EXTENDED TO NOVEMBER 15, 2018 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation 2018

▶ 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.

		calendar year 2017 or tax year beginning MAR	17, 2017	, and ending	DEC 31, 2017	To vide this position
		me of foundation	A Employer identification	number		
	ч	ICKORY HILL FOUNDATION			82-0987682	
~		noer and street (or PO box number if mail is not delivered to street ac	ddress)	Room/suite	B Telephone number	
	_1	385 BRIDGE ST			(612) 343-	8278
		y or town, state or province, country, and ZIP or foreign po	ostal code		C If exemption application is pe	ending, check here
		ONESDALE , PA 18431-1403 Check all that apoly X Initial return	Initial return of a fe	ormer public charity	D 1 Foreign organizations	chack hara
	u	Check all that apply X Initial return Final return	Amended return	inner public charity		
		Address change	Name change		2 Foreign organizations me check here and attach co	eting the 85% test, mputation
	H C	Check type of organization: X Section 501(c)(3) exe			E If private foundation star	tus was terminated
			Other taxable private founda		under section 507(b)(1)	•
		air market value of all assets at end of year J Accounting rom Part II, col. (c), line 16) - Ott	ng method X Cash her (specify)	Accrual •	F If the foundation is in a under section 507(b)(1)	. —
N.	٠.	\$ 3,287,517. (Part I, column		s)	ander section 507(5)(1)	(B), check here
2	· Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1		1 Contributions, gifts, grants, etc., received	3,200,858.	VANSATA KAN	∴ N/A ∴	
U.S.		2 Check If the foundation is not required to attach Sch B Interest on savings and temporary				
55		3 cash investments	36,631.	36,631.	-	STATEMENT 2
~		4 Dividends and interest from securities 5a Gross rents	30,031.	. 30,031.		
8		b Net rental income or (loss)				
FEB	o.	6a Net gain or (loss) from sale of assets not on line 10	38,142.			STATEMENT 1
	enu	b assets on line 6a 92,105.		41,705.		
SCANNED	Rev	7 Capital gain net income (from Part IV, tine 2) 8 Net short-term capital gain			tvas simusismin, gal-11.22-101-21 H	
를		9 Income modifications				FARETANT DESC.
3		Gross sales less returns 10a and allowances		The second secon		
Š		b Less Cost of goods sold				
		c Gross profit or (loss)		TOP-PENT SEED TO TOP PENT SEED STATE		
		12 Total Add lines 1 through 11	3,275,631.	78,336.		THE REPORT OF
		13 Compensation of officers, directors, trustees, etc	0.	0	RECEIVE	0.
		14 Other employee salaries and wages			TOLIVE	D
ı	es	15 Pension plans, employee benefits 16a Legal fees STMT · 3	9,745.	0.	DEC 0 3 20	
	ense	b Accounting fees			0 0 E	ဟြ
,	Exp	c Other professional fees STMT 4	82.	82	OGDEN, L	<u>0.</u>
ı	tive	17 Interest	1,100.	1,100.	OCDETA, (0.
	stra(18 Taxes STMT 5 19 Depreciation and depletion	1,100.	1,100.		
	į					(100 mm) (10
l I	Adm	21 Travel, conferences, and meetings				
	and	22 Printing and publications		a.	 	
	ting	23 Other expenses 24 Total operating and administrative `		 		
	era	evnenses Add lines 13 through 23	10,927.	1,182.		9,745.
	ô	25 Contributions, gifts, grants paid	52,050.			52,050.
 		26 Total expenses and disbursements	60 000	1 100		61 705
	_	Add lines 24 and 25	62,977.	1,182.		61,795.
		27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements	3,212,654.			
		b Net investment income (if negative, enter -0-)	heris comp	77,154.		
		c Adjusted net income (if negative, enter -0-)			N/A	BE STEEL STEEL

¥ο	CSPAIT UE	Balance Sheets Attached schedules and amounts in the description column should be for end of-year amounts only	Beginning of year	End (of year
áá	column should be for end of year amounts only		· ;(a) Book Value	(b) Book Value	' (c) Fair Market Value
一、	1	Cash - non-interest-bearing		4	
	;	· ·	· · · · · · · · · · · · · · · · · · ·	. 42,953.	. 42,953.
	2	Savings and temporary cash investments	THE THE COURT WORKS AND A FEBRUAR		12,000
	3	Accounts receivable			ASSESSED AND AND ASSESSED AND ASSESSED AND ASSESSED AND ASSESSED ASSESSED.
		Less: allowance for doubtful accounts			\
	4	Pledges receivable			
	ĺ	Less: allowance for doubtful accounts	-	•	
•	_	Grants receivable	_ .		
	5		- -	,	
	6	Receivables due from officers, directors, trustees, and other .	•	,	
	١,	disqualified persons			
	17	Other notes and loans receivable		是这种的原理的关系	
		Less: allowance for doubtful accounts			
		Inventories for sale or use			
ets	1			,	,
SS		Prepaid expenses and deferred charges		,	<u> </u>
•	10a	Investments - U.S and state government obligations		· · · · · · · · · · · · · · · · · · ·	<u> </u>
	b	Investments - corporate stock •			ļ <u>-</u>
	l c	Investments - corporate bonds	. • .	+	
	1 '	Investments - land, buildings, and equipment basis	THE STATE OF THE S		
	١.,		THE COMMISSION OF THE PROPERTY	,	SUBSUSSION STATE AND ADDRESS OF THE PROPERTY O
	١	Less accumulated depreciation		•	
	12	Investments - mortgage loans		2 160 701	2 2 4 4 5 5 4
	13	Investments - other STMT 6	<u>'</u> 0.	3,169,701.	3,244,564.
	14	Land, buildings, and equipment; basis			
		Less accumulated depreciation	.*	-	
	15	Other assets (describe			
	1	·			
	16	Total assets (to be completed by all filers - see the •	4 0.	3,212,654.	3,287,517.
		instructions. Also, see page 1, item I)	U •	3,212,034.	3,20/,31/.
_	17	Accounts payable and accrued expenses		!	
	18	Grants payable .	, ,		
s	19	Deferred revenue .	- 4		
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		,	
Ē	21	Mortgages and other notes payable		,	
Ë.	1	Other liabilities (describe			
	22	Other haddittes (describe	,		
				· · · · · ·	
_	23	Total liabilities (add lines 17 through 22)	0.	· · 0.	
		Foundations that follow SFAS 117, check here		• •	
	· ·	and complete lines 24 through 26, and lines 30 and 31	,		
S	24	Unrestricted		, ,	
ĕ	25	Temporarily restricted • *	,		
Balance					
8	26	Permanently restricted		•	- Lies Englisher Inches
or Fund		Foundations that do not follow SFAS 117, check here X.	•		
Ē	-	and complete lines 27 through 31			
ō	27	Capital stock, trust principal, or current funds	, O.		
Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	' 0.	0.	
ISS	•	Retained earnings, accumulated income, endowment, or other funds	0.	3,212,654.	
	1	Total net assets or fund balances	, ,0.	3,212,654.	
Net	30	Total net assets of fund paramets	, (0.	3,212,0310	
			,	2 212, CE4	and the second
<u>. </u>	31	Total liabilities and net assets/fund balances	0.	3,212,654.	
βP	art	III Analysis of Changes in Net Assets or Fund Ba	alances	•	• •
			<u> </u>		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30 ⋅	•	h
	(mus	it agree with end-of-year figure reported on prior year's return)	T	[1	0.
		amount from Part I, line 27a	4	2	3,212,654.
		increases not included in line 2 (itemize)		3	0
			· · · · · ·		3,212,654.
		ines 1, 2, and 3	*	` <u>4</u>	, 3,414,034.
		eases not included in line 2 (itemize)			2 212 654
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6_	3,212,654.
		•			Form 990-PF (2017)

	i) Date sold no., day, yr.)
2-story brick warehouse, or common stock, 200 shs. MLC Co.) 1a ISHARES S&P 100 ETF b METROPOLITAN WEST TOTAL P - Purchase D - Donation (mo., day, yr.) (no., day, yr.)	
1a ISHARES S&P 100 ETF P b METROPOLITAN WEST TOTAL P	
c WMC INTERNATIONAL FUND	
d WMC INTERNATIONAL FUND	-
e CAPITAL GAINS DIVIDENDS	
(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis (h) Gain or (loss) (le) plus (f) minus (g))	
a 20,108. 15,635.	<u>4,473.</u>
ь 34,980. 35,099.	<119.>
<u>c</u>	30.
d	304.
e 37,017.	37,017.
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (i) Adjusted basis (k) Excess of col. (i) col. (k), but not less than -0-) (ii) Col. (k), but not less than -0-) (iii) Col. (k), but not less than -0-) (iiii)	
(i) FMV as of 12/31/69 (j) Adjusted basis (k) Excess of col. (i) col. (k), duf not less than 4-7 to over col. (j), if any Losses (from col. (h))	
a	4,473.
<u>b</u>	<119.>
<u>c</u>	30.
<u>d</u>	304.
<u>e</u>	37,017.
2 Capital gain net income or (net capital loss) (If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 2	41,705.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):	
If gain, also enter in Part I, line 8, column (c).	
If (loss), enter -0- in Part I, line 8 [Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income	
	/A
If section 4940(d)(2) applies, leave this part blank.	
Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?	Yes No
If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part	
1 Enter the appropriate amount in each column for each year; see the instructions before making any entries	
(a) Base period years Calendar year (or tax year beginning in) Calendar year (or tax year beginning in) Calendar year (or tax year beginning in) Adjusted qualifying distributions Adjusted qualifying distributions Net value of noncharitable-use assets (col. (b) divided b	ratıo y col. (c))
2016	
2015	
2014	
2013	
2012	
2 Total of line 1, column (d)	
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5 0, or by the number of years	
the foundation has been in existence if less than 5 years	
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	
The first time of the first ti	
5 Multiply line 4 by line 3	<u> </u>

8 Enter qualifying distributions from Part XII, line 4

6 Enter 1% of net investment income (1% of Part I, line 27b)

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

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7 Add lines 5 and 6

7

Х

Яh

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

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

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

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

Pa	it VIIIA Statements Regarding Activities _(continued)			
	•		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► MERISTEM Telephone no. ► (952)	935	-25	77
•	Located at ▶ 601 CARLSON PARKWAY, NO 800, MINNETONKA, MN ZIP+4 ▶5			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			•
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	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			出现
	foreign country			73766
Pε	nt 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			1. 1.4.4
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		97.	200
	(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"			经销
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
_	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b	7.72	
	Organizations relying on a current notice regarding disaster assistance, check here		\$35545 \$3	24
,	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	4500 MX 649	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		1,1100	
2	defined in section 4942(j)(3) or 4942(j)(5))			漢語
,	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			íź 🛒
٥	before 2017? Yes X No			25.22.25
	If "Yes," list the years ▶			
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			áki,
	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) N/A	2b	APRIL NE DE LES	*ALJONNAN
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	7	534	i de la como
·	Title provisions of section 4542(a)(2) are being applied to any of the years listed in 2a, list the years here.			
2.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
Jd	during the year? Yes X No			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
ŀ	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after			
U	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.) N/A	3b	PARSET 2	A 17.28.
4~	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	70	* 12 - * - * 2	7 7 M Z
U	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	65 - 8	Х
	nad not over temoted from jeopardy eviets the mot day of the tax year beginning in 60 fr			

		equired (contin	ued).		
5a During the year, did the foundation pay or incur any amount to:			35	Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	F T Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955), of	` ''		- Company		
any voter registration drive?	,,,		es 🗶 No		選を
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization)
4945(d)(4)(A)? See instructions	ii deserreca iii sectioni		s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or adjugational nurnosas, or fe				
the prevention of cruelty to children or animals?	or educational purposes, or it		es 🗶 No 🖺		
·	dar the averations described i		S [21] NU [3		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		n regulations	N/A	5b	33838E
section 53 4945 or in a current notice regarding disaster assistance? See instr			N/A	30 F. J.	de Drei
Organizations relying on a current notice regarding disaster assistance, check				14 M. W.	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f				and the state of t	
expenditure responsibility for the grant?	, IN	/A Ye	es 🔲 No 🕍		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			Chapter 1		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			XIIIX	157.60
a personal benefit contract?		Ye	es 🗓 No 🖺		W.
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		E	6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🗶 No 🖺		
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b	
Part VIII. Information About Officers, Directors, Trusto Paid Employees, and Contractors	ees, Foundation Mar	nagers, Highly			
1 List all officers, directors, trustees, and foundation managers and t	neir compensation.				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account, allowa	other
PENNELL WHITNEY	TRUSTEE	<u> </u>			
1385 BRIDGE ST					
HONESDALE, PA 18431-1403	1.00	0.	0.		0.
101111111111111111111111111111111111111					
	1				
	1				
2. Compensation of five highest-naid employees (other than those inc	luded on line 1) If none 6	nter "NONF "			
2 Compensation of five highest-paid employees (other than those inc	T	enter "NONE."	(d) Contributions to	(e) Exo	ense
Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	(d) Contributions to employee benefit plans and deterred	(e) Exp	ense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	1	(d) Contributions to employee benefit plans and deterred compensation	(e) Exp account, allowa	ense other nces
	(b) Title, and average hours per week	1	(d) Contributions to employee benefit plans and deterred compensation	(e) Exp account, allowa	ense other nces
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	1	(d) Contributions to employee benefit plans and deterred compensation	(e) Exp account, allowar	ense other nces
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	1	(d) Contributions to employee benefit plans and deterred compensation	(e) Exp account, allowa	ense other nces
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	1	(d) Contributions to employee benefit plans and deterred compensation	(e) Exp account, allowa	ense other nces
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	1	(d) Contributions to employee benefit plans and deterred compensation	(e) Exp account, allowa	ense other nces
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	1	(d) Contributions to employee benefit plans and deterred compensation	(e) Exp account, allowa	ense other nces
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	1	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account, allowar	ense other nces
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	1	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account, allowar	ense other nces
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	1	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account, allowar	ense other nces
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	1	(d) Contributions to employee benefit plans and deterred compensation	(e) Exp account, allowar	ense other nces
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	1	(d) Contributions to employee benefit plans and deterred compensation	(e) Exp account, allowar	ense other nces

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Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	_	
Total number of others receiving over \$50,000 for professional services Partix-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist		Expenses
number of organizations and other beneficiaries served, conferences convened, research papers product. N/A	uced, etc.	
2		
3		
4		
Part X-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on I	ines 1 and 2.	Amount
1 N/A	-	
2		
All other program-related investments See instructions.		<u>.</u>
3		
	-	
Total_Add_lines_1_through 3		0.
		Form 990-PF (2017)

H.	All domestic foundations must complete this part. Foreign foundations must complete this part.	nuations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	2,048,268. 39,797.
b	Average of monthly cash balances	1b	39,797.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,088,065.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,088,065.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	31,321.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,056,744.
6	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	81,706.
IP,	art II Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations a	nd certain	
	foreign organizations, check here 🕨 🔃 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	81,706.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,543.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	80,163.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	80,163.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	80,163.
Œ	artXIII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	61,795.
Ь	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b		3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	61,795.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	61,795.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for	the section
	4940(e) reduction of tax in those years.		

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,				00 163
line 7				80,163.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years		0.		;
3 Excess distributions carryover, if any, to 2017:				
a From 2012				
b From 2013				
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ► \$ 61,795.				
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				61,795.
e Remaining amount distributed out of corpus	0.			017.55
5 Excess distributions carryover applied to 2017	0.			0.
(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:				
a Curpus Add lines 3f, 4c, and 4e Subtract line 5	0.	, <u>, , , , , , , , , , , , , , , , , , </u>		
b Prior years' undistributed income Subtract				
line 4b from line 2b		<u>0.</u>	-	
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		· · · · · · · · · · · · · · · · · · ·
e Undistributed income for 2016. Subtract line			•	
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				10 260
be distributed in 2018		<u></u>		18,368.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012	0			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018	0.			
Subtract lines 7 and 8 from line 6a	<u> </u>	· www. *		
10 Analysis of line 9:				
a Excess from 2013				
b Excess from 2014	:			
c Excess from 2015	· · · · · · · · · · · · · · · · · · ·		, 19/5 h	, '47.4.
d Excess from 2016				,
e Excess from 2017				- 000 DE

Form **990-PF** (2017) 723581 01-03-18

\				00.00	0.000 -
Form 990-PF (2017) HICKORY Part XIV Private Operating Fo	HILL FOUNDA		A guestian (I)	N/A	87682 Page 10
			-A, question 9)	N/A	
1 a If the foundation has received a ruling or foundation, and the ruling is effective for					
b Check box to indicate whether the foundation	thon is a private operating	n foundation described i	n section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	g roundation described i	Prior 3 years		1
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for			 		
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,			-		
line 4 for each year listed					
d Amounts included in line 2c not		<u> </u>			
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					1
Subtract line 2d from line 2c		\mathbf{X}			
3 Complete 3a, b, or c for the			<u> </u>		
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying	/				
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed			\		
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from				\	
an exempt organization					<u> </u>
4) Gross investment income				1 45 200	
Part XV Supplementary Infor	•	•	f the foundation	n had \$5,000 or mo	re in assets
at any time during th	e year-see instru	ictions.)			
1 Information Regarding Foundation					
a List any managers of the foundation who			ibutions received by the	ne foundation before the clos	e of any tax
year (but only if they have contributed me	ire man \$5,000). (See se	cuon 507(u)(2).)			
PENNELL WHITNEY					
b List any managers of the foundation who other entity) of which the foundation has			or an equally large poi	tion of the ownership of a pa	irtnersnip or
NONE	a 1070 or grouter interest	•			
2 Information Regarding Contribution	n. Grant. Gift. Loan.	Scholarship, etc., Pr	ograms:		
Check here ► ☐ If the foundation on				s not accept unsolicited requ	ests for funds If
the foundation makes gifts, grants, etc., t					
a The name, address, and telephone number	er or email address of the	person to whom applic	ations should be addre	essed:	
PENNELL WHITNEY, HICK					
1385 BRIDGE STREET, H	ONESDALE, P	A 18431-140)3		
b The form in which applications should be	submitted and informati	on and materials they sh	iould include:		
NO PARTICULAR FORM					
c Any submission deadlines:		-			
d Any restrictions or limitations on awards,				or other factors:	
CHARITABLE 501(C)(3)	ORGANIZATIO	NS, NOT 509	9(A)(2)		
723601 01-03-18		 			Form 990-PF (2017)

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Form 990-PF (2017)

١	Part XVI-A	Analysis of Income-Producing Act	tivities
ı	IUICATIA	Analysis of moonic i roddomg no	

Inter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	7 HIIOUIK	code	Amount	Turiction income
a					
b	_				
C	_				
d					
e	_		_		
f	_	<u>.</u>			
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	36,631.	
5 Net rental income or (loss) from real estate: a Debt-financed property		HILIMINIA KATALON KATA		niippiisuudgustattijija af upar _g a tu tu tu tu tu tu tu tu tu Viituud vaatuud	volumenta auro v valuruma vertaruhiligi. Geni al
b Not debt-financed property			+		
6 Net rental income or (loss) from personal property		·			
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	38,142.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
1 Other revenue					
a					
b					
C	_				
d		<u></u>			
e					
2 Subtotal. Add columns (b), (d), and (e)		0	•]	74,773.	
3 Total Add line 12, columns (b), (d), and (e)				13	74,773.
See worksheet in line 13 instructions to verify calculations.)				

Part XVI-B	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)

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rayt is	Page	13
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Part	XVII		_	sfers to a	nd Transactions a	nd Relation	ships With Nonc	haritable		<u>.g. ,</u>
1 Di	d the or	Exempt Organ		of the following	ng with any other organizati	ion described in	section 501/c)		Yes	No
					g to political organizations?		Section 50 I(c)		100	
•		from the reporting found								
(1	Cash							1a(1)		Х
(2) Other	assets						1a(2)		Х
b Ot	her tran	sactions:								
(1) Sales	of assets to a noncharita	ble exempt organiza	ition				1b(1)		X
(2) Purch	nases of assets from a no	ncharitable exempt	organization				1b(2)		X
•		I of facilities, equipment,						1b(3)	<u> </u>	X
		bursement arrangements						1b(4)		X
		s or loan guarantees						1b(5)		X
		rmance of services or me						1b(6)		X
	-	facilities, equipment, ma			•	lwave chaw the f	air market value of the e		otc	
		•		=	edule. Column (b) should a ed less than fair market val	-			U15,	
) the value of the goods,			cu iess tilait iaii Tilaiket vai	ue in any transac	ation of sharing arrangen	icit, show iii		
(a) Line r		(b) Amount involved			e exempt organization	(d) Descri	iption of transfers, transaction	ns, and sharing arra	angemen	nts
•			, , ,	N/A						
				•						
				••						
	\perp									
	-									
		· · · · · · · · · · · · · · · · · · ·								
-							 · · · · · · · · · · · · · · · · · · 			
	+					<u> </u>				
2a Is	the four	ndation directly or indirect	tly affiliated with, or	related to, one	or more tax-exempt organ	izations describe	nd			
		501(c) (other than section		•				Yes	X	No
		implete the following sch								-
		(a) Name of org	ganization		(b) Type of organization		(c) Description of re	lationship		
_		N/A								
						 				
										
	Llador	popultion of porture I declare t	hat I have examined this	return including	accompanying schedules and s	tatements, and to th	a best of my knowledge			
Sign					taxpayer) is based on all informa			May the IRS of return with the		
Here		The well to	1. Louis		1 1/1/18	OFFI	CED	shown below?	See ins	str
	Sign	ature of officer or trustee	mi run	 -	Date Date	Title	CER	_ <u>X</u> Yes	<u> </u>	J No
	3.9"	Print/Type preparer's na		Preparer's s		Date	Check If	PTIN		
		KRISTIN A.			•		self- employed			
Paid		CPA	,	KRISTI	N A. ALINDE	11/12/1	8	P00167	446	
Prep	arer		ER TILLY		W KRAUSE, LL			9-08599		
Hook	July 1						1			

Phone no. 612.876.4500

Firm's address ► 225 S 6TH ST #2300

MINNEAPOLIS, MN 55402

Schedule B

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

Department of the Treasury Internal Revenue Service

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

2017

Name of the organization

HICKORY HILL FOUNDATION

Employer identification number

Organization type (check one)					
Filers of	f:	Section:			
Form 99	0 or 990-EZ	501(c)() (enter number) organization			
		4947(a)(1) nonexempt charitable trust not treated as a private foundation			
		527 political organization			
Form 99	0.PF	X 501(c)(3) exempt private foundation			
		4947(a)(1) nonexempt charitable trust treated as a private foundation			
		501(c)(3) taxable private foundation			
	nly a section 501(c)(covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions			
X	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.			
Special	Rules				
	sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 r, 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, line 1 Complete Parts I and II			
	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				
	year, contributions is checked, enter h purpose Don't con	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., inplete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., etc., contributions totaling \$5,000 or more during the year.			
but it mi	ust answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 be filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)			

Employer identification number

HICKORY HILL FOUNDATION

Pärt 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	WHITNEY FOUNDATION 601 CARLSON PKWY, #800 MINNETONKA, MN 55305	\$42,791.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	WHITNEY FOUNDATION 601 CARLSON PKWY, #800	\$ 226,042.	Person Payroli Noncash X
	MINNETONKA, MN 55305		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	WHITNEY FOUNDATION 601 CARLSON PKWY, #800 MINNETONKA, MN 55305	\$ 100,985.	Person Payroll Oncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	WHITNEY FOUNDATION 601 CARLSON PKWY, #800 MINNETONKA, MN 55305	\$ 57,517.	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
5	WHITNEY FOUNDATION 601 CARLSON PKWY, #800 MINNETONKA, MN 55305	\$ <u>90,274.</u>	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	WHITNEY FOUNDATION 601 CARLSON PKWY, #800 MINNETONKA, MN 55305	\$613,678 .	Person Payroll Noncash X (Complete Part II for noncash contributions)

Employer identification number

HICKORY HILL FOUNDATION

Part I	Contributors (see instructions) Use duplicate copies of Part Lif	fadditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	WHITNEY FOUNDATION 601 CARLSON PKWY, #800 MINNETONKA, MN 55305	\$200,200.	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
8	WHITNEY FOUNDATION 601 CARLSON PKWY, #800 MINNETONKA, MN 55305	\$183,109.	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	WHITNEY FOUNDATION 601 CARLSON PKWY, #800 MINNETONKA, MN 55305	s200,414.	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	WHITNEY FOUNDATION 601 CARLSON PKWY, #800 MINNETONKA, MN 55305	\$\$	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
11	WHITNEY FOUNDATION 601 CARLSON PKWY, #800 MINNETONKA, MN 55305	\$\$	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
12	WHITNEY FOUNDATION 601 CARLSON PKWY, #800 MINNETONKA, MN 55305	\$\$	Person Payroll Noncash X (Complete Part II for noncash contributions)

Employer identification number

HICKORY HILI	J FOUNDATION
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Pärt 🧗	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
13	WHITNEY FOUNDATION 601 CARLSON PKWY, #800 MINNETONKA, MN 55305	\$ 95,387.	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
14	WHITNEY FOUNDATION 601 CARLSON PKWY, #800 MINNETONKA, MN 55305	\$178,776.	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions)

Employer identification number

HICKORY HILL FOUNDATION

Partill	Noncash Property (see instructions) Use duplicate copies of Part II if a	dditional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	21,086 SHS METROPOLITAN WEST TOTAL RETURN BOND		
		\$ 226,042.	09/18/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
3	2,950.231 SHS VANGUARD SHORT TERM BOND INDEX FUND ADMIRAL		
		\$100,985.	09/18/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
4	1,195 SHS ISHARES RUSSELL 2000 GROWTH ETF		
		\$ 207,846.	09/18/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
5	1,805 SHS ISHARES RUSSELL 2000 VALUE ETF		
		\$ 215,770.	09/18/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	6,712 SHS ISHARES S&P 100 ETF		
		\$ 747,113.	09/18/17_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	18,367 SHS BLACKSTONE ALT MULTI STRAT FD INST	-	
		\$\$	09/18/17

Employer identification number

HICKORY HILL FOUNDATION

82-0987682

111 0110.	RI MIBB TOORDATION	<u> </u>	0307002
Part III	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
	13,317 SHS BOSTON PARTNERS GLBL EQTY FD INST	_	
8		_	
3		\$\$	09/18/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	17,783 SHS FRANKLIN K2 ALTERNATIVE STRAT FD CL ADV	_	
9			09/18/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	5,924 SHS HARDING LOEVNER GLOBAL EQUITY PORT INST	_	
<u> 10</u>		_	
			09/18/17
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	11,609 SHS MAINSTAY EPOCH GLOBAL EQTY YIELD I	_	
11		-	
	-		09/18/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
12	13,274 SHS MATTHEWS ASIAN GROWTH & INCOME FUND INSTL	-	
		\$\$	09/18/17
(a) No.	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
Part I	10.064 GUG ODDDWIDTWD GWDD DAWY WYD YNDWY W	(Oce man denomal)	
13	10,964 SHS OPPENHEIMER STEELPATH MLP ALPHA Y	_	
		95,387.	09/18/17
			90 990-E7 or 990-DE\ (2017)

723453 11-01-17

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Employer identification number

HICKORY HILL FOUNDATION

art II	Noncash Property (see instructions) Use duplicate copies of Pa		-0967662
	(See institutions) Ose duplicate copies of re	art in additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	11,497.537 SHS WESTWOOD INCOME OPPTY FD INST		
14			
		\$ 178,776.	09/18/17
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Description of noncash property given	(See instructions.)	Date received
		\$	
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Description of Honeasir property given	(See instructions.)	Date received
		\$	
(a)		(c)	
No. from	(b)	FMV (or estimate)	(d)
Part I	Description of noncash property given	(See instructions.)	Date received
(a)		(0)	
No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
Ì			
(a)		(0)	
No.	(b)	(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
Í			
—			
	·	\$	

ne of organizat	•		Employer Identification number		
art III E	HILL FOUNDATION xclusively religious, charitable, etc., contr	ibutions to organizations described in s	82-0987682 ection 501(c)(7), (8), or (10) that total more than \$1,000 for		
th ا	ne year from any one contributor Complete of completing Part III, enter the total of exclusively religious	, charitable, etc., contributions of \$1,000 or less			
<u>U</u>) No.	se duplicate copies of Part III if additiona	al space is needed			
rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
_					
		(e) Transfer of gift			
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
_ _					
		(e) Transfer of gift			
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee		
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Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient TO PROVIDE SUPPORT FOR ETHEL WALKER SCHOOL NONE EXEMPT 230 BUSHY HILL RD PUBLIC CHARITABLE ORGANIZATION 200. SIMSBURY, CT 06070 NONE EXEMPT TO PROVIDE SUPPORT FOR NACL 110 HIGHLAND LAKE RD PUBLIC CHARITABLE ORGANIZATION 200. HIGHLAND LAKE, NY 12743 WAYNE COUNTY HISTORICAL SOCIETY NONE EXEMPT TO PROVIDE SUPPORT FOR PUBLIC CHARITABLE 810 MAIN ST ORGANIZATION 100. HONESDALE, PA 18431 EXEMPT TO PROVIDE SUPPORT FOR SEEDS NONE PUBLIC CHARITABLE 32729 7TH AVE ORGANIZATION MISSION, BRITISH COLUMBIA, CANADA V2V 250. 2B8 NONE -EXEMPT TO PROVIDE SUPPORT FOR WAYNE COUNTY PUBLIC LIBRARY 1406 MAIN ST PUBLIC CHARITABLE ORGANIZATION 500. HONESDALE, PA 18431 DELAWARE HIGHLANDS CONSERVANCY NONE EXEMPT TO PROVIDE SUPPORT FOR PUBLIC CHARITABLE 508 RIVER ST ORGANIZATION 250. HAWLEY, PA 18428 NONE EXEMPT ro provide support for SOUTH AFRICA PARTNERS PUBLIC CHARITABLE 89 SOUTH STREET, SUITE 701 ORGANIZATION 2,500. BOSTON, MA 02111 TO PROVIDÈ SUPPORT FOR WEEKEND OF CHAMBER MUSIC NONE EXEMPT PUBLIC CHARITABLE 330 HAVEN AVENUE, 2N NEW YORK, NY 10033 ORGANIZATION 250. 4,250. Total from continuation sheets

FORM 990-PF G.	AIN OR (LOSS) I	FROM SALE	OF A	SSETS		STA	ATEMEN	т 1
(A) DESCRIPTION OF PROPERTY				IANNER !QUIRED		TE IRED	DATE	SOLI
ISHARES S&P 100 ETF			PUR	CHASED				
(B)	(C)	(D)		(E)			(F)	
GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE SALE	OF	DEPRE	c.	GAIN	OR L	oss
20,108.	19,034.		0.		0.		1	,074
(A) DESCRIPTION OF PROPERTY				IANNER !QUIRED		TE IRED	DATE	SOL
METROPOLITÀN WEST TOTAL			PUR	CHASED				
(B)	(C)	(D)		(E)			(F)	
GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE SALE	OF	DEPRE	c.	GAIN	OR L	oss
34,980.	35,263.		0.		0.		<	<283.
(A) DESCRIPTION OF PROPERTY WMC INTERNATIONAL FUND	_		_AC	ANNER QUIRED CHASED	ACQU	TE IRED	DATE	SOLI
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPREC	c.	GAIN	(F) OR L	OSS
. 0.	0.		0.		0.		<u> </u>	30
(A) DESCRIPTION OF PROPERTY				ANNER QUIRED		TE IRED	DATE	SOL
WMC INTERNATIONAL FUND	_		PUR	CHASED				
(B) GROSS	(C) COST OR	(D) EXPENSE	OF	(E)	,	CATN	(F)	agg
- SALES PRICE 	OTHER BASIS	SALE	0.	DEPRE(0.	GAIN		304
CAPITAL GAINS DIVIDENDS	FROM PART IV					 .	37	,017
TOTAL TO FORM 990-PF, PA					•			,142.

FORM 990-PF		AND INTER	EST FROM SECUR	ITIES S'	TATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
CHARLES SCHWAB CHARLES SCHWAB	36,189. 37,017.		0. 36,189. 7. 0.		
WMC INTERNATIONAL FUND - IHW	442.	•	0. 442.		
TO PART I, LINE 4	73,648.	37,01	7. 36,631.	36,631.	
FORM 990-PF		LEGAL	FEES	S.	ratement 3
DESCRIPTION		(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES		9,745.	0.		9,745.
TO FM 990-PF, PG 1,	LN 16A	9,745.	0.		9,745.
FORM 990-PF	ОТ	HER PROFES	SIONAL FEES	S	ГАТЕМЕНТ 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST-		(D) CHARITABLE PURPOSES
OTHER PROFESSIONAL FI		0. 82.	0. 82.		0.
TO FORM 990-PF, PG 1	, LN 16C	82.	82.		0.
FORM 990-PF		TAX	ES	Si	TATEMENT 5
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX WITHHELD		1,100.	1,100.		0.
TO FORM 990-PF, PG 1	, LN 18	1,100.	1,100.		0.

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
WMC INTERNATIONAL FUND - IHW CHARLES SCHWAB	COST COST	60,651. 3,109,050.	63,056. 3,181,508.
TOTAL TO FORM 990-PF, PART II,	LINE 13	3,169,701.	3,244,564.