EXTENDED TO NOVEMBER 15, 2019

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

Form 990-PF Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

Ford	alei	ndar year 2018 or tax year beginning			, and ending		
		f foundation	10			A Employer identification	number
_	_	ENGRIN FOUNDATION IN PETER & LUCY ASCOLI				13-6141339	)
		and street (or P O box number if mail is not delivered		address)	Room/suite	B Telephone number	
5	74	4 S. KIMBARK AVE				773-667-42	20
City	or t	own, state or province, country, and ZIP or fo		ostal code		C if exemption application is p	pending, check here
C	ΗI	CAGO, IL 60637-1615	5	<del>_</del>			'
G C	heck	k all that apply Initial return		Initial return of a fo	ormer public charity	D 1 Foreign organizations	s, check here
		Final return		Amended return		2 Foreign organizations me check here and attach co	eeting the 85% test,
		Address change	. ) (0) -	Name change		check here and attach co	omputation
HC	_			empt private foundation Other taxable private founda	()	E If private foundation sta	- i I
		ection 4947(a)(1) nonexempt charitable trust arket value of all assets at end of year   J   A		ng method X Cash	Accrual	under section 507(b)(1)	,, ,,
		Part II, col (c), line 16)		her (specify)	L Accidai	F If the foundation is in a under section 507(b)(1)	
(,,,				nn (d) must be on cash base	s )		(D), check hore
	rt I	Analysis of Revenue and Expenses		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) ma necessarily equal the amounts in column (a))	ay not	expenses per books	income	` income	for charitable purposes (cash basis only)
$\Box$	1	Contributions, gifts, grants, etc., received		673,994.	,	N/A	ł
•	2	Check if the foundation is not required to attach S	ich B				!
	3	Interest on savings and temporary cash investments	ļ	4 0 4	404		(m) multiple (
	4	Dividends and interest from securities		101.	101.		STATEMENT 1
		Gross rents				1 11114	
		Net rental income or (loss)		567,985.		11/911	
an	0a h	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 596, 32	20.	307,303.	,		
Revenue	7	Capital gain net income (from Part IV, line 2)		` '	567,985.	RECEI	VED
8	8	Net short-term capital gain			<del> </del>		08
	9	Income modifications				E NOV 25	2019
	10a	Gross sales less returns and allowances				0	
	b	Less Cost of goods sold		1		OCENTA	
		Gross profit or (loss)				UGLLI	<u> </u> , <u>U</u>
		Other income		1 242 000	F C O O O C		
$\dashv$	_	Total Add lines 1 through 11		1,242,080.	568,086. 0.	<del> </del>	0.
	13 14	Compensation of officers, directors, trustees, etc Other employee salaries and wages		<u>.</u>			0.
		Pension plans, employee benefits					-
ses		Legal fees			<del></del>		
bense		Accounting fees					
EX	C	Other professional fees STMT	2	596.	596.		0.
. Ye	17	Interest	_				
tra	18	Taxes STMT	3	4,000.	0.		0.
IIIs	19	Depreciation and depletion					
틹	20	Occupancy Travelscenforences and meetings					
δĺ	21 22	Travel, conferences, and meetings Printing and publications		-			
gar		Other expenses STMT	4	170.	0.		40.
Ĭ,		Total poperating and administrative	-				
Operating and Administrative Ex		expenses Add lines 13 through 23		4,766.	596.		40.
ō	25	Contributions, gifts, grants paid		679,750.			40. 679,750.
	26	Total expenses and disbursements					
$\Box$		Add lines 24 and 25		684,516.	596.		679,790.
	27			FF			,
		Excess of revenue over expenses and disbursement	ts	557,564.	E 67 400		
		Net investment income (if negative, enter -0-)		,	567,490.	NI / A	, , , , , , , , , , , , , , , , , , ,
	C	Adjusted net income (if negative, enter -0-) -11-18 LHA For Paperwork Reduction Ad	A Blaker	n non instruction -		N/A	Form <b>990-PF</b> (2015)

13-6141339

Page 2

Г		Balance Sheets Attached schedules and amounts in the description	Beginning of year	E	nd of	year
Ц	art	column should be for end of year amounts only	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-bearing	0.	<u> </u>		
		Savings and temporary cash investments	46,896.	33,83	6.	33,836.
		Accounts receivable		······································	$\neg$	
	້	Less allowance for doubtful accounts			-	
	١,				$\dashv$	
	4	Pledges receivable -			-	
		Less allowance for doubtful accounts			$\dashv$	
	5	Grants receivable			$\rightarrow$	
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons				
	7	Other notes and loans receivable			_	
		Less allowance for doubtful accounts				
Ø	8	Inventories for sale or use				
Assets	1	Prepaid expenses and deferred charges			$\neg \uparrow$	
As		Investments - U.S. and state government obligations			$\dashv$	
	ı			<del></del> -	$\dashv$	<del></del>
		Investments - corporate stock			$\dashv$	
	Ι	Investments - corporate bonds				<del></del>
	11	Investments land buildings, and equipment basis			-	
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other				
	14	Land, buildings, and equipment: basis				
		Less accumulated depreciation				
	15	Other assets (describe >			$\neg$	
	l	Total assets (to be completed by all filers - see the			$\neg +$	<del></del>
	'	instructions. Also, see page 1, item I)	46,896.	33,83	6.	33,836.
_	17	Accounts payable and accrued expenses	10,0301	33,03	╧┼	
	l	· · · · · · · · · · · · · · · · · · ·			$\dashv$	
	18	Grants payable		<u>-</u>	-+	
ies	19	<b>1</b>			-+	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ap	21	Mortgages and other notes payable			<b>—</b>	
	22	Other liabilities (describe )				
						Ì
	23	Total liabilities (add lines 17 through 22)	0.		0.	, ]
		Foundations that follow SFAS 117, check here				- 6
		and complete lines 24 through 26, and lines 30 and 31				†
es	24	Unrestricted				•
lances		Temporarily restricted			-	i
æ	ı	Permanently restricted		<del></del>	$\dashv$	<u>-</u>
Ā	20				$\dashv$	
Fund B		<i>,</i>				j
		and complete lines 27 through 31.	<u>,</u>		۱ ۸	. 1
Net Assets or	27	Capital stock, trust principal, or current funds	0.		0.	
SSe	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.		0.	' }
۲,	29	Retained earnings, accumulated income, endowment, or other funds	46,896.	33,83		]
Š	30	Total net assets or fund balances	46,896.	33,83	6.	{
_						ĺ
	31	Total liabilities and net assets/fund balances	46,896.	33,83	6.	[
三	_	Analysis of Changes in Not Assets or Fund B	olonooo			
P	art	Analysis of Changes in Net Assets or Fund B	aidlices			
<del>-</del>	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30			
		st agree with end-of-year figure reported on prior year's return)	<del>-</del> -		1	46,896.
	•			}	⊢	557,564.
		r amount from Part I, line 27a	₽₽₽₩₽₽₽/₽₽₹₽₽₹	MC PDDODG	2	36.
		r increases not included in line 2 (itemize) TIMING DIFF	PV PNC P D \ KOONDI	NG EKKUKS	3	
		lines 1, 2, and 3	~ <b>~</b> ~		4	604,496.
		eases not included in line 2 (itemize)	SEE STA	TEMENT 5	5	570,660.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	<u></u>	6	33,836.
						Form <b>990-PF</b> (2018)

Form 990-PF (2018)

C/O PETER & LUCY ASCOLI

(a) List and describe the I	d Losses for Tax on Ir kind(s) of property sold (for exa buse, or common stock, 200 sh	mple, real esta		( <b>6)</b> H P - D -	ow acquir Purchase Donation	ed		acquired day, yr )	( <b>d)</b> Date sold (mo , day, yr.)
1a						_			
<del></del>	TATEMENT			<b>├</b>		-			
<u>c</u>				<u> </u>					
d	<del></del>			-					<u> </u>
e	AD Decreeding allowed	(-) (		<del></del>			/b) C	 	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					aın or (loss) s (f) mınus (	
		pido		$\dashv$					
3				-					
b		<del> </del>		+					
<u>c</u>	<del>-</del> · · ·	-		$\dashv$				<del> </del>	
e 596,320.			28,33	-					567,985.
Complete only for assets showing ga	un in column (h) and owned by	the foundation		3.		(1)	Coupo /C	'al /h\ sava	
Complete only for assets showing ga		<del></del>						Col. (h) gain not less thar	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (ı) col (ı), ıf any	l			Losses	(from col. (	h))
···_			00: ()); :: u.i.y	_					· · · · · · · · · · · · · · · · · · ·
<u>a</u>				-					
b				-+					
C				$\dashv$					
d				-					E 67 00E
e				_					567,985.
• • • • • • • • • • • • • • • • • • • •	∫ If gain, also enter			}					E 67 00E
2 Capital gain net income or (net capital	loss) { If (loss), enter -0	- ın Part I, line	7	7	2				567,985.
3 Net short-term capital gain or (loss) as	s defined in sections 1222(5) ar	nd (6)		\					
If gain, also enter in Part I, line 8, colu	mn (c).			$\downarrow$				37/3	
If (loss), enter -0- in Part I, line 8   Part V   Qualification Under		. D	(Y N-4		3			N/A	
If section 4940(d)(2) applies, leave this pa Was the foundation liable for the section of If "Yes," the foundation doesn't qualify un	4942 tax on the distributable am		•	od?					Yes X No
1 Enter the appropriate amount in each	column for each year, see the in	nstructions be	fore making any e	ntries					<del></del>
(a)	(b)			(c)				0	(d) oution ratio
Base period years Calendar year (or tax year beginning in	Advisted avalitings dia	tributions	Net value of no		table-use	assets		מוזזגוע (col (b) divi	ided by col. (c))
2017	19	0,293.			82,	918.			2.294954
2016		1,259.				123.			1.626858
2015	26	8,983.			138,				1.945219
2014		7,859.			110,				1.974290
2013		7,305.				061.			3.244387
	—								
2 Total of line 1, column (d)							2		11.085708
3 Average distribution ratio for the 5-year	ar base period - divide the total of	on line 2 by 5.0	), or by the number	er of ve	ears		$\overline{}$		
the foundation has been in existence if	•		,,	o. o. j.	Ju. 0		3		2.217142
and roundation that book in onletenes in	Tiodo thair o youro						١Ť		
4 Enter the net value of noncharitable-us	se assets for 2018 from Part X	line 5					4		80,587.
- Litter the net value of nonerandolo de	10 403013 101 20 10 11 0111 1 41 t X,	mic o					$\vdash$		00,3071
5 Multiply line 4 by line 3							5		178,673.
o Multiply line 4 by line 3							<b>⊢</b>		170,073
6 Enter 1% of net investment income (1	% of Part Line 27h)						6		5,675.
Carter 178 of thet investment income (1	78 OF Fart I, IIIIe 270)						H-*-H		3,073.
7 Add lines 5 and 6							,		184,348.
7 Add lines 5 and 6							7		104,340.
Enter qualifying distributions from De-	+ VII. line 4								679,790.
8 Enter qualifying distributions from Par	•						8	L. <u></u> .	013,130.
If line 8 is equal to or greater than line See the Part VI instructions	/, check the box in Part VI, line	1b, and comp	lete that part using	g a 1%	tax rate.				

LOHENGRIN FOUNDATION INC. C/O PETER & LUCY ASCOLI Form 990-PF (2018) Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 (attach copy of letter if necessary-see instructions) Date of ruling or determination letter 5.675 b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 💹 and enter 1% 1 of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b) 2 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 5,675. 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5,675. Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments 4,188 a 2018 estimated tax payments and 2017 overpayment credited to 2018 6a b Exempt foreign organizations - tax withheld at source 6b 7.000. c Tax paid with application for extension of time to file (Form 8868) 60 d Backup withholding erroneously withheld 6d 11.188 7 7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ if Form 2220 is attached 8 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 5,513 10 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 5,513. Refunded ▶ 11 11 Enter the amount of line 10 to be: Credited to 2019 estimated tax Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Yes No X any political campaign? 1a X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 16 If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities X c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0. (1) On the foundation > \$ 0 • (2) On foundation managers. ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$ X 2 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or 3 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A 4b b If "Yes," has it filed a tax return on Form 990-T for this year? X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: · By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law X 6 remain in the governing instrument? X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered. See instructions. IL,NY b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) X of each state as required by General Instruction G? If "No." attach explanation 8ь 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 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV 9 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

Form **990-PF** (2018)

	LOHENGRIN FOUNDATION INC.				
Fori	n 990-PF (2018) C/O PETER & LUCY ASCOLI	13-6141	339		Page 5
P	art VII-A   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		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory	privileges?			
	If "Yes," attach statement. See instructions		12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address ► N/A		للتنا		
1.4		. <b>▶</b> 773-66	7-4	220	
- 17	Located at >5744 S. KIMBARK AVE., CHICAGO, IL	ZIP+4 ▶60	637	$\frac{-16}{-16}$	15
46	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	211 71 20			Ī
10		- I 15 I	N	/A	
	and enter the amount of tax-exempt interest received or accrued during the year	15		Yes	No
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		_	163	X
	securities, or other financial account in a foreign country?		16		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the				
-	foreign country				
Р	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		τ	<b>V</b> -	<b>A</b> 1 -
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		$\sqcup$	Yes	No
1	a During the year, did the foundation (either directly or indirectly):				
	(1) = 13 - 3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Yes 🗶 No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	<u></u>	Yes 🔀 No			
	<u></u>	Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No		<u>.</u>	
	(5) Transfer any income or assets to a disqualified person (or make any of either available			-	ŀ
	for the benefit or use of a disqualified person)?	Yes 🗶 No			ŀ
	(6) Agree to pay money or property to a government official? (Exception Check "No"				
	if the foundation agreed to make a grant to or to employ the official for a period after				
	termination of government service, if terminating within 90 days )	Yes 🗓 No			
	b 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		
	Organizations relying on a current notice regarding disaster assistance, check here	▶□			
	c 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 2018?		1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	n			
-	defined in section 4942(j)(3) or 4942(j)(5)):				
	a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginn	ına			
	before 2018?	Yes X No			
	If "Yes," list the years > , , , ,				
	b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorre	ict			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and atta				
		N/A	2b		
	statement - see instructions )	IV/ A	20		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here				
	P				
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	v 👿			
		Yes X No			
	b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons a				
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to				
	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 2018.)	N/A	3b		1

4a

4b

Form 4720, to determine if the foundation had excess business holdings in 2018.)

had not been removed from jeopardy before the first day of the tax year beginning in 2018?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

**b** Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 990-PF (2018) C/O PETER & LUCY ASCOLI			13-61413	39	Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y	es 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955), or	r to carry on, directly or indire	ectly,			
any voter registration drive?			es X No		1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es X No	İ	•
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
4945(d)(4)(A)? See instructions		Ye	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fe				
the prevention of cruelty to children or animals?		Ye	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance? See instri	uctions		N/A	5b	<u> </u>
Organizations relying on a current notice regarding disaster assistance, check l	here				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	rom the tax because it maintai	ned		•	
expenditure responsibility for the grant?	N	'/A 🔲 Y	es 🔲 No	- 1.	l' {
If "Yes," attach the statement required by Regulations section 53.4945-5(d)					1 1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			İ	
a personal benefit contract?		Y(	es 🗶 No 📙		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			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	itable to the transaction?		N/A	7b	<u> </u>
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	61,000,000 in remuneration or				•
excess parachute payment(s) during the year?			es X No		$oldsymbol{ol}}}}}}}}}}}}}}}}}}$
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	У		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, and foundation managers and t		L (-) Componention	I (d) o	4 ) [	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Exp account	t, other
* *	to position	`enter -0-)	compensation	allowa	nces
	PRESIDENT, TR	EASURER		ŀ	
5744 S. KIMBARK	1 00				^
CHICAGO, IL 60637	1.00	0.	0.		0.
	SECRETARY				
5744 S. KIMBARK	4 00				^
CHICAGO, IL 60637	1.00	0.	0.		0.
	VICE PRESIDEN	<del>[L</del>			
65 BEACONSFIELD ROAD	4 00		_		^
BROOKLINE, MA 02445	1.00	0.	0.		<u>0.</u>
	luded on line 4) If some	anter UNIONE II	-		
2 Compensation of five highest-paid employees (other than those inc		enter NONE.	(d) Contributions to	(a) Fyr	nense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deterred	(e) Exp	, other
VOLUM	devoted to position		compensation	allowa	nces
NONE					
		-			
				<del> </del>	
Table number of other ampleyees and over \$50,000	<u> </u>	L		L	0
Total number of other employees paid over \$50,000		<del></del>	Form	990-PF	

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	y	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		<del></del>
(a) Name and address of each person paid more than \$50,000 (b) Type of serv	rice	(c) Compensation
NONE		
		1
· · · · · · · · · · · · · · · · · · ·		
T-A-I number of others recovered over \$50,000 for professional convices		▶ 0
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		
	—- <u>-</u> -	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc		Expenses
1 N/A		
2		
1		
3		
4		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
		0.
2	<del></del>	
	—	
All other program-related investments. See instructions		
3 N/A		
2 71/ 17		
	——	
		^
	+	0.
Total. Add lines 1 through 3	<b>•</b>	
		Form <b>990-PF</b> (2018)

13-6141339

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Form 990-PF (2018) Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes, a Average monthly fair market value of securities 1a Ω. b Average of monthly cash balances 1b 814. 1c c Fair market value of all other assets 1d 814. d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e 2 Acquisition indebtedness applicable to line 1 assets 81.814. 3 Subtract line 2 from line 1d 1,227. 4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 80,587. Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 4,029. Minimum investment return Enter 5% of line 5 Part XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.) 4,029. Minimum investment return from Part X, line 6 5,675 2a Tax on investment income for 2018 from Part VI, line 5 2a b Income tax for 2018 (This does not include the tax from Part VI.) 2b 5,675. 2c c Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 679,790. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the

a Suitability test (prior IRS approval required) **b** Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b

Adjusted qualifying distributions Subtract line 5 from line 4

3a 3b 679,790. 4 5,675 5 6

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.

Form **990-PF** (2018)

Form 990-PF (2018)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,				0
line 7				0.
2 Undistributed income, if any, as of the end of 2018			0	
a Enter amount for 2017 only			0.	
<b>b</b> Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2018				
a From 2013 226,588.				
bFrom 2014 216,593.				
c From 2015 267, 041.	j			
dFrom 2016 157,916. eFrom 2017 189,723.				
	1,057,861.		<del></del>	
f Total of lines 3a through e	1,037,001.		<del>-</del>	<u></u>
4 Qualifying distributions for 2018 from	1			
Part XII, line 4: ►\$ 679,790.			0.	
a Applied to 2017, but not more than line 2a			0.	
b Applied to undistributed income of prior	•	0.		
years (Election required - see instructions)		U•		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	0.			0.
d Applied to 2018 distributable amount	679,790.			0.
e Remaining amount distributed out of corpus	0.0			0.
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below.				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,737,651.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
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		ا م		,
amount - see instructions		0.		
e Undistributed income for 2017. Subtract line			•	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				0
be distributed in 2019				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	^			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013	226 500			
not applied on line 5 or line 7	226,588.			
9 Excess distributions carryover to 2019	1 511 062			
Subtract lines 7 and 8 from line 6a	1,511,063.			
10 Analysis of line 9 a Excess from 2014 216,593.				
0.65 0.44				
c Excess from 2016 157, 916. dExcess from 2017 189, 723.				
e Excess from 2018 679,790.				,
0 L A C C C C C C C C C C C C C C C C C C				

LOHENGRIN FOUNDATION INC. Page 10 C/O PETER & LUCY ASCOLI 13-6141339 Form 990-PF (2018) Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the culing is effective for 2018, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5) Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (g)+2015 (a) 2018 (c) 2016 (e) Total (b) 2017 income from Part I or the minimum 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 used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c Complete 3a, b, or c for the 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 unterest, 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) Largest amount of support from an exempt organization (4) Gross investment income Part XV | Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) M. ASCOLI b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address of the person to whom applications should be addressed: N/A b The form in which applications should be submitted and information and materials they should include N/A c Any submission deadlines N/A

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

N/A

Form 990-PF (2018)

C/O PETER & LUCY ASCOLI

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of Purpose of grant or contribution Amount Name and address (home or business) recipient a Paid during the year N/A 501(C)(3) GENERAL FUND SEE ATTACHED 679,750. ► 3a 679,750. Total b Approved for future payment NONE **▶** 3b Total

Form 990-PF (2018)

Part XVI-A **Analysis of Income-Producing Activities** 

Enter gross amounts unless otherwise indicated.	Unrelated business income		Exclu	ded by section 512, 513, or 514	(e)	
	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income	
1 Program service revenue	code		COGE			
<u>a</u>						
b						
C			ļ			
d					—	
e						
f						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments	_		1 4	101		
4 Dividends and interest from securities			14	101.		
5 Net rental income or (loss) from real estate.						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property -						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory			18	567,985.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue						
a						
b						
С						
d						
e						
12 Subtotal. Add columns (b), (d), and (e)		0.		568,086.	0.	
13 Total Add line 12, columns (b), (d), and (e)				13	568,086.	
(See worksheet in line 13 instructions to verify calculations )						
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	_	
Line No Explain below how each activity for which incon			contrib	outed importantly to the accon	nplishment of	
the foundation's exempt purposes (other than b	y providing fu	nds for such purposes).				
	_					
		<u>.</u>				
				<u>.</u>		
		-				
				<del></del>		
				<u></u>		

Form 990-PF (2018) C/O PETER & LUCY ASCOLI 13-6141339

Part XVII | Information Regarding Transfers to and Transactions and Relationships With Noncharitable

	Exempt Organ	izations				•		
1 Did the	organization directly or indi		of the following	ig with any other organizat	ion described in secti	on 501(c)	Ye	s No
	than section 501(c)(3) orgai							1—
•	ers from the reporting found							İ
(1) Ca	ish						1a(1)	X
(2) Ot	her assets						1a(2)	X
<b>b</b> Other t	ransactions							
(1) Sa	les of assets to a noncharita	ble exempt organiza	ation				1b(1)	X
	rchases of assets from a no						1b(2)	X
(3) Re	ental of facilities, equipment,	or other assets					1b(3)	X
(4) Re	embursement arrangements	;					1b(4)	X
( <b>5</b> ) Lo	ans or loan guarantees						1b(5)	X
(6) Pe	rformance of services or me	embership or fundra	ising solicitatio	ins			1b(6)	X
<b>c</b> Sharing	g of facilities, equipment, ma	uling lists, other ass	ets, or paid em	ployees			1c	X
<b>d</b> If the a	nswer to any of the above is	"Yes," complete the	following sche	edule Column (b) should a	lways show the fair m	narket value of the good:	s, other assets,	
or serv	ices given by the reporting f	oundation. If the fol	ındatıon receiv	ed less than fair market val	ue in any transaction	or sharing arrangement	, show in	
column	(d) the value of the goods,							
(a)Line no	(b) Amount involved	(c) Name o		e exempt organization	(d) Description	of transfers, transactions, a	nd sharing arrange	ments
			N/A					
								<del></del>
		· · · · -			-			
	<del></del>							
				<del></del>				
	<del></del>	. "	1 1 11					
	oundation directly or indirec			or more tax-exempt organ	izations described			X No
	on 501(c) (other than sectio		ection 5277				Yes L	A NO
D II Yes,	complete the following sch (a) Name of ord			(b) Type of organization	1 /	(c) Description of relation	nshin	
	N/A	jamzanon		(b) Type of organization	<u> </u>	e y Description of relation	tomp	
	N/A				<del> </del>			
	<del> </del>				<u> </u>		<del></del>	
	<del>/</del>	<u> </u>	•					
	<u> </u>		•					
Unc	der penalties of perjury, I declare	that I have examined th	ıs return, ınc adın	g accompanying schedules and	d statements, and to the	best of my knowledge	day the IDS disease	
Sign and	belief, it is true, correct and cor	nplete Declarate of p	7	n taxpayer) is based on all infor	mation of which preparer	nas any knowledge	May the IRS discu: eturn with the prep shown below? See	parer
Here	<b>★ .</b>	W . 41	7 40	11114/19	PRESID		X Yes	No
1.5	ignature of officer or trustee	1 3		Date	Title			
. 1_	Print/Type preparer's na	ıme	Preparer's s	gnature	Date	Check If PTII		
				120.	اميييرا	self- employed		
Paid	TIMOTHY R	MILLER	\ \frac{1}{2}	I/Rymin	P	P	0093318	6
Prepare					1	Firm's EIN ► 42-		
Use Onl								
	Firm's address ▶ 1	S. WACKER	R DRIVE	, STE 800				
	CHICAGO, IL 60606					Phone no. 312-	634-340	0

Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (mo , day, yr ) (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold (mo, day, yr) 2-story brick warehouse; or common stock, 200 shs MLC Co. 03/16/7808/09/18 1a 110 THERMO FISHER SCIENTIFIC b 450 THERMO FISHER SCIENTIFIC D 03/16/7810/18/18 SHS 01/15/8010/18/18 c 1,500 SHS AMETEK D 10/28/9610/18/18 D d 675 SHS DUN & BRADSTREET e 750 D 09/25/0010/18/18 SHS ILLINOIS TOOL WORKS 03/16/7812/11/18 f 350 SHS THERMO FISHER SCIENTIFIC D 03/16/7812/11/18 SHS THERMO FISHER SCIENTIFIC D 350 h k m n 0 (h) Gain or (loss) (f) Depreciation allowed (g) Cost or other basis (e) Gross sales price plus expense of sale (e) plus (f) minus (g) (or allowable) 25,781 121. 25,660. 102,910. 103,404. 494. b 107,051. 108,199. 1,148. C 90,293. 5,711. 96,004. d 96,948. 20,093. 76,855. е 82,992. 82,608. 384. 82,992. 384. 82,608. g h m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col (h)) Gains (excess of col. (h) gain over col (k), (j) Adjusted basis (k) Excess of col (i) but not less than "-0-") (i) F.M V. as of 12/31/69 as of 12/31/69 over col. (j), if any 25,660. 102,910. b 107,051. С 90,293. d 76,855. е 82,608. 82,608. h 1 m n 0 If gain, also enter in Part I, line 7 567,985. 2 Capital gain net income or (net capital loss) If (loss), enter "-0-" in Part I, line 7 2 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 N/A

## 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

2018

Name of the organization Employer identification number LOHENGRIN FOUNDATION INC. 13-6141339 C/O PETER & LUCY ASCOLI Organization type (check one) Filers of: Section: \_\_\_\_ 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II 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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III 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, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

LOHENGRIN FOUNDATION INC.

C/O PETER & LUCY ASCOLI

Employer identification number

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	onal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LUCY ASCOLI 5744 S. KIMBARK AVE CHICAGO, IL 60637	\$\$	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
2	PETER ASCOLI  5744 S. KIMBARK AVE  CHICAGO, IL 60637	\$ <u>82,210.</u>	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
3	LUCY ASCOLI 5744 S. KIMBARK AVE CHICAGO, IL 60637	- - \$\$060.	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
4	LUCY ASCOLI  5744 S. KIMBARK AVE  CHICAGO, IL 60637	\$ 104,767.	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	LUCY ASCOLI 5744 S. KIMBARK AVE CHICAGO, IL 60637	\$ 109,013.	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
6	LUCY ASCOLI  5744 S. KIMBARK AVE  CHICAGO, IL 60637	\$ 95,884.	Person Payroll Noncash X (Complete Part II for noncash contributions)

Name of organization

LOHENGRIN FOUNDATION INC.

C/O PETER & LUCY ASCOLI

Employer identification number

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	Il space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	PETER ASCOLI  5744 S. KIMBARK AVE  CHICAGO, IL 60637	\$ 25,851.	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	LUCY ASCOLI  5744 S. KIMBARK AVE  CHICAGO, IL 60637	\$ 75,000.	Person X Payroll
(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 Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$	Person Payroll Oncash (Complete Part II for noncash contributions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Name of organization LOHENGRIN FOUNDATION INC. C/O PETER & LUCY ASCOLI

Employer identification number

Part II	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
1	350 SHARES OF THERMO FISHER SCIENTIFIC		
		\$82,210.	12/10/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions )	(d) Date received
2	350 SHARES OF THERMO FISHER SCIENTIFIC		
		\$82,210.	12/10/18
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions )	(d) Date received
3	750 SHARES OF ILLINOIS TOOL WORKS		
		\$99,060.	10/16/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions )	(d) Date received
4	450 SHARES OF THERMO FISHER SCIENTIFIC		
		\$104,767.	10/16/18
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions )	(d) Date received
5	1,500 SHARES OF AMETEK		
		\$ 109,013.	10/16/18
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
6	675 SHARES OF DUN & BRADSTREET		
		\$95,884.	10/16/18
823453 11-08-	18	Schodule B /Form 9	190, 990-FZ, or 990-PF) (2018)

Name of organization
LOHENGRIN FOUNDATION INC.
C/O PETER & LUCY ASCOLI

Employer identification number

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if a	idditional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
7	110 SHARES OF THERMO FISHER SCIENTIFIC		
		\$\$	08/08/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions )	(d) Date received
		\$	

Name of organization

Employer identification number

LOHENGRIN FOUNDATION INC. C/O PETER & LUCY ASCOLI

Part III	Exclusively religious, charitable, etc , contributi	ons to organizations described	d in section 5	01(c)(7), (8), or (10) that total more than \$1,000 for the year			
	from any one contributor Complete columns (a) completing Part III, enter the total of exclusively religious, c	haritable, etc., contributions of \$1,000	e entry For d O or less for the	rganizations ne year (Enterthis info-once)  \$			
4 3 4 3	Use duplicate copies of Part III if additional	space is needed					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
		(e) Transfer of	l f gift				
	Transferee's name, address, ar	nd ZIP + 4	Re	elationship of transferor to transferee			
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			-				
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
		-					
		(e) Transfer of	f gift				
	Topodonials assess address as	.d.710 . 4	D				
ŀ	Transferee's name, address, an	10 ZIP + 4	He	elationship of transferor to transferee			
		J					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, an	d ZIP + 4	Re	elationship of transferor to transferee			
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
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	(e) Transfer of gift						
	Transferee's name, address, an	d 7IP + 4	Relationship of transferor to transferee				
ŀ	Transieree S flame, address, an	WEII TT	rielauoriship or transferor to transferee				
ľ				<del>-</del>			

FORM 990-PF DIVIDE	NDS AND INT	EREST	FROM SECUR	ITIES S'	PATEMENT 1	
GROSS SOURCE AMOUN'	CAPIT. GAIN DIVIDE	S	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
U.S. TRUST	01.	0.	101.	101.	-	
TO PART I, LINE 4	01.	0.	101.	101.		
FORM 990-PF	OTHER PROF	ESSIC	NAL FEES	S.	PATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOK		(B) T INVEST- NT INCOME		(D) CHARITABLE PURPOSES	
MANAGEMENT FEES	59	5.	596.		0.	
TO FORM 990-PF, PG 1, LN 160	59	 6. <del></del>	596.		0.	
FORM 990-PF	T	AXES		Si	PATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOK		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FEDERAL EXCISE TAX	4,000.		0.		0.	
TO FORM 990-PF, PG 1, LN 18	4,00		0.		0.	
FORM 990-PF	OTHER EXPENSE		NSES	Si	CATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOK		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ILLINOIS SECRETARY OF STATE ILLINOIS CHARITY BUREAU BANK FEE	10 130 30		0. 0. 0.		10. 30. 0.	
TO FORM 990-PF, PG 1, LN 23	170	<u> </u>	0.	C	40.	

## LOHENGRIN FOUNDATION INC. C/O PETER & LU

FORM 990-PF	OTHER	DECREASES	IN NET	ASSETS	OR FUND	BALANCES	STATEMENT	5
DESCRIPTION							TRUOMA	,
BASIS ADJUSTME	NT TO	STOCKS CON	TRIBUTE	O AT FAI	R MARKET	VALUE	570,6	60.
TOTAL TO FORM	990-PF	, PART III	, LINE	5		·	570,6	60.