HEISLE RFOUN

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

Department of the Treasury Internal Revenue Service

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

► Go to www.irs.gov/Form990PF for instructions and the latest information.

|inning 04/01/17 , and ending 03/31/19

Open to Public Inspection •

D	ORO'	THY & KENNETH HEISLER FOUNDAT	ION		36	-3677275		
_	_	street (or P O box number if mail is not delivered to street address)	Ro	om/suite		hone number (see instructions)	
		LEGENDS DR., state or province, country, and ZIP or foreign postal code	91	<u>0-368-7099</u>				
		HPORT NC 28461		C If exer	mption application is pending, o	check here		
			n of a former public cha	arity	D 1. Fo	reign organizations, check her	m •	
	, icon e	Final return Amended r	•	,		-		
		Address change Name char			reign organizations meeting th % test, check here and attach			
	hook t	ype of organization X Section 501(c)(3) exempt private 1		F 16	ata fa madata a atat a t			
_			e private foundation	04		ate foundation status was term n 507(b)(1)(A), check here	inated under	
		ket value of all assets at J Accounting method	Cash X Accr	ııal -	Fifthet	foundation is in a 60-month ten	mination	
	end of year (from Part II, col (c), Other (specify)							
	ie 16) l		e on cash basis)					
	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements	
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	(b) Net inv		(c) Adjusted net income	for chantable purposes	
	Τ.	the amounts in column (a) (see instructions))					(cash basis only)	
	1	Contributions, gifts, grants, etc., received (attach schedule)	1,263,688					
	2	Check Life foundation is not required to attach Sch B	5,047		5,047			
	3	Interest on savings and temporary cash investments	5,047		3,047	<u> </u>		
	4	Dividends and interest from securities				<u> </u>		
	5a b	Gross rents Net rental income or (loss)	· · · · · · · · · · · · · · · · · · ·					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10		<u>-</u>			l	
	b	Gross sales price for all assets on line 6a		•				
	7	Capital gain net income (from Part IV, line 2)			0			
	8	Net short-term capital gain				0		
	9	Income modifications				<u> </u>		
	10a	Gross sales less returns and allowances						
	b	Less Cost of goods sold	3	- ,		-		
	C	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)			•			
	12	Total. Add lines 1 through 11	1,268,735		5,047	0		
(A	13	Compensation of officers, directors, trustees, etc	0					
sesued	14	Other employee salaries and wages				_		
ē	15	Pension plans, employee benefits				~~~		
	16a	Legal fees (attach schedule)				RECEIV		
e E	ь	Accounting fees (attach schedule) STMT 1	2,225	_				
≟ .	С	Other professional fees (attach schedule)		··		DEC 27	2018 9	
ta	17	Interest				80 523	RS S	
Ę.	18	Taxes (attach schedule) (see instructions)			-	ACTEN		
Ē	19	Depreciation (attach schedule) and depletion				OGDEN.	UI	
Ad	20	Occupancy						
þ	21	Travel, conferences, and meetings		···				
ā	22	Printing and publications Other expenses (at sch.) STMT 2	370			<u> </u>		
Operating and Administrative	24	Other expenses (att sch) STMT 2 Total operating and administrative expenses.	3,0			<u> </u>		
rat		Add lines 13 through 23	2,595		0	0		
be	25	Contributions, gifts, grants paid	71,875	+			71,8	
0	26	Total expenses and disbursements. Add lines 24 and 25	74,470		0	0	71,8	
	27	Subtract line 26 from line 12						
	 a	Excess of revenue over expenses and disbursements	1,194,265	ė.	· .		* h =	
	b	Net investment income (if negative, enter -0-)	-		5,047			
	ı	Adjusted net income (if negative, enter -0-)				0		

	Dart I	art II Balance Sheets Attached schedules and amounts in the description column		Beginning of year	End	f year	
<u> </u>	rait i	should be for end-of-year amounts only (See instructions)		(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash – non-interest-bearing		57 <u>0,</u> 325	1,764,739	1,764,739	
	2	Savings and temporary cash investments					
	3	Accounts receivable ▶			-		
		Less allowance for doubtful accounts ▶					
	4	Pledges receivable ▶					
ŀ		Less allowance for doubtful accounts					
ļ	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other			_		
		disqualified persons (attach schedule) (see		:			
		instructions)			•		
	7	Other notes and loans receivable (att. schedule)		_			
ł		· · · · · · · · · · · · · · · · · · ·	0				
S	8	Inventones for sale or use					
Assets	9	Prepaid expenses and deferred charges					
As	10a	Investments – U S and state government obligations (attach schedule)					
1	b	Investments – corporate stock (attach schedule)		<u> </u>			
	c	Investments – corporate bonds (attach schedule)					
ĺ	11	Investments – land, buildings, and equipment basis					
		Less accumulated depreciation (attach sch.) ▶					
	12	Investments – mortgage loans			·		
	13	Investments – other (attach schedule)	i				
	14	Land, buildings, and equipment basis			_		
		Less accumulated depreciation (attach sch.) ▶					
	15	Other assets (describe SEE STATEMENT 3		149			
	16	Total assets (to be completed by all filers – see the				<u> </u>	
		instructions Also, see page 1, item I)		570,474	1,764,739	1,764,739	
٦	17	Accounts payable and accrued expenses					
	18	Grants payable]	
es	19	Deferred revenue	- {]	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	[]	
a a	21	Mortgages and other notes payable (attach schedule)	- {]	
-	22	Other liabilities (describe ▶)] . !	
Ш	23	Total liabilities (add lines 17 through 22)		0	0		
		Foundations that follow SFAS 117, check here					
es		and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted]	
뗾	25	Temporarily restricted]	
뛰	26	Permanently restricted					
틹		Foundations that do not follow SFAS 117, check here	X				
Ľ.		and complete lines 27 through 31.					
S	27	Capital stock, trust principal, or current funds					
ş	28	Paid-in or capital surplus, or land, bldg , and equipment fund					
Aŝ	29	Retained earnings, accumulated income, endowment, or other funds		570 <u>,</u> 474	1,764,739	╡ .	
Net Assets or Fund Balanc	30	Total net assets or fund balances (see instructions)		570 <u>,</u> 474	1,764,739	· ;	
Z	31	Total liabilities and net assets/fund balances (see	- 1			,	
لے		instructions)		570,474	1,764,739) <u>} </u>	
	Part I						
1		net assets or fund balances at beginning of year - Part II, column (a), line 30 (mu	ust a	igree with			
		of-year figure reported on prior year's return)			1	570,474	
		r amount from Part I, line 27a			2	1,194,265	
		r increases not included in line 2 (itemize)			3	1 701 755	
_		ines 1, 2, and 3			4 5	1,764,739	
5		eases not included in line 2 (itemize)	/L\ '	line 20	5	1/764 700	
_0	rotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column ((D), I	iiile 30	6	1,764,739	

Part IV Capital Gai	ns and Losses for Ta	ax on investment inc	ome					
	describe the kind(s) of property sold (brick warehouse, or common stock,			(b) How acquired P – Purchase D – Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr)	
1a GOLDMAN SACH	S BK - CD			P	09/07	7/17	09/11/17	
b SALLIE MAE B	ANK - CD			P	09/07	7/17	09/11/17	
С								
d								
е								
(e) Gross sales price	(f) Depreciati (or allow	I		other basis ense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))			
a 250,	000			250,000				
ь 180,	000		• •	180,000				
С						•		
d								
e								
Complete only for assets sh	owing gain in column (h) an	d owned by the foundation	on 12/31/69		(1)	Gains (Col	(h) gain minus	
(I) FMV as of 12/31/69	(I) FMV as of 12/31/69 (J) Adjusted basis (k) Excess of col (i) as of 12/31/69 over col (j), if any				(k), but not	less than -0-) or om col (h))		
a						·		
b						•		
С								
d								
е							·	
2 Capital gain net income or (net canital loce) 4	f gain, also enter in Part I, lir f (loss), enter -0- in Part I, lir		"	2			
3 Net short-term capital gain	or (loss) as defined in section	ns 1222(5) and (6)	_				·-	
If gain, also enter in Part I, I	ne 8, column (c) See instru	ictions If (loss), enter -0- in	٦					
Part I, line 8					3			
Part V Qualification	n Under Section 494	0(e) for Reduced Tax	x on Net I	nvestment Incor	ne			
(For optional use by domestic particles) If section 4940(d)(2) applies, lead	-	the section 4940(a) tax on	net investme	nt income)				
Was the foundation liable for the If "Yes," the foundation does not		• •		e penod?			Yes X No	
1 Enter the appropriate amou	nt in each column for each y	ear, see the instructions be	fore making a	any entries				
(a) Base penod years		(b)		(c)		Dist	(d) nbution ratio	
Calendar year (or tax year begin	nning in) Adjust	ed qualifying distributions		e of nonchantable-use assets	5		divided by col (c))	
2016		42,372		515,			0.082249	
2015		51,897		495,			0.104763	
2014		66,094		555,			0.118987	
2013		29,150		603,4			0.048305	
2012		46,639	<u> </u>	640,	567		0.072809	
2 Total of line 1, column (d)					2		0.427113	
3 Average distribution ratio fo	•	·	0, or by the					
number of years the founda	tion has been in existence if	less than 5 years			3	 	0.085423	
4 Enter the net value of nonch	nantable-use assets for 2017	7 from Part X, line 5			4		1,150,019	
5 Multiply line 4 by line 3					5		98,238	
6 Enter 1% of net investment	income (1% of Part I, line 27	7b)			6		50	
7 Add lines 5 and 6					7		98,288	
8 Enter qualifying distributions	from Part XII, line 4				8		71,875	
If line 8 is equal to or greate Part VI instructions	r than line 7, check the box	in Part VI, line 1b, and comp	plete that par	t using a 1% tax rate	See the			

$\overline{}$		HY & KENNETH HEL								age 4
<u>l Pa</u>		ed on Investment Income (Secti				T				
1a	· · · · · ·	ns described in section 4940(d)(2)	_	nd enter "N/A" on I						1
	Date of ruling or determinated		attach copy of letter if ne	ecessary—see in	structions)				 ,	101
þ		neet the section 4940(e) requirem	ents in Part V, check		•	1		···.	:	101
	· · · · · · · · · · · · · · · · · · ·	of Part I, line 27b					-			-
С		ns enter 2% of line 27b Exempt for	oreign organizations, enter	4% of	_					
	Part I, line 12, col (b)					_				^
2		estic section 4947(a)(1) trusts and	d taxable foundations only,	others, enter -0-)		2				0
3	Add lines 1 and 2					3			-	101
4	• •	nestic section 4947(a)(1) trusts an				4				0
5		income. Subtract line 4 from line	3 If zero or less, enter -0-			5				101
6	Credits/Payments			1 - 1						
а		ts and 2016 overpayment credited	i to 2017	6a	•	-				1
b	Exempt foreign organizations			6b		-				
С		extension of time to file (Form 88	68)	6c		-				
d	Backup withholding erroneou	•		6d						
7	Total credits and payments		7							
8		payment of estimated tax. Check		attached		8				
9		5 and 8 is more than line 7, enter			•	9				<u> 101</u>
10		ore than the total of lines 5 and 8,		id	•	10				
11		to be Credited to 2018 estimate	d tax ▶		Refunded >	11				
<u>l Pa</u>		ts Regarding Activities								
1a	During the tax year, did the f	foundation attempt to influence an	y national, state, or local le	egislation or did it					Yes	No
	participate or intervene in an	iy political campaign?						1a	\sqcup	<u>X</u>
b	Did it spend more than \$100	during the year (either directly or	indirectly) for political purp	oses? See the						
	Instructions for the definition	ı						1b		<u>X</u>
	If the answer is "Yes" to 1a o	or 1b, attach a detailed description	n of the activities and copie	es of any materials	i					. 1
	published or distributed by th	he foundation in connection with t	ne activities							
C	Did the foundation file Form	1120-POL for this year?						1c		<u> </u>
d	Enter the amount (if any) of t	tax on political expenditures (sect	ion 4955) imposed during	the year						. 1
	(1) On the foundation >	\$(On foundation manage	rs ▶ \$.]
е		any) paid by the foundation during			ed					.]
	on foundation managers	\$								الـــا
2	Has the foundation engaged	in any activities that have not pre	viously been reported to the	ne IRS?				2		<u>X</u>
	If "Yes," attach a detailed de	scription of the activities							1	. 1
3	Has the foundation made an	ny changes, not previously reporte	d to the IRS, in its governi	ng instrument, arti	cles of					
	incorporation, or bylaws, or o	other similar instruments? If "Yes,	" attach a conformed copy	of the changes				3		X
4a		elated business gross income of S						4a		X
b		urn on Form 990-T for this year?					N/A	4b		
5		tion, dissolution, or substantial contract	ion during the year?					5		X
	If "Yes," attach the statement red									
6		tion 508(e) (relating to sections 49	341 through 4945) satisfied	l either						
	By language in the govern									
	, , , ,	fectively amends the governing in	strument so that no manda	atory directions tha	it					
	-	main in the governing instrument?		-				6	X	
7		east \$5,000 in assets at any time		omplete Part II, co	l (c), and Part X	V		7	X	
8a		e foundation reports or with which								
- Ju	IL	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								. !
b		7, has the foundation furnished a	copy of Form 990-PF to the	ne Attornev Gener	al					
~		as required by General Instruction					N/A	8b		
9	, .	tatus as a private operating found			or		,			
3	•	2017 or the taxable year beginning		-				_		
	complete Part XIV	ZOTA OF THE TAXABLE YEAR DEGILITION	g in 2017 - Oce manuchon	S ISI I BILAIV II	,			9		X
10	•	ibstantial contributors during the to	ay year? If "Vec " attach a	schedule listing th	oir.			 	\vdash	
10	* *	paramiliar communities during the to	za year'ii res, allacil a :	scredule listing th	STMT	4		40	x	
	names and addresses				ウナガイ	-3		10	i 40. i	1

Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?

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)

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N/A

3b

4a

		IN REISLER FOORD					Page 0
Pa		ctivities for Which Form	1720 May Be Re	equired (contin	nued)	1	
5a	• •						
	(1) Carry on propaganda, or otherwise attempt			Y	'es 🗓 No		
	(2) Influence the outcome of any specific public	election (see section 4955), or to	carry on,				1
	directly or indirectly, any voter registration of			<u> </u>	'es 🔀 No		1
	(3) Provide a grant to an individual for travel, st			Y	es 🕱 No		1
	(4) Provide a grant to an organization other that	in a charitable, etc , organization de	escribed in				
	section 4945(d)(4)(A)? See instructions			Y	'es 🔀 No		
	(5) Provide for any purpose other than religious	s, charitable, scientific, literary, or e	ducational		_		1
	purposes, or for the prevention of cruelty to	children or animals?		Y	'es 🛚 X No		- i i
þ	If any answer is "Yes" to 5a(1)-(5), did any of the	ne transactions fail to qualify under	the exceptions desc	cribed in	.		
	Regulations section 53 4945 or in a current notice	ce regarding disaster assistance?	See instructions		N/A	5b	_
	Organizations relying on a current notice regard	ling disaster assistance, check her	e		▶ []		
С	If the answer is "Yes" to question 5a(4), does the	e foundation claim exemption from	the tax				
	because it maintained expenditure responsibility	y for the grant?		N/A 🗌 Y	'es 🗌 No	- 1	1 1
	if "Yes," attach the statement required by Regul	ations section 53 4945-5(d)					
6a	Did the foundation, during the year, receive any	funds, directly or indirectly, to pay	premiums	_	_		1
	on a personal benefit contract?			_ Y	'es 🛚 X No	_	i
b	Did the foundation, during the year, pay premiu	ms, directly or indirectly, on a perso	onal benefit contract	?		6b	X
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was the founda	tion a party to a prohibited tax shel	ter transaction?		'es 🗶 No		
b	If "Yes," did the foundation receive any proceed	s or have any net income attributal	ble to the transaction	1?	N/A	7b	
Pa	rt VIII Information About Officer	s, Directors, Trustees, Fo	undation Mana	gers, Highly F	Paid Employed	es,	
	and Contractors						
1 L	ist all officers, directors, trustees, and found	lation managers and their comp	ensation. See inst	ructions.			
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(a) Eynen	se account,
	(a) Name and address		hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		lowances
			devoted to position		compensation		
TE	RRIE HEISLER ALLISON	SOUTHPORT	TRUSTEE/MNGR				
29	50 LEGENDS DR.	NC 28461	0.00	0	0		0
KE	NNETH M HEISLER-DECEASED 12/16/16	SOUTHPORT	TRUSTEE				
29	50 LEGENDS DR.	NC 28461	0.00	0	0		0
			-				
			1			l	
2	Compensation of five highest-paid employe	es (other than those included o	n line 1 – see instr	uctions). If none,	enter		
	"NONE."		·	1	2	ŀ	
			(b) Title, and average		(d) Contributions to employee benefit	(e) Expen	se account,
	(a) Name and address of each employee paid mon	e than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		lowances
					compensation		
NO	NE		-				
		 				 	
				}			
			+	1		<u> </u>	
			 				
						ļ	
Γota	I number of other employees paid over \$50,000					1	0

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	Information About Officers, Directors, Trustees, Foundation	n Managers, Highly Paid En	nployees,
	and Contractors (continued)		
3 Five highest	t-paid independent contractors for professional services. See instruction		
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		•	
			
Total number of oti	hers receiving over \$50,000 for professional services		<u> </u>
Part IX-A	Summary of Direct Charitable Activities		
	our largest direct chantable activities during the tax year. Include relevant statistical information such as the or beneficianes served, conferences convened, research papers produced, etc.	e number of	Expenses
1 N/A			
•	•		
	<u> </u>		
2			
3			
4			
·		· · · · · · · · · · · · · · · · · · ·	
Part IX-B	Summary of Program-Related Investments (see instruction	ns)	T
	st program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
_			
All other program-relate	ed investments. See instructions		
3			
7-4-1 A 111	1 10		
Total. Add lines 1 t	nrougn 3		1

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	foun	dations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	- }	
	purposes		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	1,167,532
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	1,167,532
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	1,167,532
4	Cash deemed held for chantable activities Enter 11/2% of line 3 (for greater amount, see		<u> </u>
	instructions)	4	17,513
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,150,019
6	Minimum investment return. Enter 5% of line 5	6	57,501
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	ounda	ations
	and certain foreign organizations check here ▶ ☐ and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	57,501
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)		
С	Add lines 2a and 2b	2c	101
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	57,400
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	57,400
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,	Ĭ	
	line 1	7	57,400
	A VII Ovelitaine Distributions (see instructions)		
_ <u></u>	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	71,875
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (pnor IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	71,875
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	71,875
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation	n	

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

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Pa	rt XIII	Undistributed Income	(see instructions)				
	,			(a)	(b)	(c)	(d)
1	Distributa	able amount for 2017 from Part XI	_	Corpus	Years pnor to 2016	2016	2017
	line 7						57,400
2	Undistrib	uted income, if any, as of the end	of 2017				
а	Enter am	ount for 2016 only					•
b	Total for	рпог years 20 , 20	, 20				
3		istributions carryover, if any, to 20			- -		
а	From 20		14,663				
b	From 20	13					
С	From 20	14	38,332				
d	From 20	15	27,134				,
	From 20	1	16,620				
		ines 3a through e	·-	96,749			•
4		g distributions for 2017 from Part	XII,				
	_	\$ 71,875	,				
а		o 2016, but not more than line 2a					
		o undistributed income of prior ye	ars				
		required – see instructions)					
С	•	as distributions out of corpus (Ele	ction				
-		- see instructions)					
d	Applied t	o 2017 distributable amount	[57,400
е	Remainir	ng amount distributed out of corpu	ıs	14,475			
5		istributions carryover applied to 2					
		ount appears in column (d), the s					1
	•	nust be shown in column (a))					•
6		e net total of each column as					
	indicate	d below:					
а	Corpus	Add lines 3f, 4c, and 4e Subtract	line 5	111,224			
		rs' undistributed income. Subtract	ſ				
	line 4b fr	om line 2b					
С	Enter the	amount of prior years' undistribu	ted				
	income f	or which a notice of deficiency has	s				
	been issi	ued, or on which the section 4942	(a)				
	tax has b	een previously assessed					
d	Subtract	line 6c from line 6b Taxable	[
	amount -	- see instructions					
е	Undistrib	uted income for 2016 Subtract lir	ne				
	4a from I	ine 2a Taxable amount – see					
	instructio	ns					
f	Undistrib	uted income for 2017 Subtract lir	nes				
	4d and 5	from line 1 This amount must be	•				
	distribute	ed in 2018					0
7	Amounts	treated as distributions out of coi	rpus				
	to satisfy	requirements imposed by section	۱				
	170(b)(1)	(F) or 4942(g)(3) (Election may b	e				
	required-	-see instructions)					
8	Excess of	listributions carryover from 2012 r	not				
	applied o	n line 5 or line 7 (see instructions)	14,663			
9	Excess	distributions carryover to 2018					
	Subtract	lines 7 and 8 from line 6a		96,561			
10	Analysis	of line 9	, I				
а	Excess f	rom 2013					
b	Excess f	rom 2014	38,332				
C	Excess f	rom 2015	27,134				
d	Excess f	rom 2016	16,620				
е	Excess f	rom 2017	14,475				

iPā	irt XIV Private Operating Fou	indations (see ins	structions and Part	VII-A, question 9)		
1a	If the foundation has received a ruling or d	etermination letter that	it is a private operating			/
	foundation, and the ruling is effective for 2	017, enter the date of t	he ruling	•		
ь	Check box to indicate whether the foundat			d in section 49	942(j)(3) or 4942	?(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Pnor 3 years		
	income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
	investment return from Part X for	<u></u>				
	each year listed					
_	85% of line 2a				/	
b					/	
С	Qualifying distributions from Part XII,					
	line 4 for each year listed		<u></u>	· · ·		
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		ļ			
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)		ļ	,		
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		
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on		l. /			
	securities loans (section		/			
	512(a)(5)), or royalties)		 /			
	(2) Support from general public and 5 or more exempt		/			
	organizations as provided in	,	Y			
	section 4942(j)(3)(B)(iii)	/	1			
	(3) Largest amount of support from	(
	an exempt organization					
	(4) Gross investment income					
P.a	Supplementary Inform	nation (Complete	this part only if t	he foundation ha	d \$5,000 or more	in assets at
	any time during the ye					
1	Information Regarding Foundation Ma		-	-		
a	List any managers of the foundation who h		than 2% of the total cor	ntributions received by	the foundation	
	before the close of any tax year (but only i					
	TERRIE HEISLER ALLIS					
ь	List any managers of the foundation who			(or an equally large po	ortion of the	
	ownership of a partnership or other entity)					
	N/A		_			
2	Information Regarding Contribution, G	rant, Gift, Loan, Scho	olarship, etc., Progran	ns:		
	Check here ▶ X if the foundation only				s not accept	
	unsolicited requests for funds. If the found					
	complete items 2a, b, c, and d See instru		,	J	·	
	The name, address, and telephone number		the person to whom ap	olications should be ad	dressed	
a	N/A	or or ornan agaress or	and poroon to whom op			
	21,7 22					
	The form in which applications should be	submitted and informat	tion and materials they	should include		
•	N/A		and materials and			
	Any submission deadlines		<u>-</u>	· <u>-</u> -		,, <u>-</u> ,
•	N/A					
d	Any restrictions or limitations on awards, s	such as by geographic	al areas, charitable field	s, kinds of institutions.	or other	
-	factors	- 3 Q Q P - 100	,			
	N/A					

Form 990-PF (2017) DOROTHY & KENNETH	HEISLER FOUNDATI	ON 36-3677275		Page 11
Part XV Supplementary Information (co	ntinued)			
3 Grants and Contributions Paid During the		ture Payment	1	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a Paid during the year	or addatantial contributor	W14		
SEE STATEMENT 5				
	1			71,875
				•
,				
-				
			•	
		•		
Total	L		▶ 3a	71,875
b Approved for future payment			, ,	
N/A				
•				
,				
,]			

▶ 3b

Total

Part XVI-	A Analysis of Income-Producing Acti	ivities			-	
	nounts unless otherwise indicated		ed business income	Exclude	d by section 512, 513, or 514	(6)
		(a)	(b)	(c)	(d)	(e) Related or exempt
		(a) Business code	Amount	Exclusion	Amount	function income
1 Program s	service revenue			- COUG		(See instructions)
a				<u> </u>		
				<u> </u>		
				<u> </u>		
f				<u> </u>		
g Fees	and contracts from government agencies					
2 Membersh	nip dues and assessments					
3 Interest or	savings and temporary cash investments			14	5,047	
4 Dividends	and interest from securities					
5 Net rental	income or (loss) from real estate					
a Debt-	inanced property					
b Not de	ebt-financed property					
	income or (loss) from personal property					
	estment income					
8 Gain or (lo	ess) from sales of assets other than inventory					
•	e or (loss) from special events					
	fit or (loss) from sales of inventory					
	enue a					
е						<u> </u>
12 Subtotal /	Add columns (b), (d), and (e)				5,047	0
	l line 12, columns (b), (d), and (e)			<u> </u>	13	5,047
(See workshee	et in line 13 instructions to verify calculations)					-
Part XVI-	B Relationship of Activities to the Ac	complishm	ent of Exempt Pu	ırposes	.	
Line No.	Explain below how each activity for which income is					
	accomplishment of the foundation's exempt purpos	es (other than b	y providing funds for s	uch purp	oses) (See instructions)
N/A						
						
						
					, ,	
						·
			·			
				· · · · · · · · · · · · · · · · · · ·		

	990-PF (20°					TION 36-3			Pa	ige 1
Mra	řtiXVIII	Information Regardate Exempt Organiza	•	insters to and	i i ransactioi	is and Relation	isnips with N	oncharitable		
1	Did the oras	anization directly or indir		un any of the follow	wing with any other	er organization desc	rihed		Yes	No
•	_	01(c) (other than section			•		noeu	. "		1.00
	organization		,,, 00 1(0)(0) (organizations) or in	30000011 021 , 1010	ang to political		î	A.	
а	-	om the reporting founda	ation to a non	charitable exempt	organization of				,,	
	(1) Cash	••••••••••••••••••••••••••••••••••••••						1a(1)		X
	(2) Other a	ssets						1a(2)		X
b	Other trans							1		
		f assets to a nonchanta	ble exempt o	rganization				1b(1)		X
		ses of assets from a no			1			1b(2)		x
		of facilities, equipment,						1b(3)		X
		irsement arrangements						1b(4)	[X
	• •	or loan guarantees						1b(5)		X
		nance of services or me	mbership or	fundraising solicitat	tions			1b(6)		X
С	Sharing of f	acilities, equipment, ma	uling lists, oth	er assets, or paid e	employees			1c		X
d	If the answe	er to any of the above is	"Yes," comp	lete the following s	chedule Column	(b) should always s	how the fair marke	et		
	value of the	goods, other assets, or	r services giv	en by the reporting	foundation If the	e foundation receive	d less than fair ma	rket		
	value in any	transaction or sharing	arrangement	, show in column (d) the value of th	e goods, other asse	ts, or services rece	eived		
	a) Line no	(b) Amount involved	(c) Nam	e of nonchantable exemp	ot organization	(d) Descrip	tion of transfers, transac	tions, and sharing arrangeme	nts	
N/Z	.									
		<u> </u>								
					<u> </u>					
				_ _						
									_	
		<u> </u>								
		<u> </u>								
		<u></u>		·				- -	_	
								·	_	
		<u></u>			***			· <u></u>		
								-		
			ļ							
					<u> </u>					
2a	Is the found	lation directly or indirect	ly affiliated w	ith, or related to, or	ne or more tax-ex	empt organizations				_
		n section 501(c) (other t		501(c)(3)) or in sect	tion 527?			∐ Y	es X	.] No
<u>b</u> _	If "Yes," cor	nplete the following sch	<u>edule</u>							
		(a) Name of organization		(b) Type of o	rganization		(c) Description o	f relationship		
<u></u>	I/A									
		-								
—										
—										
	Linder ne	naities of penury, I declare tha	at I have evamin	ed this cetum, including	accompanying sched	ules and statements and	to the hest of my know	edge and helief it is true		
		nd complete Declaration of p								
C:		~	\sim					May the IRS discuss this n with the preparer shown be		
Sign		, \ \	-(1)	. 🔿					Yes	No
Here		a sa Stara	000	and Lean -	000 1 1-	holbers 1	mpiieme	E /MICD		
	J. J	ature of officer or trustee	N SKILL	TRUE TRUE	Date	700000	TRUSTE	E/MNGR		
	-1 						11110		1	_
	Print/Ty	ype preparer's name			Preparer's signature		7 -	Date	Check	
Paid	D\DE	DOT CTEMPSON OF) A Mem		\\\/\.\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	t/e J	CPA M:	5/ 12/12/18	self-err	ployed
Prepa	rer ROBE	RT CLEMENT, CE		SSOCIATES	CDAIS			D00930	660	

CPA'S

CLEMENT & ASSOCIATES,

1460 RENAISSANCE DR STE 312

PARK RIDGE, IL 60068-1464

Form 990-PF (2017)

P00839669

36-4203360

847-827-8630

PTIN

Firm's EIN ▶

Phone no

Use Only

Firm's name

Firm's address

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

Name of the organization

Employer identification number

DOROTHY & K	ENNETH HEISLER FOUNDATION	36-3677275
Organization type (chec	k one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt chantable trust not treated as a private fou	undation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt chantable trust treated as a private foundate	tion
	501(c)(3) taxable private foundation	
	n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and	l a Special Rule See
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributing or property) from any one contributor. Complete Parts I and II. See instruction contributions.	
Special Rules		
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3 ⁹ sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 and that received from any one contributor, during the year, total contributions of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. C	or 990-EZ), Part II, line of the greater of (1)
contributor, during	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that reg the year, total contributions of more than \$1,000 exclusively for religious, characteristic purposes, or for the prevention of cruelty to children or animals. Complet	antable, scientific,
contribution, during contributions total during the year for General Rule ap	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that reg the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but led more than \$1,000. If this box is checked, enter here the total contributions or an <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the philes to this organization because it received <i>nonexclusively</i> religious, charitable, more during the year.	ut no such that were received parts unless the
990-EZ, or 990-PF), but it	that isn't covered by the General Rule and/or the Special Rules doesn't file Sc must answer "No" on Part IV, line 2, of its Form 990, or check the box on line	e H of its Form 990-EZ or on its

Name of organization

DOROTHY & KENNETH HEISLER FOUNDATION

Employer identification number 36-3677275

Part I	Contributors (see instructions) Use duplicate copies of Pa	art I if additional space is nee	eded
(a) Nò.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KENNETH M. HEISLER CHARITABLE LEAD ANNUITY TRUST DATED 1/27/16 2950 LEGENDS DR. SOUTHPORT NC 28461	\$ 155,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	KENNETH M. HEISLER-DECEASED 12/16/16 IRA DISTRIBUTION THROUGH WELLS FARGO 1099-R ISSUED BY WELLS FARGO WELLS FARGO FEIN: 23-2384840 SOUTHPORT NC 28461	\$ 444,515	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
3 3	Name, address, and ZIP + 4 KENNETH M. HEISLER-DECEASED 12/16/16 IRA DISTRIBUTION THROUGH WELLS FARGO 1099-R ISSUED BY WELLS FARGO WELLS FARGO FEIN: 23-2384840 SOUTHPORT NC 28461	Total contributions \$ 664,023	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
·		\$	Person Payroll Noncash (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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

PAGE 1 OF 1

Page 3

Name of organization

DOROTHY & KENNETH HEISLER FOUNDATION

Employer identification number

36-3677275

Part II	Noncash Property (see instructions) Use duplication		ice is needed. (N/A
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Part III

Name of organization

DOROTHY & KENNETH HEISLER FOUNDATION

Employer identification number 36-3677275

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or
(10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and
the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc.,
contributions of \$1,000 or less for the year (Enter this information once See instructions) ▶
Use duplicate copies of Part III if additional space is needed

(N/A)

	contributions of \$1,000 or less for the year Use duplicate copies of Part III if additional	(Enter this information of	nce See instructions)	s (14//)			
(a) No. from	(b) Purpose of gift	(c) Us	se of gift	(d) Description of how gift is held			
Part I		(e) Tran	sfer of gift				
	Transferee's name, address, and	ZIP + 4	Relation	ship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Us	se of gift	(d) Description of how gift is held			
, arri							
			sfer of gift				
\vdash	Transferee's name, address, and	ZIP + 4	Relationsh	nip of transferor to transferee			
_				T			
(a) No. from Part I	(b) Purpose of gift	(c) Us	se of gift	(d) Description of how gift is held			
	Transferee's name, address, and		sfer of gift Relation	ship of transferor to transferee			
(a) No.	(1) D	4->11-					
from Part I	(b) Purpose of gift	(c) Us	se of gift	(d) Description of how gift is held			
		(e) Transfer of gift					
	Transferee's name, address, and	ZIP + 4	Relations	ship of transferor to transferee			

HEISLERFOUN DOROTHY & KENNETH HEISLER FOUNDATION 36-3677275 36-3677275 FYE: 3/31/2018

	Charitable Purpose		Charitable Purpose	· o	o o
unting Fees	Adjusted Net	Expenses	Adjusted Net	<i>ب</i>	O O
Part I, Line 16b - Accou	Net Investment	Form 990-PF, Part I, Line 23 - Other Expenses	Net Investment	· vv-	\(\sigma\)
Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees	* 2,225 \$ 2,225	Statement 2 - Form 990-PF,	Total	\$ 24 148 195	\$ 370
	Description INDIRECT ACCOUNTING FEES TOTAL		Description	EXPENSES BANK CHARGES POSTAGE TAXES ADMINISTRATION	TOTAL

HEISLERFOUN DOROTHY & KENNETH HEISLER FOUNDATION 36-3677275 Federal Statements

FYE: 3/31/2018

Statement 3 - Form 990-PF, Part II, Line 15 - Other Assets

Description	Be 0	eginning of Year	End of Year		Fair Market Value
INTEREST RECEIVABLE	\$	149	\$	\$_	
TOTAL	\$	149	\$ 0	\$	0

HEISLERFOUN DOROTHY & KENNETH HEISLER FOUNDATION 36-3677275 36-3677275

FYE: 3/31/2018

Statement 4 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors

Name

Address

City, State, Zip

KENNETH M. HEISLER CHARITABLE LEAD
2950 LEGENDS DR.
KENNETH M HEISLER-DECEASED 12/16/16
2950 LEGENDS DR.

SOUTHPORT NC 28461

SOUTHPORT NC 28461

HEISLERFOUN	DOROTHY & KENNETH HEISLER FOUNDATION
36-3677275	Federal Statements

FYE: 3/31/2018

Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager				 Amount
TERRIE	HEISLER	ALLISON,	TRUSTEE/MANAGER	\$
T	OTAL			\$ 0

HEISLERFOUN DOROTHY & KENNETH HEISLER FOUNDATION 36-3677275

36-3677275 FYE: 3/31/2018

Statement 5 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Name	1	Address		
Address	Relationship	Status	Purpose	Amount
WREATHS ACROSS AMERICA	4 POINT ST	STREET		
COLUMBIA ME 04623		PUBLIC ORG.	SUPPORTING MILITARY PERSONNEL	20,000
WINE TO WATER	P.O. BOX 2	2567		
BOONE NC 28607		PUBLIC ORG.	PROVIDE CLEAN WATER & SANITATION	2,000
STRASBURG JAYCEE PARK	P.O. BOX 4	45		
STRASBURG PA 17579		PUBLIC ORG.	PROVIDE RECREATIONAL FACILITIES	2,000
STRASBURG-HEISLER LIBRARY	143 PRECISION AVE.	ION AVE.		
STRASBURG PA 17579		PUBLIC ORG.	EDUCATIONAL RESOURSES & LIBRARY SERV	6,000
NATIONAL ALLIANCE ON MENTAL ILLNES	1536 W. CH	CHICAGO AVE. #		
CHICAGO IL 60642		PUBLIC ORG.	TO PROVIDE AID TO THE MENTALLY ILL	2,375
SACRED HEART CATHOLIC CHURCH	5269 DOSHE	SHER CUT OFF SE		
SOUTHPORT NC 28461		PUBLIC ORG.	ADVANCING RELIGION	7,000
SOUTHPORT OAK INTERFAITH FOODPANTRY	P.O. BOX	711		
OAK ISLAND NC 28465		PUBLIC ORG.	PROVIDE FOOD FOR THE POOR & HUNGRY	2,000
PAWS PLACE	P.O. BOX 6	67		
WINNABOW NC 28479		PUBLIC ORG.	RESCUE & ADOPTION FOR DOGS	1,000
BASILICA SHRINE OF ST MARY	412 ANN ST	STREET		
WILMINGTON NC 28401		PUBLIC ORG.	ADVANCING RELIGION	2,000
USO OF NORTH CAROLINA	P.O. BOX 9	91536		
RALEIGH NC 27675		PUBLIC ORG.	SUPPORTING MILITARY PERSONNEL	10,000
CANCER SURVIVORS PARK ALLIANCE	24 CLEVELA	ELAND STREET		
GREENVILLE SC 29601		PUBLIC ORG.	SUPPORTING CANCER SURVIVORS	10,000
STRASBURG FIRE COMPANY	203 FRANKLIN ST			
STRASBURG PA 17579		PUBLIC ORG.	FIRE PROTECTION	2,000
BOYS & GIRL CLUB OF LANCASTER	116 S. WAT	WATER ST.		
LANCASTER PA 17603		PUBLIC ORG	SOCIAL DEVELOPMENT OF CHILDREN	2,000
FIRST TEE OF BRUNSWICK COUNTY	P.O. BOX 1	1820		
SHALLOTTE NC 28459		PUBLIC ORG.	EDUCATIONAL PROGRAMS TO YOUNG PEOPLE	200
TOTAL			"	71,875

S

Total failure to pay penalty

Form	İr	terest and Pena	Ity Workshe	ets			
990-PF			04/01/17		03	/31/18	2017
ame	For calendar year 2017, or ta	x year beginning	04/01/1/	, and endi	ng US		entification Number
DOROTHY & F	KENNETH HEISLER E	OUNDATION Late Payments and	d Failure to File	e Works	heet	36-367	1275
					No. of		
TAX ON RETU	Description	Amount 101	Balance	101	Days	Rate	Late Interest
	/16-9/30		<u> </u>	101	46	5.00	
INTEREST 10	0/1-12/31			102	92	5.00	
INTEREST 1/	/1-1/31	· ————		103	31	5.00	
		· 			 -		
		· 					
		·			 -		
							
_							
							
							
		<u> </u>					
	<u> </u>	- 			———		
otal interest on la	te payments						2
otal failure to file						_	
		Failure to Pay Pen	alty Workshee	t			
	Description	Amount	Dale	ance	No. of Months		FTD D14.
AX FOR PEN	Description JALTY 8/15-1/31	Amount	Dale	10		•	FTP Penalty
						_	
-						_	
						_	
						_	
						_	
							
						_	
						_	
						_	
						_	