, IL 61615	6,000
2	SALVATION ARMY	
	401 NE ADAMS	
	PEORIA IL 61603	5,000
3	PEORIA CHRISTIAN SCHOOL	
	3506 N CALIFORNIA AVE	
	PEORIA, ILLINOIS 61603	5,150
4	NORTHWOODS COMMUNITY CHURCH	
	10700 N ALLEN RD	
	PEORIA IL 61615	3,150
	art IX-B Summary of Program-Related Investments (see instructions)	
	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
_		
2		
A	l other program-related investments. See instructions	
3		
Tot	al. Add lines 1 through 3	0

Part		n toundati	ons,
	see instructions )		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		207.007
a	Average monthly fair market value of securities	1a	607,397
b	Average of monthly cash balances	1b	181,564
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	788 <u>,</u> 961
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	788,961
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see		
	ınstructions)	4	11,834
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	777,127
6	Minimum investment return. Enter 5% of line 5	6	38,856
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation and certain foreign organizations, check here   ☐ and do not complete this part.)	ions	
1	Minimum investment return from Part X, line 6	1	38,856
2a	Tax on investment income for 2017 from Part VI, line 5	8	<del>-</del>
b	Income tax for 2017 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	228
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	38,628
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	38,628
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	38,628
Part	XII Qualifying Distributions (see instructions)	<u> </u>	
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	32,911
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
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	32,911
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	32,911
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w	hether the	
	qualifies for the section 4940(e) reduction of tax in those years.		

ran	Undistributed income (see instructions)			·"T	
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
_	line 7			-	38,628
2	Undistributed income, if any, as of the end of 2017			04.700	
a	Enter amount for 2016 only		<u></u>	31,789	
b	Total for prior years 20, 20, 20				· <del></del>
3	Excess distributions carryover, if any, to 2017				
а	From 2012				
b	From 2013				
С	From 2014				
d	From 2015				
е	From 2016				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2017 from Part XII,				
	line 4 ▶ \$ 32,911				
а	Applied to 2016, but not more than line 2a			31,789	
	Applied to undistributed income of prior years				
	(Election required—see instructions)				
c	Treated as distributions out of corpus (Election				
Ŭ	required—see instructions)				
d	Applied to 2017 distributable amount		<u> </u>		1,122
	Remaining amount distributed out of corpus .				1,122
e	• •				
5	Excess distributions carryover applied to 2017.				
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b		0		
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				
А	Subtract line 6c from line 6b Taxable		· ····································		
u					
_					
е	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				37,506
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2012 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2018.				<u> </u>
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
a	Excess from 2013				
b	Excess from 2014				
C	Excess from 2015				
d	Excess from 2016				
е	Excess from 2017				

Form 9	190-PF (2017) CHARLES & KIMBERL	Y HEMMER FOU	INDATION _		37-13	/90// Page <b>10</b>
Part	XIV Private Operating Foundation	ons (see instruct	tions and Part V	II-A, question 9)		N/A
1a	If the foundation has received a ruling of	determination le	etter that it is a pri	vate operating		
	foundation, and the ruling is effective fo	or 2017, enter the	date of the ruling			
b	Check box to indicate whether the foundation	on is a private opera	ting foundation des	cribed in section	4942(j)(	(3) or 4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Iotai
	each year listed					0
b	85% of line 2a					0
С	Qualifying distributions from Part XII,					_
	line 4 for each year listed					l o
d	Amounts included in line 2c not used directly				Ĵ	
u	for active conduct of exempt activities .					l 0
_	Qualifying distributions made directly			1	<del>/</del>	
е	for active conduct of exempt activities.		`	\ /		
	Subtract line 2d from line 2c					l 0
					***	<u> </u>
3	Complete 3a, b, or c for the			X		1
_	alternative test relied upon "Assets" alternative test—enter					
а						
	(1) Value of all assets	<del></del>		<del>//</del>		0
	(2) Value of assets qualifying under			1		
h	section 4942(j)(3)(B)(i)		/	<del></del>	<del></del>	0
D	of minimum investment return shown in					
	Part X, line 6 for each year listed .		/			0
C	"Support" alternative test—enter					
	(1) Total support other than gross				`	
	investment income (interest, dividends, rents, payments on					
	securities loans (section		<b>/</b>			
	512(a)(5)), or royalties)					0
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(III)					\ 0
	(3) Largest amount of support from					
	an exempt organization					0
	(4) Gross investment income			<u> </u>		0
Part	XV Supplementary Information	(Complete this	s part only if th	e foundation ha	d \$5,000 or mor	e in assets at
	any time during the year—s	see instructions	s.)			
1	Information Regarding Foundation M	lanagers:				
а	List any managers of the foundation wh					he foundation
	before the close of any tax year (but on	ly if they have cor	ntributed more that	an \$5,000). (See se	ction 507(d)(2).)	
b	List any managers of the foundation wh	no own 10% or mo	ore of the stock of	a corporation (or a	n equally large po	rtion of the
	ownership of a partnership or other enti					
		•		•		
2	Information Regarding Contribution,	Grant, Gift, Loa	n. Scholarship. e	etc Programs:	-	
_	Check here ► 🔀 if the foundation on		•		izations and does	not accept
	unsolicited requests for funds. If the fou					
	conditions, complete items 2a, b, c, and	_	_	_		
a	The name, address, and telephone num			n to whom applicati	ons should be add	lressed
а	The name, address, and telephone num	ilbei oi emaii add	ress of the person	it to whom applicati	ons snould be add	1103300
<u> </u>	The form in which applications should be	oo submitted and	information and -	natorials thou shoul	d include	
b	The form in which applications should be	be submitted and	mormation and n	iaterials they should	a molude	
	A			<del></del>		
С	Any submission deadlines					
d	Any restrictions or limitations on awards	s, such as by geo	graphical areas, o	cnaritable fields, kin	as of institutions, o	or otner
	factors:					

Page 11

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	Recipient If recipient is an individual, show any relationship to any foundation manager any foundation manager						
Name and address (home or business)	or substantial contributor	recipient	Contribution				
a Paid during the year							
ALLIANCE DEFENDING FREEDOM			DONATION	1,000			
15100 N 90TH STREET				1			
SCOTTSDALE, AZ 85260							
AMERICAN CANCER SOCIETY			DONATION	50			
1755 ABBEY RD							
EAST LANSING, MI 48823							
APOSTOLIC CHRISTIAN CHURCH			DONATION	300			
3420 N SHERIDAN RD							
PEORIA, IL 61604			DOMATION	2 000			
BEREAN PRISON MINISTRIES			DONATION	2,000			
PO BOX 761							
PEORIA, IL 61652			DONATION	100			
BRADLEY EPWORTH CHURCH			DONATION	100			
1316 W COLUMBIA TERR							
PEORIA, IL 61606 CADRE MINISTRIES			DONATION	1,000			
BOX 278			BONATION	1,000			
SYCAMORE, IL 60178							
CHRISTIAN CENTER			DONATION	2,000			
4100 BRANDYWINE DRIVE				_,,,,,			
PEORIA, IL 61614							
EASTER SEALS			DONATION	1,050			
507 E ARMSTRONG				,			
PEORIA, IL 61603							
GRACE PRESBYTERIAN CHURCH			DONATION	150			
8607 N STATE RD #91				1			
PEORIA, IL 61615							
HOI BIG BROTHERS BIG SISTERS			DONATION	500			
1020 S MATTHEW ST							
PEORIA, IL 61605							
LIVING ALTERNATIVES PREGNACY CENTER			DONATION	100			
303 LANDMARK DR STE 1B							
NORMAL, IL 61761							
Total See Attached Statement	· · · · · · · · · · · · · · · · · · ·		▶ 3a	32,700			
<b>b</b> Approved for future payment							
		1					
				<u> </u>			
			i				
			1				
Total	L	L	▶ 2h				

Form 990-PF (2017) **CHARLES & KIMBERLY HEMMER FOUNDATION** 37-1379077 Part XVI-A Analysis of Income-Producing Activities Excluded by section 512, 513, or 514 Unrelated business income Enter gross amounts unless otherwise indicated (e) Related or exempt (d) (a) (b) (c) function income Amount Business code Exclusion code Amount (See instructions) 1 Program service revenue 01 CONTRIBUTIONS b ¢ е f Fees and contracts from government agencies 2 Membership dues and assessments . . . . . 14 15 Interest on savings and temporary cash investments . 9,107 14 Dividends and interest from securities . . . 5 Net rental income or (loss) from real estate a Debt-financed property . **b** Not debt-financed property . . 6 Net rental income or (loss) from personal property Other investment income . . . . . . 2,496 8 Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events . 10 Gross profit or (loss) from sales of inventory 11 Other revenue a 0 11.618 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 13 11,618 (See worksheet in line 13 instructions to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions) ▼

	·		5 :: -	· · · · · · · · · · · · · · · · · · ·		5-1-41 1-1 15"	da Maria	in I .		<del></del>		
Part	XVII	Information Exempt Org		sfers to and Trar	isactions and I	Relationships Wi	th Noncharita	ible				
1	Did t			engage in any of the	following with ar	ov other organization	described		Yes	No		
'				(c)(3) organizations)			i described			110		
		nizations?	er triair section 50 i	(c)(o) organizations)	01 111 30000011 027	, relating to political						
•	a Transfers from the reporting foundation to a noncharitable exempt organization of											
a		Cash	Johnny Tournaution	to a nonchamable ex	compt organizatio			1a(1)		X		
		Other assets						1a(2)		X		
b		er transactions										
			a noncharitable ex	rempt organization				1b(1)		X		
(1) Sales of assets to a noncharitable exempt organization												
	• •			er assets				1b(2) 1b(3)	_	X		
		Reimbursement ai	•					1b(4)		Х		
		oans or loan gua	-					1b(5)		Х		
		-		ship or fundraising so				1b(6)		Х		
С				lists, other assets, or				1c		Х		
d				omplete the following s								
_				given by the reporting				et				
	value	e in any transaction	or sharing arrangen	něnt, shów in column (	d) the value of the	goods, other assets, o	r services receive	ed.				
(a) Lin	e no	(b) Amount involved	(c) Name of no	ncharitable exempt organiz	zation (d) [	escription of transfers, tra	nsactions, and shar	ring arra	ngeme	nts		
				*-								
	Î					<u> </u>						
		<u> </u>										
							_					
							-					
2a				iliated with, or related		tax-exempt organız	ations		Π.,			
				section 501(c)(3)) or	in section 5277.		Ц	Yes	∐ N	0		
<u>b</u>	If "Y	<u> </u>	following schedule									
		(a) Name of organ	nization	(b) Type of	organization	(c) D	escription of relation	ship				
						<u> </u>						
						-	<del></del>					
				<del> </del>	-							
	Llede	or nonaltion of paguna I don	lare that I have examined this	l s return, including accompanying	schodules and statements	and to the hest of my knowled	ne and helief it is true			-		
C:	corre	ect, and complete Declarate	on of <u>prep</u> arer <b>f</b> other than tax	payer) is based on all information	n of which preparer has an	, and to the best of my knowled y knowledge	<u> </u>					
Sign		11/110	<b>7</b>	4.			May the IRS with the pres					
Here	Sug	nature of officer or trus	/ Juny u	Date 0	Title	<b>U</b> (	See instructi		Yes			
	Sig	Printil ype prepafer		Profit-io A				Triby				
Paid		1 Par Nan	-0100	11/00 FHILL	1 (11)	- 20/h/10	Check if	II K	Lon			
Prepa	arer	CVITUTON	DARLY IN	- Caras		طرارالات	self-employed	VW	92V			
Use (		Firm's name		···· -			s EIN ▶					
	•	Firm's address				Phor	e 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** 

37-1379077

<b>CHARLES &amp; K</b>	KIMBERLY HEMMER FOUNDATION	37-1379077					
Organization t	type (check one)						
Filers of:	Section:						
Form 990 or 99	90-EZ						
4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation							
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foun	dation					
	X 501(c)(3) taxable private foundation						
•	organization is covered by the <b>General Rule</b> or a <b>Special Rule</b> . section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule a	and a Special Rule See					
General Rule							
or mor	n organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contri re (in money or property) from any one contributor. Complete Parts I and II. See instru- butor's total contributions.						
Special Rules	<b>5</b>						
regulat 13, 16	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
contrib	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
contrib contrib during <b>Gener</b>	n organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that butor, during the year, contributions exclusively for religious, charitable, etc., purposes butions totaled more than \$1,000. If this box is checked, enter here the total contribution the year for an exclusively religious, charitable, etc., purpose. Don't complete any of ral Rule applies to this organization because it received nonexclusively religious, chair \$5,000 or more during the year	s, but no such ons that were received the parts unless the ritable, etc., contributions					

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on 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
CHARLES & KIMBERLY HEMMER FOUNDATION

Employer identification number 37-1379077

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	CHARLES & KIMBERLY HEMMER  1119 W. BROOKFOREST  PEORIA IL 61615  Foreign State or Province  Foreign Country	\$279,355	Person Payroll Noncash X (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
CHARLES & KIMBERLY HEMMER FOUNDATION

Employer identification number 37-1379077

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (d) (b) FMV (or estimate) from **Date received** Description of noncash property given (See instructions.) Part I 700 SHARES OF APPLE \_\_\_1\_\_ 12/28/2017 (a) No. (c) (d) FMV (or estimate) from **Date received** Description of noncash property given Part I (See instructions.) 700 SHARES OF CATERPILLAR \_\_\_1\_\_ 12/28/2017 (a) No. (c) (d) (b) FMV (or estimate) from **Date received** Description of noncash property given (See instructions.) Part I 60 SHARES OF ALPHABET \_\_\_1\_\_ 1/10/2017 (a) No. (c) (d) (b) FMV (or estimate) from Date received Description of noncash property given (See instructions.) Part I (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I

1 10 1 10 ...

201102212 - 1.	·····,,, (2)				- 3-
Name of org	_				Employer identification number
	& KIMBERLY HEMMER FOUNDATION	4.14.42	4	المحداث	37-1379077
Part III	Exclusively religious, charitable, etc., o				
	(10) that total more than \$1,000 for the				
	the following line entry For organizations				
	contributions of \$1,000 or less for the year			suucu	ons) • \$
(a) No	Use duplicate copies of Part III if additiona	il space is nee	aea		
(a) No. from	(b) Purpose of gift	(c)	Use of gift	(d	) Description of how gift is held
Part I	(2) / 2. pool of g				
		(e) T	ransfer of gift		
	Transferee's name, address, and a	ZIP + 4	Relationsh	ip of	transferor to transferee
(a) No.	For Prov Country		<u></u>	_	
from	(b) Purpose of gift	(c)	Use of gift	(d	) Description of how gift is held
Part I			. <del></del>		
	<u></u>	(a) T	ransfer of gift	Į.	
		(e) i	ransier of gift		
	Transferee's name, address, and 2	71D ± 4	Polationeh	in of	transferor to transferee
				nship of transferor to transferee	
			•••••		
			•••		
	For Prov Country				
(a) No.	Toll 1100		1007		
from	(b) Purpose of gift	(c)	Use of gift	(d	) Description of how gift is held
Part I			<del> </del>		
		(e) T	ransfer of gift		
			_		
	Transferee's name, address, and a	ZIP + 4	Relationsh	ip of	transferor to transferee
	For Prov Country				
(a) No. from	(b) Purpose of gift	(c)	Use of gift	1 (4	) Description of how gift is held
Part I	(b) r dipose of gift	· (0)		,,,	
				<u> </u>	
		(e) T	ransfer of gift		
	Transferee's name, address, and a	ZIP + 4	Relationsh	ip of	transferor to transferee
				<b>-</b>	
	For Prov Country				

to •

ırt I, Line 6 (950-PF) - Gain/Loss from Sale of Assets Other Than Inventory

									Totals		oss	C
	,	Amount								Sa	ales	1
	Long Term CG Distributions	2,496						(	Capital Gains/Losses		2,496	3
	Short Term CG Distributions	0							Other sales			)
					Check "X" if							
!			Check "X"		Purchaser							Exp
1			to include		ıs a	Acquisition	Date	Date	Gross Sales	Cost or	Valuation	aı
	Description	CUSIP#	in Part IV	Purchaser	Business	Method	Acquired	Sold	Price	Other Basis	Method	lmj
1												

1 40 X

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

		0	_ 0	C	0
					Disbursements
		Revenue and			for Charitable
		Expenses per	Net Investment	Adjusted Net	Purposes
	Description	Books	Income	Income	(Cash Basis Only)
1	HUNZIKER LAW OFFICE	0			0

• • • •

Part I, Line 16c (990-PF) - Other Professional Fees

		_0	0	0	0
					Disbursements
		Revenue and		ŀ	for Charitable
		Expenses per	Net Investment	Adjusted Net	Purposes
	Description	Books	Income	Income	(Cash Basis Only)
1	WELLS FARGO ADVISOR FEES	0			0

द 🙌 😘

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

		201	201	0	201
		Revenue			Disbursements
		and Expenses	Net Investment	Adjusted	for Charitable
	Description	per Books	Income	Net Income	Purposes
1	Real estate tax not included in line 20	0			
2	Tax on investment income	201	201		201
3	Income tax	0			

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

		10	10	0	10
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	ILLINOIS CHARITY FUND	10	10		10
2	SECRETARY OF STATE				

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

			398,366	684,451	4
		Num. Shares/	Book Value	Book Value	FMV
	Description	Face Value	Beg of Year	End of Year	Beg of Y
1	MUTUAL FUNDS		110,609	117,343	1
2	STOCKS		287,757	567,108	3
3	OPTIONS				

art IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

	Amount									
Long Term CG Distributions	2,496									
Short Term CG Distributions	0						. (	0		0
								Cost or Other		FN
		Acquisition	Date	Date	Gross	Depreciation		Basis Plus		as
Description of Property Sold	CUSIP#	Method	Acquired	Sold	Sales Pnce	Allowed	Adjustments	Expense of Sale	Gain or Loss	12/3

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

	,	Check "X"							Av
	Name	if Business	Street	City	State	Zıp Code	Foreign Country	Title	Per
	WILLIS L HUNZIKER		6121 KNOLLAIRE DRIVE	PEORIA	IL	61614	· · · · · ·	DIR	
1									
	BRUCE GRAHAM		14724 MENDENHALL RD	PRINCEVILLE	lL	61559		DIR	
2	<u> </u>							_	
	KEN HOERR		9616 N RT 91	PEORIA	1L	61615		DIR	
3						l			
	BRENT TUEBEL		12128 N ALLEN RD	DUNLAP	IL	61525		DIR	
4									
	CHARLES HEMMER		1119 W BROOKFOREST DR	PEORIA	IL	61615		DIR	
5									
	THOMAS FRANK		5610 N WOODLAND CT	PEORIA	ĬL "	61614		DIR	
6	<u> </u>								
_		Х							
7									<u></u>

Part XIII, Line 2a, Column C (990-PF) - Prior Year Undistributed Income

1 Distributable amounts for 2016 that remained undistributed at the beginning of the 2017 tax year	1	31,789
2	2	
3	3	
4	4	
5	5	
6	6	
7	7	
8	8	
9	9 <u></u>	
10 Total	. 10	31,789