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

DLN: 93491226006118 OMB No 1545-0052

2017

Form 990-PF Department of the Treasury

Internal Revenue Service

Return of Private Foundation

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public Inspection

or	caler	ndar year 2017, or tax year l	beginning 01-01-20	17	, aı	nd er	nding 12-31-	2017			
		indation & GERTRUDE HALVERSTADT					A Employer id	entificati	on numbe	r	
		ION INC					62-6073690				
		l street (or P O box number if mail is not RN TAVERN ROAD	delivered to street address)	Room	/suite		B Telephone nu	mber (see	e instruction	ns)	
,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	NOT THE PART OF TH					(828) 277-7400	1			
		, state or province, country, and ZIP or fo TN 37062	oreign postal code				C If exemption	applicatio	n is pendin	g, check	here 🕨 🔲
G Ch	eck al	l that apply	☐ Initial return of a	former	public charity		D 1. Foreign or	ganızatıor	ns, check he	ere	. □
		Final return	Amended return				2 Foreign or		ns meeting d attach co		
		Address change	_				E If private for				
_		pe of organization	$01(c)(3)$ exempt private trust \Box Other taxable				under sectio				" ▶ ∐
			Accounting method	☐ Ca	sh 🗹 Accru	al	F If the founda				ation _ 🔲
		rom Part II, col (c), \$ 1,311,253	Other (specify) (Part I, column (d) must	be on	cash basıs)		under section	n 507(b)(1)(B), cnec	k nere	, _
Pa	rt I	Analysis of Revenue and E	xpenses (The total	(2)	Povenue and					(d) Dis	bursements
		of amounts in columns (b), (c), and (d equal the amounts in column (a) (see i			Revenue and expenses per books	(b)	Net investment income		usted net ncome		r charitable purposes sh basis only)
	1	Contributions, gifts, grants, etc , r schedule)	eceived (attach								
	2	Check ► ✓ If the foundation is no	ot required to attach								
	3	Sch B			40		40				
	4	Dividends and interest from securi			34,234		34,234				
	- 5а	Gross rents			0.,20.		5 1,25 1				
	ь	Net rental income or (loss)									
e	6a	Net gain or (loss) from sale of asse	ets not on line 10	9	202,080						
Reverkie	b	Gross sales price for all assets on	line 6a								
šeĶ	_	·	586,082	<u> </u>			265				
L.	7	Capital gain net income (from Part	•				365				
	8	Net short-term capital gain Income modifications									
	10a	Gross sales less returns and allowa	I								
	b	Less Cost of goods sold	· ·	<u>. </u>							
	С	Gross profit or (loss) (attach sched	dule)								
	11	Other income (attach schedule)		% J	87		87		87		
	12	Total. Add lines 1 through 11 .			236,441		34,726		87		
	13	Compensation of officers, directors	s, trustees, etc		900						
	14	Other employee salaries and wage	es								
68	15	Pension plans, employee benefits									
Š	16a	Legal fees (attach schedule)									
X Z	b	Accounting fees (attach schedule)		% j	3,302						
e F	С	Other professional fees (attach sch	nedule)	% ∫	15,637						
Operating and Administrative Expenses	17	Interest					<u> </u>				
S E	18	Taxes (attach schedule) (see instr	•	9	20						
≣	19	Depreciation (attach schedule) and	d depletion								
5	20	Occupancy									
ב ב	21	Travel, conferences, and meetings			6,882						
ਰ ~	22	Printing and publications		06-1	2.105						
<u> </u>	23	Other expenses (attach schedule)		*	2,195						
era era	24	Total operating and administra Add lines 13 through 23	·		28,936		0				,
<u>ā</u>	25	Contributions, gifts, grants paid			66,050		U				66,050
	26	Total expenses and disburseme	ents. Add lines 24 and								
		25	CIICSI AGG IIIICS 24 BIIG		94,986		0				66,050
	27	Subtract line 26 from line 12									
	а	Excess of revenue over expens disbursements	es ana		141,455						
	b	Net investment income (if nega	•				34,726				
	С	Adjusted net income(if negative	•						87		
or	Paper	work Reduction Act Notice, see	instructions.			(Cat No 11289>	(For	m 990	- PF (2017)

	1	Cash—non-interest-bearing	1,440		5,147	5,147
	2	Savings and temporary cash investments	14,865		9,710	9,710
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts ▶				
S	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)	236,126	% J	26,244	30,793
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)	685,178	% J	1,038,986	1,265,603
	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				
		ınstructions Also, see page 1, item I)	937,609		1,080,087	1,311,253
	17	Accounts payable and accrued expenses				_
	18	Grants payable				
les	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ıat	21	Mortgages and other notes payable (attach schedule)				
	l			1		

اروه

937,609

937,609

937,609

1,020

1,020

1,079,067

1,079,067

1,080,087

2

3

4

5

6

937,609

141,455

1,079,067

1,079,067

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Other liabilities (describe -_

Unrestricted

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

Total liabilities(add lines 17 through 22)

Foundations that follow SFAS 117, check here ▶

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

Foundations that do not follow SFAS 117, check here

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

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

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

Analysis of Changes in Net Assets or Fund Balances

Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund

22

23

24

25

26

27

28

29

30

31 Part III

2

3

Net Assets or Fund Balances

instructions

Page **3**

- capital Gams	- The Losses for Tax off The Co				
List and describe 2-story brick wa	(a) the kınd(s) of property sold (e g , re rehouse, or common stock, 200 shs	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)	
1a					
					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) other basis ense of sale	Gain d	h) or (loss) f) minus (g)
a					
b					
С					
d					
e					
Complete only for asse	ts showing gain in column (h) and ow	ned by the foundation	on 12/31/69		(1)
(i) F M V as of 12/31/6	(j) Adjusted basis as of 12/31/69		(k) s of col (ı) l (j), ıf any	col (k), but not	h) gain minus less than -0-) or om col (h))
a					
b					
С					
d					
e					
·	gain or (loss) as defined in sections :		Part Í, line 7	2	365
If gain, also enter in P in Part I, line 8	art I, line 8, column (c) (see instructi	ons) If (loss), enter -()- 	3	
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment I	ncome	
For optional use by domestic	private foundations subject to the sec	ction 4940(a) tax on n	et investment inco	ome)	
f section 4940(d)(2) applies,	leave this part blank				
	he section 4942 tax on the distributa			od? ∐ Y	es 🗹 No
	not qualify under section 4940(e) Do				
<u></u>	mount in each column for each year,	see instructions before	e making any entr		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharital		(d) Distribution rat (col (b) divided by o	
2016	48,150		1,175,562		0 040959
2015	80,873		1,230,495		0 065724
2014	92,347		1,315,876		0 070179
2013	82,622		1,245,647		0 066329
2012	62,567		1,159,541	Т	0 053958
2 Total of line 1, column	• •		2		0 297149
number of years the for	io for the 5-year base period—divide indation has been in existence if less oncharitable-use assets for 2017 fron	than 5 years	, or by the 3		0 059430 1,257,781
5 Multiply line 4 by line 3		·	5		74,750
	nent income (1% of Part I, line 27b)				<u> </u>
			6	-	347
			7	-	75,097
	tions from Part XII, line 4 ,		8 8		66,050
ir line 8 is equal to or g	reater than line 7, check the box in Pa	art vi, ime ib, and con	iipiete triat part us	sing a 1% cax rate Se	e the Part VI

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

7b

					Form 990-PF (2017)
Employees,	nagers, Highly Paid E	ees, Foundation Ma	ers, Directors, Trust	ormation About Offic I Contractors	
	(see instructions).	d their compensation	oundation managers an	rs, directors, trustees, f	1 List all officers, di
	(d) Contributions to employee benefit plans and deferred compensation	(c) Compensation (If not paid, enter -0-)	Title, and average hours per week b) devoted to position		(a) Name and a
				Table	See Additional Data Table
ione, enter "NONE."	.—see instructions). If no	nose included on line 1	mployees (other than th	n of five highest-paid e	2 Compensation of
Expense account, (e) other allowances	Contributions to employee benefit plans and deferred (d) compensation	(c) Compensation	Title, and average hours per week (b) devoted to position	(a) s of each employee paid han \$50,000	Name and address of e
					NONE
			-	er employees paid over \$5	
(c) Compensation	e of service	(b) Typ	d more than \$50,000	address of each person pai	
					NONE
		· · · · · · · ·	<u>'</u>	-	
Expenses	nation such as the number of		rities during the tax year Inclu	r largest direct charitable active beneficiaries served, conferen	List the foundation's four larg
Expense account (e) other allowance DNE". (c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	(c) Compensation services (see instruction (b) Type (b) Type (b) Type (c)	Title, and average hours per week (b) devoted to position 50,000	er employees paid over \$5 paid independent contra address of each person paid ers receiving over \$50,000 mmary of Direct Chair	Name and address of e more than s NONE Total number of other en 3 Five highest-paid (a) Name and addre NONE Total number of others re Part IX-A Summa

		_			
Total number	of other employees hald ever	\$50,000			
		tractors for professional sei			ıe"
	and address of each person p		(b) Type		(c) Compensation
NONE	and address of each person p	ald more than \$50,000	(b) Type	or service	(c) Compensation
NONE					
		00 for professional services.			
Part IX-A	Summary of Direct Ch				
		tivities during the tax year Include ences convened, research papers pi		on such as the number of	Expenses
1	,		•		
-					
2					_
-					
3					
4					
Part IX-B	Summary of Program-	Related Investments (Se	ee instructions)		
	-	ments made by the foundation during	·	d 2	Amount
1 N/A		,			
2					

All other program-related investments See instructions

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

2

3a 3h

4

5

66.050

66,050

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Amounts set aside for specific charitable projects that satisfy the

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

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

3

4

5

XII, line 4 🕨 \$

indicated below:

(d)

Page 9

62,194

62,194

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Part XIII Undistributed Income (see instructions)

		Corpus	Years prior to 2016	2016	2017
1	Distributable amount for 2017 from Part XI, line 7				6
2	Undistributed income, if any, as of the end of 2017				
а	Enter amount for 2016 only				
b	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2017				
а	From 2012				
b	From 2013	5			
С	From 2014	-			
	E 201E 17.21	اه	1		I

60.022

3.856

63,878

63,878

15.955 26,853

17.214

3.856

(b)

(c)

(a)

b From 2013. . . . c From 2014. . From 2015. . e From 2016. . . . f Total of lines 3a through e.

e Remaining amount distributed out of corpus

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount —see instructions e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2018.

10 Analysis of line 9 a Excess from 2013.

b Excess from 2014. .

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

Subtract lines 7 and 8 from line 6a

5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

same amount must be shown in column (a))

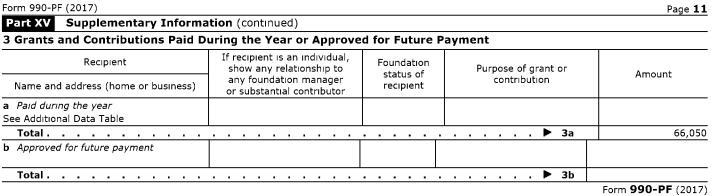
4 Qualifying distributions for 2017 from Part

d Applied to 2017 distributable amount. . .

required—see instructions).

a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election

orr	m 990-PF (2017)					Page 10
ŀ	Private Operating Found	l ations (see ınstr	ructions and Part \	/II-A, question 9)		
	If the foundation has received a ruling or de foundation, and the ruling is effective for 20	117, enter the date	of the ruling	▶∟_	_	
b	Check box to indicate whether the organizat	ion is a private oper	rating foundation des	scribed in section L	☐ 4942(ر)(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 each year listed	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(3) 13111
b	85% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test—enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					
	from an exempt organization (4) Gross investment income					
0.5	Supplementary Information	(Complete this	part only if the	organization ha	d \$5,000 or more	e in
<u>.</u>	assets at any time during th		tructions.)			
a a	Information Regarding Foundation Man List any managers of the foundation who have before the close of any tax year (but only if NONE	e contributed more				ר
b	List any managers of the foundation who ow ownership of a partnership or other entity)				arge portion of the	
	NONE					
•						<u> </u>
2	Information Regarding Contribution, Gr	ant, Gift, Loan, Sc	holarship, etc., Pr	ograms:		
	Check here ► ☑ If the foundation only mak unsolicited requests for funds If the founda other conditions, complete items 2a, b, c, a	tion makes gifts, gr				der
а	The name, address, and telephone number	or email address of	the person to whom	applications should	be addressed	
b	The form in which applications should be sul	bmitted and informa	ation and materials t	hey should include		
С	Any submission deadlines					
d	Any restrictions or limitations on awards, su factors	ch as by geographic	cal areas, charitable	fields, kinds of instit	cutions, or other	



r gross amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	512, 513, or 514	(e) Related or exem
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income
rogram service revenue	Business code	Amount	Exclusion code	Amount	(See men assism
)					
					
Fees and contracts from government agencies Membership dues and assessments					
Interest on savings and temporary cash investments					
Dividends and interest from securities. $\cdot\cdot$.					34
let rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property	arty				
					+
Other investment income					
inventory					202
let income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue					
MISC INCOME					
Subtotal Add columns (b), (d), and (e)					
Total. Add line 12, columns (b), (d), and (e).			1	3	
Fotal. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify c	alculations)			3	
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify contact XVI-B Relationship of Activities to Explain below bow each activity for with	alculations) o the Accomplish	ment of Exem	ıpt Purposes		236,
Fotal. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify compared to the second se	alculations) o the Accomplish nich income is reporte	ment of Exem	npt Purposes of Part XVI-A contribu	ited importantly to	236,
Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify continuous to the second state of the foundation of the second state of the foundation.	alculations) o the Accomplish nich income is reporte	ment of Exem	npt Purposes of Part XVI-A contribu	ited importantly to	236,
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t XVI-B Relationship of Activities to No. Explain below how each activity for white accomplishment of the foundation	alculations) o the Accomplish nich income is reporte	ment of Exem	npt Purposes of Part XVI-A contribu	ited importantly to	236,
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tal. Add line 12, columns (b), (d), and (e). tee worksheet in line 13 instructions to verify compared to the second to the seco	alculations) o the Accomplish nich income is reporte	ment of Exem	npt Purposes of Part XVI-A contribu	ited importantly to	236,
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tal. Add line 12, columns (b), (d), and (e). tee worksheet in line 13 instructions to verify compared to the second to the seco	alculations) o the Accomplish nich income is reporte	ment of Exem	npt Purposes of Part XVI-A contribu	ited importantly to	236
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t XVI-B Relationship of Activities to No. Explain below how each activity for white accomplishment of the foundation	alculations) o the Accomplish nich income is reporte	ment of Exem	npt Purposes of Part XVI-A contribu	ited importantly to	236,
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t XVI-B Relationship of Activities to No. Explain below how each activity for white accomplishment of the foundation	alculations) o the Accomplish nich income is reporte	ment of Exem	npt Purposes of Part XVI-A contribu	ited importantly to	236,
t XVI-B Relationship of Activities to No. Explain below how each activity for white accomplishment of the foundation	alculations) o the Accomplish nich income is reporte	ment of Exem	npt Purposes of Part XVI-A contribu	ited importantly to	236,
t XVI-B Relationship of Activities to No. Explain below how each activity for white accomplishment of the foundation	alculations) o the Accomplish nich income is reporte	ment of Exem	npt Purposes of Part XVI-A contribu	ited importantly to	236,
t XVI-B Relationship of Activities to No. Explain below how each activity for white accomplishment of the foundation	alculations) o the Accomplish nich income is reporte	ment of Exem	npt Purposes of Part XVI-A contribu	ited importantly to	236

orm 99	90-PF (2	2017)									Pa	age 13
Part	XVII	Information Re Exempt Organi		ransf	fers To a	nd Transac	tions a	nd Relatio	nships With Non	charitable		
		anization directly or in Code (other than sectio								on 501	Yes	No
a Tran	nsfers fr	rom the reporting foun	dation to a n	ioncha	ırıtable exe	mpt organizat	on of					
(1)	Cash.									. 1a(1)		No
(2)	Other	assets								. 1a(2)		No
b Oth	er trans	sactions										
(1)	Sales	of assets to a nonchar	ıtable exemp	t orga	nızatıon.					. 1b(1)		No
(2)	Purcha	ases of assets from a r	noncharitable	exem	ipt organiza	ation				1b(2)		No
(3)	Rental	l of facilities, equipmer	nt, or other a	ssets.						1b(3)		No
(4)	Reımb	ursement arrangemen	ts							. 1b(4))	No
(5)	Loans	or loan guarantees.								. 1b(5))	No
(6)	Perforn	nance of services or m	embership o	r fundı	raising soli	citations				. 1b(6))	No
c Sha	ring of t	facılıtıes, equipment, n	nailing lists,	other a	assets, or p	oaid employee	es			. 1c		No
of th	ne good ny trans	er to any of the above ls, other assets, or ser saction or sharing arra (b) Amount involved	vices given b ngement, sh	y the ow in	reporting fo column (d)	oundation If	the found the good	ation receive s, other asse	ed less than fair mark	ket value ved	angemer	nts
(a) Line	110	(b) Amount involved	(C) Name of	HOHER	antable exem	ipt organization	(0)	Description of	transfers, transactions,	and sharing and	angeme	11.5
	_											
	_											
desc	cribed in	dation directly or indire n section 501(c) of the mplete the following si	Code (other							□Yes	✓	No
		(a) Name of organization	on		(b)) Type of organi	zation		(c) Description	of relationship		
		r penalties of perjury,										
		y knowledge and belief n preparer has any kno		orrect,	, and comp	iete Deciarat	ion of pre	parer (otner	tnan taxpayer) is ba	sed on all into	rmatio	п от
Sign Here	*	****				2018-08-14		*****		May the IRS or return with the prepared		
	, s	ignature of officer or t	rustee			Date		Title	,	below (see instr)?	Yes	□ _{No}
		Print/Type preparer's	name	Prepa	arer's Signa	ature	Date		Check if self-	PTIN	4470	
Paid		LARRY B HARRIS (CPA				20	018-08-14	employed ▶ □	P0084	41/9	

Firm's EIN ▶56-1443390

Preparer | Firm's name ▶ PARSEC FINANCIAL MANAGEMENT INC Firm's address ▶ 85 PEACHTREE ROAD

ASHEVILLE, NC 28803

Phone no	(828) 277-7400

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account. hours per week not paid, enter Contributions to (e) other allowances -0-) (b) devoted to position employee benefit plans and deferred compensation ALBERT HALVERSTADT III BOARD MEMBER ٥ 0 50 191 UTE PASS WEST DURANGO, CO 81301 AMY PACANOWSKI BOARD MEMBER 0 151 0.50 150 WYEBROOK RD HONEY BROOK, PA 19344 CLIFF MILLER PRESIDENT O 0 50 89 WALNUT AVE CORTE MADERA, CA 94925 DAVE MILLER BOARD MEMBER 0 ٥ 0 50 5945 OCEAN VIEW DRIVE OAKLAND, CA 946181842 MELISSA JAIVIN BOARD MEMBER 578 0 0 50 16958 ENCINO HILLS DR ENCINO, CA 91436 SARAH CARRIGAN VICE PRESIDE 0 0.50 2836 COASTAL HWY 2 ST AUGUSTINE, FL 32084 PHEBE HIBSHMAN **BOARD MEMBER** 33 0 0 0 50 22775 SW 92 PLACE CUTLER BAY, FL 33190 BARBARA D HALVERSTADT SEC /TREASUR 900 0 1 00 7665 HORN TAVERN DR

FARIVIEW, TN 37062

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GIFTS7665 HORN TAVERN RD 501C3 **EDUCATIONAL** 500 7665 HORN TAVERN RD FAIRVIEW.TN 370629276 10000 DEGREES 501C3 **EDUCATIONAL** 250 10000 DEGREES 1650 LOS GANOS DR 110 1650 LOS GANOS DR 110 SAN RAFAEL, CA 94903 ALZHEIMER'S SUPPORT NETWORK 501C3 CHARITABLE 1,250 ALZHEIMER'S SUPPORT NETWORK 660 TAMIAMI TR 660 TAMIAMI TR NAPLES, FL 34602 AMERICAN CANCER SOCIETY 501C3 CHARITABLE 1,050 AMERICAN CANCER SOCIETY 2000 CHARLOTTE AVE 2000 CHARLOTTE AVE NASHVILLE, TN 37203 BROWN UNIVERSITY 501C3 EDUCATIONAL OR COMMUNITY 300 **BROWN UNIVERSITYPO BOX 1877** WELFARE

66,050

PO BOX 1877

Total . . 3a

PROVIDENCE, RI 02912

If recipient is an individual,	Foundation	Purpose of grant or	Amount
show any relationship to	status of	contribution	
any foundation manager or substantial contributor	recipient		
	501C3	EDUCAITONAL AND COMMUNITY WELFARE	500
	501C3	CHARITABLE	1,000
	501C3	CHARITABLE	650
	501C3	CHARITABLE	250
	501C3	CHARITALBLE	500
		501C3 501C3 501C3	or substantial contributor 501C3 EDUCAITONAL AND COMMUNITY WELFARE 501C3 CHARITABLE 501C3 CHARITABLE 501C3 CHARITABLE

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual. Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CONSERVACY OF SW FLORIDA 501C3 CHARITABLE 3,000 CONSERVACY OF SW FLORIDA 1495 SMITH PRESERVE WAY 1495 SMITH PRESERVE WAY NAPLES, FL 34102 DAVID LAWRENCE CENTER 501C3 REHABILITATION 1.000 DAVID LAWRENCE CENTER 6075 BATHEY LANE 6075 BATHEY LANE NAPLES, FL 34116 501C3 **EDUCATION** 1.000 DENISON UNIVERSITY DENISON UNIVERSITY 100 WEST COLLEGE ST 100 WEST COLLEGE ST GRANVILLE, OH 43023 DENVER ZOO 501C3 CHARITALBE 500 DENVER ZOO2300 STEELE ST 2300 STEELE ST DENVER, CO 80205

501C3 **EDUCATION**

100

DUKE UNIVERSITY DUKE UNIVERSITY2138 CAMPUS DR 2138 CAMPUS DR DURHAM, NC 27708

Total . . 66.050 За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	any foundation manager or substantial contributor	recipient					
a Paid during the year							
EMMANUEL PRESBYTERIAN CHURCH EMMANUEL PRESBYTERIAN CHURCH 9770 TENNESSEE HWY 96 9770 TENESSEE HWY 96 NASHVILLE, TN 37221		501C3	RELIGIOUS	500			
FIRST TEE OF NORTH FLORIDA FIRST TEE OF NORTH FLORIDA 475 W TOWN PLACE STE 115 475 W TOWN PLACE STE 115 ST AUGUSTINE, FL 32092		501C3	CHARITABLE	1,000			
FRIENDS OF ST AUGUSTINE AMPITHEATR FRIENDS OF ST AUGUSTINE AMPITHEATRE PO BOX 840179 PO BOX 840179 ST AUGUSTINE, FL 32080		501C3	CHARITABLE	1,000			
GRACEWORKS MINISTRIES GRACEWORKS MINISTRIES 104 SOUTHEAST PARKWAY 104 SOUTHEAST PARKWAY FRANKLIN, TN 37064		501C3	CHARITABLE	250			
GUARDIANSHIP & TRUST CORPORATION GUARDIANSHIP & TRUST CORPORATION 95 WHITE BRIDGE RD 95 WHITE BRIDGE RD NASHVILLE, TN 37205		501C3	CHARITABLE	6,500			
Total				66,050			

Total . . За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	any foundation manager or substantial contributor	recipient					
a Paid during the year							
HEARTLAND ALLIANCE HEARTLAND ALLIANCE 208 SOUTH LASALLE ST 208 SOUTH LA SALLE ST CHICAGO, IL 60604		501C3	CHARITABLE	1,000			
K-9'S FOR WARRIORS K-9'S FOR WARRIORS114 CAMP K-9 RD 114 CAMP K-9 RD PONTE VERDE BEACH, FL 32081		501C3	CHARITABLE	350			
KENYON COLLEGE KENYON COLLEGEKENYON COLLEGE KENYON COLLEGE GAMBIER, OH 43022		501C3	EDUCATION	1,000			
KQED KQED2601 MARIPOSA ST 2601 MARIPOSA ST SAN FRANCISCO, CA 94110		501C3	COMMUNITY	250			
LANDCASTER FARMLAND TRUST LANDCASTER FARMLAND TRUST 125 LANDCASTER AV		501C3	CHARITALBE	500			

125 LANDCASTER AV 125 LANDCASTER AVE STRASBURG, PA 17579

66,050 Total . .

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Form 990PF Part XV Line 3 - Grant	ts and Contributions Paid	During the `	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
LOS ANGELES PUBLIC LIBRARY LOS ANGELES PUBLIC LIBRARY 630 W 5TH ST 630 W 5TH ST LOS ANGELES, CA 90071		501C3	PUBLIC COMMUNITY	350
MARIN FOOD BANK MARIN FOOD BANK 900 PENNSYLVANIA AVE 900 PENNSYLVANIA AVE SAN FRANCISCO, CA 94107		501C3	CHARITABLE	3,250
MARINE APPLIED RESEARCH AND EXPLORA MARINE APPLIED RESEARCH AND EXPLORATION 1230 BRICKYARD COVE RD 10 1230 BRICKYARD COVE RD 1 RICHMOND, CA 94801		501C3	CHARITABLE	500
MONTCLAIR PRESBYTERIAN MONTCLAIR PRESBYTERIAN 5701 THORNHILL DR 5701 THORNHILL DR OAKLAND, CA 94611		501C3	CHARITABLE	2,500
NEIGHBOR TO NEIGHBOR NEIGHBOR TO NEIGHBOR 2216 POT SPRINGS RD 2216 POT SPRINGS RD TIMONIUM, MD 21093		501C3	RELIGIOUS	1,000

Total . . 3a 66,050

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient						
a Paid during the year								
OAKLAND TECHNICAL HIGH SCHOOL PTSA OAKLAND TECHNICAL HIGH SCHOOL PTSA 4351 BROADWAY 4351 BROADWAY OAKLAND, CA 94611		501C3	EDUCATION	1,000				
OKIZU OKIZU16 DIGITAL DR 16 DIGITAL DR NOVATO, CA 94949		501C3	CHARITABLE	250				
RAPHAEL HOUSE RAPHAEL HOUSE1065 SUTTER ST 1065 SUTTER ST SAN FRANCISCO, CA 94109		501C3	CHARITABLE	250				
ST VINCENT DEPAUL SOCIETY ST VINCENT DEPAUL SOCIETY 7665 HORN TAVERN RD 7665 HORN TAVERN RD FAIRVIEW T,TN 37062		501C3	RELIGIOUS	200				
STEP UP STEP UP510 SOUTH HEWITT ST 510 SOUTH HEWITT ST LOS ANGELES, CA 90013		501C3	CHARITABLE	1,000				

66,050

Total . . .

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	any foundation manager or substantial contributor	recipient					
a Paid during the year							
SUN VALLEY SUMMER SYMPHONY SUN VALLEY SUMMER SYMPHONY 120 2ND AVE 120 2ND AVE KETCHUM, ID 83340		501C3	CHARITABLE	100			
THE IMAGINE BUS PROJECT THE IMAGINE BUS PROJECT 1012 TORNEY AVE 1012 TORNEY AVE SAN FRANCISCO, CA 94129		501C3	CHARITABLE	250			
TRAILS 2000 TRAILS 20001188 E 2ND AVE 1188 E 2ND AVE DURANGO, CO 81301		501C3	CHARITABLE	650			
UNITY NOW THOUGHT CENTER UNITY NOW THOUGHT CENTER 7655 HORN TAVERN RD 7655 HORN TAVERN RD FAIRVIEW, TN 37062		501C3	CHARITABLE	1,500			
WESTMINSTER PRESBYTERIAN WESTMINSTER PRESBYTERIAN 7665 HORN TAVERN RD 7655 HORN TAVERN RD FAIRVIEW, TN 37062		501C3	RELIGIOUS	500			

66,050

Total . . .

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year WHISPERING MANES 501C3 THERAPY/REHABILITATION 1,000 WHISPERING MANES 6105 SW 125TH AVE 6105 SW 125TH AVE MIAMI, FL 33183 WOUNDED WARRIOR PROJECT 501C3 CHARITABLE 250 WOUNDED WARRIOR PROJECT 4899 BELFORT RD 4899 BELFORT RD JACKSONVILLE, FL 32256 YWCA DOMESTIC VIOLENCE SHELTER 501C3 CHARITABLE 250 YWCA DOMESTIC VIOLENCE SHELTER 1608 WOODMONT BLVD 1608 WOODMONT BLVD NASHVILLE, TN 37215 LAMDA IN AMERICA INC 501C3 COMMUNITY 500 LAMDA IN AMERICA INC. 1325 AVE OF THE AMERICAS 1325 AVE OF AMERICAS 28TH NEW YORK, NY 10019 500 THE LEARNING EXPERIENCE SCHOOL **EDUCATION**

THE LEARNING EXPERIENCE SCHOOL 5651 SW 82ND AVE RD 5651 SW 82ND AVE RD MIAMI, FL 33143

66,050 Total За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount status of contribution show any relationship to any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 1,000 GALT FOUNDATION INC. 501C3 COMMUNITY GALT FOUNDATION INC 2405 FRONT ST 220 2405 FRONT ST 220 SALEM, OR 97301 AJGA 501C3 **EDUCATION** 1,000 AJGA1980 SPORTS CLUB DRIVE 1980 SPORTS CLUB DRIVE BRASELTON, GA 30517 501C3 1,000 LISTENING HEARTS MINISTRY COMMUNITY/RELIGION 5,500 650

LISTENING HEARTS MINISTRY 3000 CHESTNUT AVE STE100B 3000 CHESTNUT AVE STE100B BALTIMORE, MD 21211			
ST MARK'S CHURCH ST MARK'S CHURCH111 OENOKE RDG 111 OENOKE RDG NEW CANANN, CT 06840	501(C)3	RELIGIOUS	5,

COMMUNITY

501(C)(3)

ADAPTIVE SPORTS ASSOC ADAPTIVE SPORTS ASSOC

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125 E 32ND ST 125 E32ND ST DURANGO, CO 81301 Total . 66.050

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	any foundation manager or substantial contributor	recipient					
a Paid during the year							
MERELY PLAYERS THEATRE MERELY PLAYERS THEATRE 49 WEDGEWOOD CIRCLE 49 WEDGEWOOD CIRCLE DURANGO, CO 81301		501C3	COMMUNITY	1,500			
STILLWATER FOUNDATION STILLWATER FOUNDATION 1316 MAIN AVE 1316 MAIN AVE DURANGO, CO 81301		501C3	COMMUNITY	250			
BATES COLLEGE BATES COLLEGE2 ANDREWS ROAD 2 ANDREWS ROAD LEWISTON, ME 04240		501C3	EDUCATION	250			
HICKMAN CHARTER HOME SCH HICKMAN CHARTER HOME SCHOOL 13306 4TH ST 13306 4TH ST HICKMAN, CA 95323		501C3	EDUCATION	500			
LWV OAKLAND ED FUND LWV OAKLAND ED FUND 436 14TH ST SUITE 1213 436 14TH ST SUITE 1213		501C3	EDUCATION	500			

OAKLAND, CA 946122723 66,050

Total . . . 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year WHHS ALUMNI FOUNDATION 501C3 COMMUNITY 100 WHHS ALUMNI FOUNDATION 3250 VICTORY PARKWAY 3250 VICTORY PARKWAY CINCINNATI, OH 45207 FRIENDS OF KALW 501C3 COMMUNITY 100 FRIENDS OF KALW500 MANSELL ST 500 MANSELL ST SAN FRANCISCO, CA 94134

THE SINK OR SWIM PROJECT THE SINK OR SWIM PROJECT 7655 HORN TAVERN RD 7655 HORN TAVERN RD MIAM, FL 33186	501C3	EDUCATION/CONSERVATION	500
NAPLES BOTANICAL GARDEN NAPLES BOTANICAL GARDEN 4820 BAYSHORE DR 4820 BAYSHORE DR NAPLES, FL 34112	501C3	EDUCATION/COMMUNITY	1,500
CHESTER COUNTY HISTORICAL SOCIETY CHESTER COUNTY HISTORICAL SOCIETY	501C3	EDUCATION/COMMUNITY	500

225 N HIGH ST

225 N HIGH ST

WEST CHESTER, PA 19380 66,050 Total . . За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BRANDYWINE CONSERVANCY AND 501C3 CONSERVATION 650 MUSEUM BRANDYWINE CONSERVANCY AND MUSEUM 1 HOFFMANS MILL RD 1 HOFFMANS MILL RD CHADDS FORD, PA 19317 HOUSTON FOOD BANK 501C3 COMMUNITY 1,000 HOUSTON FOOD BANK 535 PORTWALL ST 500 SHALEM INSTITUTE 501C3 **RELIGIOUS** 500 SHALEM INSTITUTE3025 4TH ST NE 3025 4TH ST NE WASHINGTON, DC 20017 PROJECT MED SHARE HAITI 501C3 HEALTH CARE 1,650

66.050

535 PORTWALL ST HOUSTON, TX 77029			
CAMPING & EDUCATION FOUNDATION CAMPING & EDUCATION FOUNDATION 3515 MICHIGAN AVE 1 3515 MICHIGAN AVE 1 CINCINNATI. OH 45208	501C3	COMMUNITY/EDUCATION	

PROJECT MED SHARE HAITI

PO BOX 381208 PO BOX 381208 MIAMI, FL 332381208

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Total . . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient						
a Paid during the year								
GAL7 FOUNDATION GAL7 FOUNDATION 10 WESTBROOK LANE 10 WESTBROOK LANE PALM COAST, FL 32164		501C3	ADVOCACY/COMMUNITY	1,000				
NORTH SHORES IMPROVEMENT ASSOC NORTH SHORES IMPROVEMENT ASSOC PO BOX 194 PO BOX 194 FAWNSKIN, CA 92333		501C3	SERVICE	1,000				
ECKERD COLLEGE ECKERD COLLEGE4200 5TH AVE S 4200 5TH AVE S ST PETERSBURG, FL 33711		501C3	EDUCATION	300				
AMERICAN RED CROSS AMERICAN RED CROSS WASHINGTON DC WASHINGTON DC WASHINGTON, DC 20006		501C3	COMMUNITY	2,000				
ST MATTHEW'S HOUSE ST MATTHEW'S HOUSE 2001 AIRPORT RD S 2001 AIRPORT RD S NAPLES, FL 34112		501C3	COMMUNITY	500				

66,050

Total . .

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Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ST SIMON'S LAND TRUST 501C3 PRESERVATION/CONSERVATION 100 ST SIMON'S LAND TRUST 1624 FREDERICA RD STE 6 1624 FREDERICA RD STE 6 ST SIMONS ISLAND, GA 31522 BARBARA SINATRA CHILDREN'S CTR 501C3 CHILREN'S RIGHTS 1,000 BARBARA SINATRA CHILDREN'S CTR 500

39000 BOB HOPE DR 39000 BOB HOPE DR RANCHO MIRAGE, CA 92270			
FRIDAY'S RESCUE FRIDAY'S RESCUE270 ROGERS RD 270 ROGERS RD GROTON, CT 06340	501C3	ANIMAL RIGHTS	500
RIVER RUN INTL FILM FESTIVAL RIVER RUN INTL FILM FESTIVAL 305 W FOURTH ST SUITE 1A	501C3	COMMUNITY	500

305 W FOUTH ST SUITE 1A WINSTON SALEM, NC 27101

66,050

Total. 3a

efile GRAPHIC print - DO NOT P	ROCESS	As Filed D	ata -	D	LN: 93491226006118			
TY 2017 Accounting Fees Schedule								
	Name:	HERBERT	& GERTRUDE HAL	VERSTADT				
I		FOLINDA	TION INC					
	EIN:	62-60736	590					
Accounting Fees Schedule					-			
Category	Ame	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
PROFESSIONAL FEES		3,302						

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491226006118 TY 2017 Explanation of Non-Filing with Attorney General Statement Name: HERBERT & GERTRUDE HALVERSTADT FOUNDATION INC **EIN:** 62-6073690 **Statement:** NOT REQUIRED

DLN: 93491226006118

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

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
UBS SHORT-TERM		PURCHASE			127,527	130,688			-3,161	
UBS LONG-TERM		PURCHASE			458,190	253,314			204,876	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491226006118
TV 2017 Townselve Compared	o Charle Cala	-ll-	
TY 2017 Investments Corporat	e Stock Sche	aule	
Name:	HERBERT & GERTI	RUDE HALVERSTADT	
F	OUNDATION INC		

EIN: 62-60/3690				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
INVESTMENTS - COMMON STOCKS	26,244	30,793		

ellie GRAPHIC PHIII - DO NOT PROCESS AS Filed Data -	DLN. 93491220000118
TY 2017 Investments - Other Schedule	
11 2017 Threstments - Other Schedule	
Name: HERBERT & GERTRUDE HALVERS	TADT

DI N. 02/01226006110

FOUNDATION INC

EIN: 62-6073690

ofile GRADUIC print - DO NOT PROCESS | As Filed Data -

Investments Other Schedule 2					
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value		
NON-TRADITIONAL MUTUAL FUNDS	AT COST	124,046	131,507		
UBS BOND FUND					
EXCHANGE TRADE FUNDS FIXED INC	AT COST	92,065	96,564		
EXCHANGE TRADED FUNDS FOUTTY	AT COST	822.875	1.037.532		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	l: 93491226006118
TY 2017 Other Expenses Sche	dule			
Name:	HERBERT & GER	RTRUDE HALVERS	STADT	
	FOUNDATION INC			
EIN: 62-6073690				
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
TELEPHONE	2,021			
CHECK FEES	174			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491226006118
TY 2017 Other Income Schedu	 		
11 2017 Other Income Schedu	C		
Name: I	HERBERT & GERTI	RUDE HALVERSTADT	
ı	FOUNDATION INC		

E111 02 0073030				
Other Income Schedule				
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income	
MISC INCOME	87	87	87	

FTN: 62-6073690

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491226006	118			
TY 2017 Other Increases Schedule							
Name:	HERBERT & GE	ERTRUDE HALVERSTADT					
	FOUNDATION	INC					
EIN:	62-6073690						
De	escription		Amount				
ROUNDING				3			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DL	N: 93491226006118			
TY 2017 Other Liabilities Schedule							
Name:	HERBERT & GI	ERTRUDE HALVERSTAI	TC				
	FOUNDATION INC						
EIN: 62-6073690							
Description	n	-	g of Year Value	End of Year - Book Value			
COST BASIS ADJUSTMENT OF STOCK				1,020			

efile GRAPHIC print - DO NOT PROCI	ESS As Filed Data	-	DL	N: 93491226006118		
TY 2017 Other Professional Fees Schedule						
	me: HERBERT & FOUNDATIC EIN: 62-6073690		RSTADT			
Category Amount Net Investment Adjusted Net Disbursements Income Income Purposes						
FEES	15,637					

efile GRAPHIC print - DO NOT	PROCESS	As Filed Data	-	DLN	N: 93491226006118
TY 2017 Taxes Schedu	ule	•			
	Name:	HERBERT &	GERTRUDE HALVE	RSTADT	
ı	FOUNDATION INC				
	EIN:	62-6073690	ı		
Category	Am	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAXES	1	20			