Form 990-PF

Return of Private Foundation
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.

OMB No 1545-0052

		ent of the Treasury Revenue Service		ļ				curity numbers of m990PF for inst			-					Оре	en to F	ublic	Inspectio	n
F	or ca	lendar year 2018	or ta	ax \	ear begi	nning			, 20	18	and	endi	ng						, 20	_
_	me of	foundation PH					MUCI	K CHARITABI						A	Employer ide			numbe	,	_
_		NDATION									_		_		38-7097					
Νι	ımber	and street (or P O bo	x num	iber i	f mail is not	delivered t	o street	address)			Roon	n/suite	!	В	Telephone no	ımbe	ır (see II	nstruction	ons)	
	973	1 HARMONY DE	IVE												(412)	74	9-07	31		
Ci	ty or to	own, state or province	, count	try, a	ind ZIP or fo	reign post	al code								<u>.</u>					_ [
	יידים	rsburgh, pa	152	37										С	If exemption ap pending, check	plicat here.	ION 15	. <b></b> .	▶□	] <b>k</b>
_			132	_				I land all and and	-6 - 6											٦
G	Che	ck all that apply	$\vdash$	_	nitial retu		⊢	Initial return		er p	DIIDIIC	cnar	ity	D	1 Foreign orga				, . ▶∟	ل
			<u> </u>	<b>⊣</b> `	inal retur		⊢	Amended re							2 Foreign orga 85% test, ch				_	٦ .
					Address c			Name chang				<u> </u>	4		computation				▶∟	١
H		ck type of organi										<b>()</b>	┪	E	If private found	ation	status v	vas term	nated	٦.
Ţ	s	ection 4947(a)(1) i	onex	emp	ot charitabl			Other taxable p					4		under section 5	607(b)	(1)(A), cl	neck her	₀.▶∟	┙
ı	Fair	market value of	fall	as	sets at			g method 🔀 0	ash	Acc	rual			F	If the foundation	ו צו תכ	ın a 60-n	nonth ter	mination	_
		of year (from Pa					-	specify)							under section 5	07(b)(	(1)(B), cł	neck her	₃.▶∟	┙
_		· · · · · · · · · · · · · · · · · · ·	694	-			Ţ ·	n (d) must be on c	ash basis )			,					<del></del>			_
G	art	Analysis of Re	/enu	e ar	nd Expen	ses (The	(a	) Revenue and	/b) Not	10.0		<u>,</u>	,	۸ ۸	Admeted act				rsements ritable	
		total of amounts may not necessa	n colu	umn:	s (D), (C), a the amoun	ına (d) ıts ın		expenses per	(b) Net	inv		"	(		Adjusted net income			purp	oses	_
		column (a) (see in						books									(C	ash ba	sıs only)	_ 1
_	1	Contributions, gifts, gran	ts, etc ,	rece	rved (attach so	thedule) .		300,000								]	<b></b>			_1
	2				on is not req		4 1	. 1-	1.5	٠										_'
	3	Interest on savings a															Щ_			_'
	4	Dividends and inte	rest f	rom	securities			14,825		1	4,8	25.					<u> </u>			_}
	5a	Gross rents					<u> </u>										<u> </u>			_ !
	ь	Net rental income or	(loss)																	
ਕੁ	6a	Net gain or (loss) fro	m sale	of a	ssets not on	line 10		4,260	·			•								
Revenue	b	Gross sales price for assets on line 6a	all			7 <b>,</b> 193.	-													
ě	7	Capital gain net in	come	(fro	m Part IV,	line 2) .					4,2	89.								_
œ	8	Net short-term car	otal ga	aın.													<u> </u>			_ !
	9	Income modification		, .					ļ								<u> </u>			-¦
	ilva	Gross sales less returnand allowances		_			ļ <u>.</u>		<b></b>								<u> </u>			_
	ь	Less Cost of goods s	old .	$ldsymbol{le}}}}}}}$			<u> </u>									_	<u> </u>			<u>-</u> !
	С	Gross profit or (los					<u> </u>									-	<b></b>			<u>-</u> !
	11	Other income (atta						319,114	<del> </del>	-	9,1	1.4		7		•	-	<del></del>		
_	12	Total. Add lines 1	throu	gh '	<u> 11</u>	<del></del>	<u> </u>	319,114	_1		. <del>9</del> , μ	14.	Z.	_(	JEIVE	IJ	<del></del>	₩-		
w	13	Compensation of off					-		<del> </del>			$\Box$	_	_			78	╀		_
ses	14	Other employee s			•		<u> </u>	<del></del>	+		- 19	읽니	MA	Y	2 0 20	10	<del>  18</del>	<del> </del>		—
ē	15	Pension plans, em					├		<del> </del>		10	쒸			<b>2</b> 0 20	13	100	$\vdash$		—
X	16a	Legal fees (attach					<u> </u>	3,296	-			<u>-</u>		Ξ		_	<u>88</u>	$\vdash$	3,29	16
Ġ E	b	Accounting fees (					<u> </u>	3,230	+		+		H	iL	<del>)EN 1</del>	17	$\vdash$	<del> </del>		<del>-</del>
Ę	15 16a b c 17 18 19 20 27 22 23 24 25	Other professiona				-	<u> </u>									_	<b></b>	⊢		_
itra	17	Interest						141	-			91.					$\vdash$			
-≌	180	Taxes (attach sche	dule)	(see	e instructio	ins)[4].	<b></b>	141	•			<del></del> -								
Έ	192	Depreciation (atta			•	-	_													
A	30.	Occupancy															<del>                                     </del>			
Б	77	Travel, conference	•		•				<del> </del>											—
ē	2/2	Printing and public						152	<del> </del>						<del></del>		$\vdash$		1:	52.
in a	23	Other expenses (a						102	<del>\</del>						· · · · · · · · · · · · · · · · · · ·		<del></del>			
₹,	24	Total operating a				-		3,589				91.					1		3,44	18.
وِّر	ļ	Add lines 13 throu	-				<u> </u>	70,000									<del> </del>		70,00	
70		Contributions, gift			•		<u> </u>	73,589				91.				0.	$\vdash$		73,44	
ა –	26	Total expenses and dis				24 and 25	-	.5,555	<del>                                     </del>						·	Ť	<del> </del>			<u></u>
	27	Subtract line 26 fr						245,525				į					1			ı
	ł	Net investment in					<u> </u>	2.0,020		-	9,0	23.				-	$\vdash$			_
	ı	Adjusted net inco		-	-				<del>                                     </del>		<u> </u>						<del> </del>			
_	LC	Aujusteu net inco	1116 (1)	. (10)	gauve, ente	,, - <del>0-</del> j	1						_							_

JSA For Paperwork Reduction Act Notice, see instructions.  $^{8E1410\ 1\ 000}\ 8054HC\ 1860$ 

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D = #4 I	Dalamas Chasta	Attached schedules and amounts in the	Beginning of year	End (	of year
Part I	Balance Sneets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bear	ing	4,897.		
2		cash investments	1 61 050 1	52,910.	52,910.
3				,	
		btful accounts ▶			
4			40 p 1 p 2	, ,,,`.	
	-	ibtful accounts			
5					
6		officers, directors, trustees, and other			
·-  ·		tach schedule) (see instructions)		* · · <u>-</u>	
7		receivable (attach schedule)		tor -	
-		ibtful accounts ▶			
रो 8		se			
ssets o œ		deferred charges			
¥ 10a		te government obligations (attach schedule).			
		e stock (attach schedule) ATCH 4		342,985.	389,557.
٥	•	e bonds (attach schedule)			
11	mivestinents - ianu, building	3,	T # - 4	J	
	and equipment basis Less accumulated depreci	ation >			
1.0	(attach schedule)		-		
12		loans			
14	Land, buildings, and	<b>&gt;</b>			1
	equipment basis Less accumulated depreci	ation _			
15	(attach schedule)	<b>&gt;</b> )			
16	Total assets (to be	completed by all filers - see the			
'0		page 1, item I)		647,431.	694,003.
17		accrued expenses	-		1
18		· · · · · · · · · · · · · · · · · · ·			1
	• •				1
Liabilities 20 21 22		ors, trustees, and other disqualified persons			1
E 21		otes payable (attach schedule)			
E 22	~ ~	be $\triangleright$			i
	Other habilities (deserte	,			
23	Total liabilities (add lin	es 17 through 22)	0.	0	
$\neg$		w SFAS 117, check here			
Balances 25 26 27 25 26 26 26 26 26 26 26 26 26 26 26 26 26		through 26, and lines 30 and 31.			1
24	Unrestricted				1
<u>m</u> 25					1
_126					]
or Fund		ot follow SFAS 117, check here			
피	and complete lines 27				
Ö 27	Capital stock trust prin	ncipal, or current funds			
<u>در اور اور اور اور اور اور اور اور اور او</u>		or land, bldg, and equipment fund			i
Net Assets 30 31 31	•	nulated income, endowment, or other funds	401,906.	647,431	
₹ 30	<del>-</del>	d balances (see instructions)	401,906.	647,431	
9 31		I net assets/fund balances (see			1
	instructions)		401,906.	647,431	
Part	III Analysis of Cha	anges in Net Assets or Fund Bala	ances		
		balances at beginning of year - Part		must agree with	
		ed on prior year's return)			401,906
		I, line 27a			245,525
				L	
					647,431
5 De	ecreases not included	ın lıne 2 (ıtemıze) ▶		5_	
<b>6</b> To	tal net assets or fund	balances at end of year (line 4 minu	s line 5) - Part II, column (	b), line 30 6	647,431

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Page	: 3	

orm 990-PF (2018)	s and Losses for Tax on Inve	estment Income	<del></del> -	<del> </del>	Page 3
	scribe the kind(s) of property sold (for e		(b) How	(2) 5242 222	(d) Data sold
• •	prick warehouse, or common stock, 200		P - Purchas	eľ (mo,day,yr) I	( <b>d)</b> Date sold (mo , day, yr )
CDD DADM TH COHE			D - Donatio	<u> </u>	
	DOTE			<del> </del>	
<u>b</u>			<del> </del>	1	
<u>c</u>			<del>                                     </del>		
<u>d</u>					
<u>e</u>	49 Passauchan alleund	(g) Cost or other basis	<del> </del>	(h) Gain or (lo	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale		((e) plus (f) minu	
<u>a</u>					
<u>b</u>					
<u>c</u>			<del></del>		
<u>d</u>			<del> </del>		
Complete only for assets	Ishowing gain in column (h) and owned	by the foundation on 12/31/69	<del> </del>		
Complete only for assets :		T "		l) Gains (Col. (h) ga l. (k), but not less t	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		Losses (from co	
a			<u> </u>		
b			<b> </b>		
С			<u> </u>		
d			ļ		
е			ļ		
Capital gain net income	lf g	aın, also enter ın Part I, line 7			
Capital gain net income	if (l	oss), enter -0- ın Part I, line 7	2		4,289.
	gain or (loss) as defined in sections		1 1		
If gain, also enter in I	Part I, line 8, column (c) See ins	structions If (loss), enter -0- in			
Part I, line 8	<u> </u>	<u> </u>	3		0.
art V Qualification	Under Section 4940(e) for Re	duced Tax on Net Investment I	ncome		
	the section 4942 tax on the distrit n't qualify under section 4940(e). I		ase pen	00,	Yes X No
	mount in each column for each ye		ing any e	entries	
(a)	(b)	(c)		(d)	
Base penod years alendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
2017	53,561.	474,733.			0.112823
2016	47,290.	428,926.			0.110252
2015	39,719.	407,649.			0.097434
2014	42,365.	350,443.			0.120890
2013	14,566.	299,688.			0.048604
Total of line 1, column	(d)		2		0.490003
Average distribution ra	tio for the 5-year base period - divid	te the total on line 2 by 5 0, or by			
	e foundation has been in existence		3		0.098001
Enter the net value of	noncharitable-use assets for 2018	from Part X line 5	4		497,495.
Multiply line 4 by line 3	D		5		48,755.
Enter 1% of net investi	ment income (1% of Part I, line 27b)		6		190.
Add lines 5 and 6			7	<u> </u>	48,945.
	utions from Part XII, line 4				73,448.
Enter qualifying distribition of the Boundary of Part VI instructions	greater than line 7, check the box	c in Part VI, line 1b, and complete			x rate See th
-		c in Part VI, line 1b, and complete	that pa		x rate See 990-PF (2 PAG

Form 9	90-PF (2018) PHILIP AND PATRICIA MUCK CHARITABLE 38-709			age 4
Part		nstru	ctions	<u>s)</u>
1a 1	Exempt operating foundations described in section 4940(d)(2), check here			•
I	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)		-	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1	<u>90.</u>
1	here ▶ X and enter 1% of Part I, line 27b			•
C A	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of $J$ $ullet$ $u$		<u>.</u> .	
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
3	Add lines 1 and 2		1	90.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		1	90.
6	Credits/Payments			
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 153.			i
ь	Exempt foreign organizations - tax withheld at source			ŀ
С	Tax paid with application for extension of time to file (Form 8868) 6c			- 1
d	Backup withholding erroneously withheld		:	1
7	Total credits and payments Add lines 6a through 6d		1	53.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			37.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ Refunded ▶ 11			
Part	VII-A Statements Regarding Activities	<del>, ,</del>		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	$\longmapsto$	Yes	No
	participate or intervene in any political campaign?	1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	1		
	instructions for the definition	1b		<u> X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			]
	published or distributed by the foundation in connection with the activities	<u></u>		
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			İ
	(1) On the foundation ▶\$ (2) On foundation managers ▶\$ 0.			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers   \$0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> </u>
	If "Yes," attach a detailed description of the activities	1		1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			١ا
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u>X</u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	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		~~ <u>~</u> -	١. ا
	conflict with the state law remain in the governing instrument?	6	X	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	<del></del>
	Enter the states to which the foundation reports or with which it is registered. See instructions.			1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		<b>-</b>	
	(or designate) of each state as required by General Instruction G <sup>2</sup> If "No," attach explanation	8b	Х	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			Ţ
	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_		<u> </u>
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
10		10		х
	names and addresses	om 99		

, (1)	t 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 to	he		
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions			X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualif	ied		
	person had advisory privileges? If "Yes," attach statement See instructions		<u></u>	Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	n? 13	X	<u> </u>
	Website address ▶N/A			
14	The books are in care of ▶ PATRICIA MUCK  Telephone no ▶ 412 7	49-073	1	
	Located at ▶9731 HARMONY DRIVE PITTSBURGH, PA ZIP+4 ▶ 15237			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	N	/.A. ▶	· []
	and enter the amount of tax-exempt interest received or accrued during the year			
16	and the second s		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name	of "		1
	the foreign country		<u> </u>	
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		ar .	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	No
1a	During the year, did the foundation (either directly or indirectly)		,	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X N	o	Ί_	1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		"	1
	disqualified person? Yes	0	. .	1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes	0	•	4
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X N	o , '	1 7	ľ. ¶
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	1	1	1
	the benefit or use of a disqualified person)?	o   -	.   '	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		<b>∤</b> ∴	]
	foundation agreed to make a grant to or to employ the official for a period after	}	4	
	termination of government service, if terminating within 90 days)		1.	1
b	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulation		N,	\
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	· ·   1b	14/	1
	Organizations relying on a current notice regarding disaster assistance, check here		+	<b>74</b>
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, the		<del>`</del>	X
	were not corrected before the first day of the tax year beginning in 2018?	1c	٠	-
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a privi	ate 🗂	'	' <b>'</b>
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	ļ		1
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and  6e. Part XIII) for tax year(s) beginning before 2018?	, j-	, m <sub>g</sub> 1, "	1
		°  .	١,	14
	If "Yes," list the years	-	٠,٠	1
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)		1 , •	i i
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)		N/	Δ
_	all years listed, answer "No" and attach statement - see instructions)		┽╌Ѷ҆	1
С			.	1
٥-	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		'	( ; }
Ja			1	î
_	at any time during the year?		1	1
D	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by	ľ	1	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse		1	']
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if		ŀ	}
	foundation had excess business holdings in 2018)		N.	Α
4~	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose	es? 4a	1	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize		127,	<u>                                      </u>
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20			Х

Form **990-PF** (2018)

Par	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Req	ui <b>red</b> (cont	ınued)			
5a	During the year, did the foundation pay or incur any amo						Yes	No
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (section	n 4945(e))?	Yes	X No			
	(2) Influence the outcome of any specific public ele	ction (see section 4	955), or to carry on	. —	_			
	directly or indirectly, any voter registration drive?			Yes	X No			. {
	(3) Provide a grant to an individual for travel, study, or of	her similar purposes?	·	Yes	X No		.	. 1
	(4) Provide a grant to an organization other than a	charitable, etc., org	anization described in	· —				
	section 4945(d)(4)(A)? See instructions				X No			
	(5) Provide for any purpose other than religious, ch	aritable, scientific, l	iterary, or educationa	!				
	purposes, or for the prevention of cruelty to children			Yes	X No	-		-
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail-to	qualify under the ex	ceptions des	scribed in	=		1
	Regulations section 53 4945 or in a current notice regard	ding disaster assistan	ce? See instructions.		/ <u>,</u>	<u>5b</u>	N/	A
	Organizations relying on a current notice regarding disas				'.A ▶l			
c	If the answer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the ta	ax		ľ		
	because it maintained expenditure responsibility for the g	rant?	N/A	Yes	No			
	If "Yes," attach the statement required by Regulations se	ection 53 4945-5(d)				ļ		
6a	Did the foundation, during the year, receive any fun			1 1		1		
	on a personal benefit contract?			Yes	X No			;-
b	Did the foundation, during the year, pay premiums, dire	ctly or indirectly, on a	personal benefit contra	ct?		6b	<b>-</b>	X
	If "Yes" to 6b, file Form 8870					•		
7a	At any time during the tax year, was the foundation a pa			_	X No			 
b	If "Yes," did the foundation receive any proceeds or have			on?	• • • • •	7b	N,	(A.,
8	Is the foundation subject to the section 4960 tax on pay			П.,	Г√Л		1	.
_	remuneration or excess parachute payment(s) during the tyll Information About Officers, Director	year?	ndation Managare	Yes	X No		<u> </u>	<u> </u>
Pai	and Contractors					ioyees,		
1	List all officers, directors, trustees, and foundati	an managere and			4iama			
	List all officers, directors, trustees, and roundar	(b) Title, and average	(c) Compensation	(d) Contribut	tions to	/e) Expos		
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (lf not paid, enter -0-)	(d) Contributemployee beneated deferred con	tions to efit plans	(e) Expen	se acco	unt, es
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee ben	tions to efit plans npensation	(e) Expen	se acco llowance	es
ATC	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contribut employee ben	tions to efit plans	(e) Expen	se acco llowance	unt, es 0.
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee ben	tions to efit plans npensation	(e) Expen other a	se acco	es
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee ben	tions to efit plans npensation	(e) Expen other a	se acco	es
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee ben	tions to efit plans npensation	(e) Expenother a	se acco	es
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee ben	tions to efit plans npensation	(e) Expenother a	se acco	es
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contribut employee ben	tions to efit plans npensation	(e) Expen other a	se acco	es
ATCI	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contribution and deferred cor	ions to effit plans in pensation	other a	llowance	0.
	(a) Name and address  1 5  Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contribution and deferred cor	ions to effit plans in pensation	other a	llowance	0.
ATC	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position  (other than those (b) Title, and average	(c) Compensation (if not paid, enter -0-)  0.	(d) Contributed (d) Contribute	ions to sfit plans in pensation  0.	other a	none,	0.
ATC	(a) Name and address  1 5  Compensation of five highest-paid employees	(b) Title, and average hours per week  (other than those hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contribute and deferred contribute to the contribute of the co	instruction  instruction  tions to efficient and a second a second and	ons). If r	none,	0. enter
ATC	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position  (other than those (b) Title, and average	(c) Compensation (if not paid, enter -0-)  0.	(d) Contribute employee bendered contributed to the contribute of the contribute employee (d) Contribu	instruction  instruction  tions to efficient and a second a second and	ons). If r	none,	0. enter
ATC	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week  (other than those hours per week	(c) Compensation (if not paid, enter -0-)  0.	(d) Contribute and deferred contribute to the contribute of the co	instruction  instruction  tions to efficient and a second a second and	ons). If r	none,	0. enter
ATC	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)  0.	(d) Contribute and deferred contribute to the contribute of the co	instruction  instruction  tions to efficient and a second a second and	ons). If r	none,	0. enter
ATC	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)  0.	(d) Contribute and deferred contribute to the contribute of the co	instruction  instruction  tions to efficient and a second a second and	ons). If r	none,	0. enter
ATC	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)  0.	(d) Contribute and deferred contribute to the contribute of the co	instruction  instruction  tions to efficient and a second a second and	ons). If r	none,	0. enter
ATC	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)  0.	(d) Contribute employee bendand deferred contribute to the contribute employee plans and deferred contribute employee	instruction  instruction  tions to efficient and a second a second and	ons). If r	none,	0. enter
ATC	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)  0.	(d) Contribute employee bendand deferred contribute to the contribute employee plans and deferred contribute employee	instruction  instruction  tions to efficient and a second a second and	ons). If r	none,	0. enter
ATC	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)  0.	(d) Contribute employee bendand deferred contribute to the contribute employee plans and deferred contribute employee	instruction  instruction  tions to efficient and a second a second and	ons). If r	none,	0. enter
ATC	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)  0.	(d) Contribute employee bendand deferred contribute to the contribute employee plans and deferred contribute employee	instruction  instruction  tions to efficient and a second a second and	ons). If r	none,	0. enter
ATCI	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)  0.	(d) Contribute employee bendand deferred contribute to the contribute employee plans and deferred contribute employee	instruction  instruction  tions to efficient and a second a second and	ons). If r	none,	0. enter
2 (a)	(a) Name and address  H 5  Compensation of five highest-paid employees "NONE."  Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position  (other than those hours per week devoted to position	(c) Compensation (if not paid, enter -0-)  0 .  se included on line (c) Compensation	(d) Contribute employee bendand deferred contribute to the contribute employee plans and deferred contribute employee	instruction  instruction  tions to efficient and a second a second and	ons). If r	none,	0. enter

Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."

Total number of others receiving over \$50,000 for professional services . . . . . . . . . . . . . . . . . ▶

List the foundation's four largest direct chantable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc

Part VIII

NONE

N/A

Part IX-B

PHILIP AND PATRICIA MUCK CHARIT	ABLE 38-	-7097514
18)		Page 7
Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	Managers, Highly Paid Emp	<del></del>
ghest-paid independent contractors for professional services. Se	e instructions. If none, enter "NO	NE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
	_	
		0.
	<del></del>	
	<del></del>	
	<del></del>	-
	<del>-</del>	
	<del>-</del>	
of others receiving over \$50,000 for professional services		<u> </u>
Summary of Direct Charitable Activities		
ation's four largest direct chantable activities during the tax year. Include relevant sta and other beneficianes served, conferences convened, research papers produced, etc.	itistical information such as the number of	Expenses
		_
		_
		_
		-
		-
		-
		-
<del></del>		-
Summary of Program-Related Investments (see instruction	ns)	
wo largest program-related investments made by the foundation during the tax year on in		Amount

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See instructions	
3 NONE	
Total. Add lines 1 through 3	
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orm	990-PF (2018)		Pago <b>o</b>
Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions)	ign fo	oundations,
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	413,785.
	Average of monthly cash balances	1b	91,286.
С	Fair market value of all other assets (see instructions).	1c	
d	Total (add lines 1a, b, and c)	1d	505,071.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	505,071.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	7,576.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	497,495.
6	Minimum investment return. Enter 5% of line 5	6	24,875.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here and do not complete this part)	ndatio	ns
1	Minimum investment return from Part X, line 6	1	24,875.
	Tax on investment income for 2018 from Part VI, line 5 2a 190.		
- b	Income tax for 2018 (This does not include the tax from Part VI).		
	Add lines 2a and 2b	2c	190.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	24,685.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	24,685.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	24,685.
Par	t XII 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	73,448.
	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	73,448.
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	190.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	73,258.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	lcula	ting whether the foundation

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

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Рa	rt XIII Undistributed Income (see instr	uctions)		<u> </u>	
		(a) Corpus	(b) Years prior to 2017	(c) 2017	<b>(d)</b> 2018
1	Distributable amount for 2018 from Part XI,				24,685.
	line 7				24,005.
_	Undistributed income, if any, as of the end of 2018				
а	Enter amount for 2017 only	···			
	Total for pnor years 20 16 ,20 15 ,20 14				
	Excess distributions carryover, if any, to 2018				'
	From 2013	•			1
b					
С	From 2015				•
d	From 2016				,
	From 2017	100 002			
	Total of lines 3a through e	109,093.			<u>_</u>
4	Qualifying distributions for 2018 from Part XII,				,
	line 4 ▶ \$ 73,448.			'	ļ <u></u>
	Applied to 2017, but not more than line 2a		<u> </u>		1
b	Applied to undistributed income of prior years (Election required - see instructions)				
	` ' '				1
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2018 distributable amount				24,685.
	Remaining amount distributed out of corpus	48,763.			· i
5	Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )	!	4. 44		
6	Enter the net total of each column as			•	
	indicated below:	157,856.		•	
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	137,636.			1
b	Pnor years' undistributed income Subtract				-
_	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has				}
	been issued, or on which the section 4942(a)				•
	tax has been previously assessed				1
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions				
Ĭ	4a from line 2a Taxable amount - see instructions				
T	Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2019				
7	Amounts treated as distributions out of corpus				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				,
	required - see instructions)				
8	Excess distributions carryover from 2013 not				
	applied on line 5 or line 7 (see instructions)	7,866.			
9	Excess distributions carryover to 2019.	149,990.			]
	Subtract lines 7 and 8 from line 6a		<u> </u>		<u>'</u>
	Analysis of line 9				
	19 7/2				
	26 144				!
	30 128				•
	LACESS 11011 2017				
<u>е</u>	Excess from 2018 48, 763.			<u> </u>	<u> </u>

Part XIV Private Op	erating Foundation	s (see instructions a	and Part VII-A, questi	on 9) N	OT APPLICABLE
1 a If the foundation has	received a ruling or o	determination letter th	at it is a private opera	ating	
foundation, and the rulif	ng is effective for 2018, e	enter the date of the ruling	9	▶	
<b>b</b> Check box to indicate	whether the foundation	is a private operating	foundation described in	section 4942(j)	(3) or 4942(j)(5
2 a Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
justed net income from Part	(a) 2018	(b) 2017	(c) 2016	(d) 2015	( <del>e)</del> i otai
I or the minimum investmen	1	i i			
return from Part X for each	· · · · · · · · · · · · · · · · · · ·				
year listed	· · · · · · · · · · · · · · · · · · ·				· -
<b>b</b> 85% of line 2a		<del></del>	<u> </u>		
C Qualifying distributions from Par	t				
XII, line 4 for each year listed		<del>  \</del>	/ / /	-	
d Amounts included in line 2c not used directly for active conduct of exempt activities					
of exempt activities					
directly for active conduct of					
exempt activities Subtract line	<b>)</b>				
2d from line 2c					<del></del>
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>b</b> "Endowment" alternative test					
enter 2/3 of minimum invest-	<i> </i>				
ment return shown in Part X	·   /				
line 6 for each year listed		· ·			
(1) Total support other than	, ]				
gross investment income	e				
(interest, dividends, rents paymepts on securities					
loans (section 512(a)(5))					
or royalties)					<del></del>
(2) Support from genera public and 5 or more					
exempt organizations as	s				
provided in section 4942 (j)(3)(B)(iii)					
(3) Largest amount of sup	1				
port from an exemp organization					
(4) Gross investment income.					
Part XV Suppleme	ntary Information	Complete this par	rt only if the founda	ation had \$5,000 o	r more in assets
any time	during the year - see	instructions.)			
	ng Foundation Manage				
a List any managers of			ore than 2% of the total	al contributions receiv	ed by the foundati
			more than \$5,000) (S		<b>,</b>
	• • •	•	, , , ,	, , , , ,	
ATTACHM		400/	-6 tht1; -6		· large marker of t
b List any managers o					y large portion or
ownership of a partner	asnip or other entity) t	of which the foundation	on has a 10% or greater	interest	
N/A					
2 Information Regarding	ng Contribution, Gran	rt, Gift, Loan, Scholars	ship, etc., Programs:		
Check here ▶ if	the foundation only	makes contributions	to preselected char	itable organizations a	and does not acc
			rants, etc., to individua		
complete items 2a, b,	, c, and d See instructi	ons			
a The name, address,			the person to whom app	olications should be add	Iressed
ATCH 7			p		
b The form in which ap	nlications should be si	ibmitted and informat	tion and materials they	should include	
b the form in which ap	plications should be st	domitted and informa-	tion and materials they	Silodia ilicidae	
ATCH 7					
c Any submission dead	lines				
ATCH 7					
d Any restrictions or	limitations on award	s, such as by geod	raphical areas, charita	able fields, kinds of	institutions, or ot
factors		, , , , , ,		•	·
ATCH 7					

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-Part XV Supplementary Information (continued)							
3 Grants and Contributions Paid During the Year or Approved for Future Payment  Recipient   If recipient is an individual, show any relationship to any foundation manager or substantial contribution   Foundation status of recipient   Purpose of grant or contribution   Amount   Amou							
Recipient_	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor	recipient	-				
a Paid during the year							
ATCH 8							
• •	•		-				
		:					
Total			▶ 3a	70,000.			
b Approved for future payment							
NONE							
NONE							
	İ						
	1						
Total	· · · · · · · · · · · · · · · · · · ·		▶ 3b	0.			

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Part XVI-A	Analysis of Income-Prod	ucing Act	7100			
	nounts unless otherwise indicated	Unrela (a)	ated business income (b)	(c)	/ section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program s	ervice revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
				<del>-</del>		
				1		
f						
g Fees an	d contracts from government agencies					
Membersh	up dues and assessments					
Interest on	savings and temporary cash investments -			14	14,825.	<del></del>
	and interest from securities			14	14,023.	-
	income or (loss) from real estate					•
	nanced property					
	bt-financed property					
	estment income	·				
	ss) from sales of assets other than inventory		-	18	4,289.	
	e or (loss) from special events · · ·					
	fit or (loss) from sales of inventory					
Other reve	nue a			<del> </del>		
d				+		<u> </u>
Total. Add See workshe Part XVI-B		ulations )	ccomplishment of E	xempt Pur	poses	19,114
2 Subtotal / 3 Total Add See workshe Part XVI-B	line 12, columns (b), (d), and (e) et in line 13 instructions to verify calc	ulations) s to the A	ccomplishment of E	xempt Pur	poses  e) of Part XVI-A contrib	19,114
Subtotal // Total. Add See workshe Part XVI-B	line 12, columns (b), (d), and (e)	ulations) s to the A	ccomplishment of E	xempt Pur	poses  e) of Part XVI-A contrib	19,114
Subtotal // Total. Add See workshe Part XVI-B	line 12, columns (b), (d), and (e)	ulations) s to the A	ccomplishment of E	xempt Pur	poses  e) of Part XVI-A contrib	19,114
Subtotal // Total. Add See workshe Part XVI-B	line 12, columns (b), (d), and (e)	ulations) s to the A	ccomplishment of E	xempt Pur	poses  e) of Part XVI-A contrib	19,114
Subtotal // Total. Add See workshe Part XVI-B	line 12, columns (b), (d), and (e)	ulations) s to the A	ccomplishment of E	xempt Pur	poses  e) of Part XVI-A contrib	19,114
Subtotal // Total. Add See workshe Part XVI-B	line 12, columns (b), (d), and (e)	ulations) s to the A	ccomplishment of E	xempt Pur	poses  e) of Part XVI-A contrib	19,114
Subtotal // Total. Add See workshe Part XVI-B	line 12, columns (b), (d), and (e)	ulations) s to the A	ccomplishment of E	xempt Pur	poses  e) of Part XVI-A contrib	19,114
Subtotal // Total. Addice workshe Part XVI-B	line 12, columns (b), (d), and (e)	ulations) s to the A	ccomplishment of E	xempt Pur	poses  e) of Part XVI-A contrib	19,114
Subtotal // Total. Addiee workshe Part XVI-B	line 12, columns (b), (d), and (e)	ulations) s to the A	ccomplishment of E	xempt Pur	poses  e) of Part XVI-A contrib	19,114
Subtotal // Total. Addiee workshe Part XVI-B	line 12, columns (b), (d), and (e)	ulations) s to the A	ccomplishment of E h income is reported it purposes (other than	xempt Pur	poses  e) of Part XVI-A contrib	19,114
Subtotal // Total. Add ee workshe art XVI-B	line 12, columns (b), (d), and (e) et in line 13 instructions to verify calc  Relationship of Activitie  Explain below how each activities	ulations) s to the A	ccomplishment of E h income is reported it purposes (other than	xempt Pur	poses  e) of Part XVI-A contrib	19,114
Subtotal // Total. Add ee workshe art XVI-B	line 12, columns (b), (d), and (e) et in line 13 instructions to verify calc  Relationship of Activitie  Explain below how each activities	ulations) s to the A	ccomplishment of E h income is reported it purposes (other than	xempt Pur	poses  e) of Part XVI-A contrib	19,11
Subtotal // Total. Addiee workshe Part XVI-B	line 12, columns (b), (d), and (e) et in line 13 instructions to verify calc  Relationship of Activitie  Explain below how each activities	ulations) s to the A	ccomplishment of E h income is reported it purposes (other than	xempt Pur	poses  e) of Part XVI-A contrib	19,114
Subtotal // Total. Addiee workshe Part XVI-B	line 12, columns (b), (d), and (e) et in line 13 instructions to verify calc  Relationship of Activitie  Explain below how each activities	ulations) s to the A	ccomplishment of E h income is reported it purposes (other than	xempt Pur	poses  e) of Part XVI-A contrib	19,114
Subtotal // Total. Addiee workshe Part XVI-B	line 12, columns (b), (d), and (e) et in line 13 instructions to verify calc  Relationship of Activitie  Explain below how each activities	ulations) s to the A	ccomplishment of E h income is reported it purposes (other than	xempt Pur	poses  e) of Part XVI-A contrib	19,114
Subtotal // Total. Add See workshe Part XVI-B	line 12, columns (b), (d), and (e) et in line 13 instructions to verify calc  Relationship of Activitie  Explain below how each activities	ulations) s to the A	ccomplishment of E h income is reported it purposes (other than	xempt Pur	poses  e) of Part XVI-A contrib	19,114
Subtotal // Total. Add See workshe Part XVI-B	line 12, columns (b), (d), and (e) et in line 13 instructions to verify calc  Relationship of Activitie  Explain below how each activities	ulations) s to the A	ccomplishment of E h income is reported it purposes (other than	xempt Pur	poses  e) of Part XVI-A contrib	19,114
2 Subtotal // 3 Total. Add See workshe Part XVI-B	line 12, columns (b), (d), and (e) et in line 13 instructions to verify calc  Relationship of Activitie  Explain below how each activities	ulations) s to the A	ccomplishment of E h income is reported it purposes (other than	xempt Pur	poses  e) of Part XVI-A contrib	19,114
2 Subtotal // 3 Total. Add See workshe Part XVI-B	line 12, columns (b), (d), and (e) et in line 13 instructions to verify calc  Relationship of Activitie  Explain below how each activities	ulations) s to the A	ccomplishment of E h income is reported it purposes (other than	xempt Pur	poses  e) of Part XVI-A contrib	19,114
2 Subtotal // 3 Total. Add See workshe Part XVI-B Line No.	line 12, columns (b), (d), and (e) et in line 13 instructions to verify calc  Relationship of Activitie  Explain below how each activities	ulations) s to the A	ccomplishment of E h income is reported it purposes (other than	xempt Pur	poses  e) of Part XVI-A contrib	19,114
2 Subtotal // 3 Total. Add See workshe Part XVI-B Line No.	line 12, columns (b), (d), and (e)	ulations) s to the A	ccomplishment of E h income is reported it purposes (other than	xempt Pur	poses  e) of Part XVI-A contrib	19,114

Page 13 Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

1	ın sec	tion 501(c) (other	•	ngage in any of the f i01(c)(3) organizatio		-		Yes	No
_		eations?	a foundation to a	noncharitable exem	at organization of				
а		•	•		•			19(1)	X
									X
b		ransactions							
~			ncharitable exemi	pt organization				1 1	x <sup>'</sup>
				le exempt organization				I I	Х
				ssets					Х
									X
	(5) Loa	ins or loan guarante	es					1b(5)	Х
	(6) Per	formance of service	es or membership	or fundraising solicita	itions			1b(6)	X
	-		•	other assets, or paid					X
ď				" complete the follo					
				es given by the repo					
	$\overline{}$		T	ment, show in colum					
(a) L	ne no	(b) Amount involved	(c) Name of nor	chantable exempt organiza	tion (d) Desci	nption of transfe	ers, transactions, and shar	ing arrangem	ents
		N/A		<del></del>	N/A	<del></del>		<del></del> -	
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	describ	•	) (other than sect	ated with, or related on 501(c)(3)) or in se				Yes [	X No
		(a) Name of organization		(b) Type of organ	ization		c) Description of relations	hip	
		<del></del>							
_									
Sigr	correc			this return, including accompayer) is based on all information			May the IRS	discuss this	retum
Her	e Sign	nature of officer or trustee	1.00.0	Date	Title		See instruction	s X Yes	No
		Pnnt/Type preparer's na	ime	Prepare Signature		Date	Check If F	אודי	
Paic	i	EDWARD F BACH				5/13/201	self-employed	P000867	30
Pre	parer		RNST & YOUNG	U.S. LLI	7000	,	Firm's EIN ▶ 34-65		
Use	Only		LOO ONE PPG						
_				PA	152	22	Phone no 412-64	44-7800	
	_				-			m 990-PF	/2018

990-PF PHILIP AND PATRICIA MUCK CHARITABLE 38-7097514
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

CP	APITAL GAI	M2 AND LC	SSES FOR	CIAX ON	INAE2TI	P		
Kind of P	roperty		Descr	iption		or C	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
7,193.		PUBLICLY TR	ADED SECURIT	'IES	•	Р		VARIOUS
	-		-					-
TOTAL GAIN(L	oss)				• • • • •		4,289.	
						,		
:								

### Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Employer identification number

PHILIP AND PATRICIA FOUNDATION	A MUCK CHARITABI	.E	38-7097514
Organization type (check o	ne)		<u> </u>
Filers of:	Section:		
Form 990 or 990-EZ	501(c)(	) (enter number) organization	
	4947(a)(1)	nonexempt charitable trust not treated as a private for	undation
	527 politic	al organization	
Form 990-PF	X 501(c)(3) e	exempt private foundation	
	4947(a)(1)	nonexempt charitable trust treated as a private founda	tion
	501(c)(3) t	axable private foundation	
Check if your organization  Note: Only a section 501(c instructions		zation can check boxes for both the General Rule and a	Special Rule See
	y or property) from any	0-EZ, or 990-PF that received, during the year, contrib y one contributor Complete Parts I and II See instruction	
Special Rules			
regulations under 13, 16a, or 16b,	r sections 509(a)(1) an and that received from	n 501(c)(3) filing Form 990 or 990-EZ that met the 33 and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 any one contributor, during the year, total contribution Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1	or 990-EZ), Part II, line s of the greater of (1)
contributor, durir literary, or educa	ng the year, total contri tional purposes, or for	n 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that butions of more than \$1,000 exclusively for religious, c the prevention of cruelty to children or animals Complibutor name and address), II, and III	haritable, scientific,
contributor, during contributions total during the year for General Rule app	ig the year, contribution ided more than \$1,000 or an exclusively religion blies to this organization.	n 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that ins exclusively for religious, charitable, etc., purposes, but this box is checked, enter here the total contribution us, charitable, etc., purpose. Don't complete any of the in because it received nonexclusively religious, charitable.	ut no such is that were received parts unless the e, etc , contributions
		General Rule and/or the Special Rules doesn't file Sch	

**Schedule of Contributors** 

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

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

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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

Name of organization PHILIP AND PATRICIA MOCK CHARITABLE Name of organization FOUNDATION

Employer identification number 38-7097514

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1	PHILIP AND PATRICIA MUCK, TRUSTEES  9731 HARMONY DRIVE PITTSBURGH, PA 15237	<b>\$ 3</b> 00,000.	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)				
(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)				

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

Name of organization PHILIP AND PATRICIA MUCK CHARITABLE FOUNDATION

Employer identification number 38-7097514

D - 4 11	Alamanah Duamanta	. / :		pies of Part II if additiona	1 :
2274	Noncash Proberty	risee instructions	a - Use oublicate co	oles of Part II if additiona	i space is needed
1 41 ( )		(000 111011 00110110	y. Odd dapmaata da	piece er i art ii ii acciaeria	

Part II	Noncash Property (see instructions). Use duplicate copies	orrait ii ii additoriai space is rie	-ueu
(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
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<del></del>		   \$	

Name of org	ganization PHILIP AND PATRICIA MUC FOUNDATION	CK CHARITABLE	-	Employer identification number 38-7097514
_	Exclusively religious, charitable, etc., (10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the Use duplicate copies of Part III if additional additional contributions.	he year from any one co ons completing Part III, ent e year. (Enter this informati	<b>ntributor</b> . Com er the total of e	ed in section 501(c)(7), (8), or applete columns (a) through (e) and exclusively religious, charitable, etc.
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of gift	Relationshi	p of transferor to transferee
(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	Relationsh	p of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of gift		In of transferor to transferor
	i ransteree's name, address, an	0 21P + 4	Relationsn	lp of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of gift		ip of transferor to transferee
		M ME T T	Neiationsfi	p or transfer to transfere

ATTACHMENT 1

38-7097514

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FEES
ACCOUNTING
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CHARITABLE	3,296.	3,296.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	3,296.	3,296.
		TOTALS
DESCRIPTION	TAX PREPARATION FEES	

ACHMENT 1 PAGE 21

ATTACHMENT 2

PHILIP AND PATRICIA MUCK CHARITABLE

# PART I - TAXES FORM 990PE,

NET INVESTMENT INCOME	91.	91.
REVENUE AND EXPENSES PER BOOKS	91.	141.
		TOTALS
DESCRIPTION	FOREIGN TAXES PAID 2018 ESTIMATED TAXES	

38-7097514

ATTACHMENT 3

EXPENSES
- OTHER
Н
PART
990PF,
ORM

		FEE
	EXPENSE	REGISTRATION
DESCRIPTION	MISCELLANEOUS	PA CHARITABLE

TOTALS

REVENUE AND	EXPENSES	PER BOOKS	137.	15.
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CHARITABLE PURPOSES 13.	ਜ
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# FORM 990PF, PART II - CORPORATE STOCK

ENDING <u>FMV</u>	15,551. 20,005. 9,928. 7,955. 23,906. 80,972. 11,283. 14,504. 14,504. 16,062. 16,062. 17,894. 28,532. 56,715. 11,394. 20,241. 5,532.
ENDING BOOK VALUE	3,868. 4,236. 3,180. 11,246. 13,459. 13,732. 13,732. 10,953. 10,925. 22,720. 10,925. 10,960. 2,976. 8,316. 3,524.
BEGINNING BOOK VALUE	3,868. 4,236. 3,180. 11,246. 13,436. 13,732. 9,534. 32,038. 11,498. 11,498. 10,925. 10,925. 10,925. 2,976. 8,316. 2,965. 3,524.
DESCRIPTION	ABBOTT LABORATIES ABBVIE INC COM AMGEN INC COCA COLA DUKE ENERGY CORP NEW COM ISHARES TR RUSSELL 200 INDEX JOHNSON & JOHNSON PROCTER INC PINCO INCOME STRATEGY FUND PROCTER & GAMBLE CO VERIZON COMMUNICATIONS ABERDEEN SELECT INTL EQUITY CALAMOS GROWTH CLASS A DODGE & COX INTL STOCK FUND FIDELITY ADVISOR SMALL CAP CL PIMCO TOTAL RETURN INSTL T ROWE PRICE MID CAP VALUE ALTRIA GROUP INC AT&T INC COM ISIN KRAFT HEINZ CO COM OLD REPUBLIC INTL CORP PHILIP MORRIS INTL INC COM GRAMERCY PPTY TR COM KIMBERLY CLARK CORP PUBLIC STORAGE COM ENBRIDGE INC COM

ATTACHMENT 5	CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES	.0	.0	0.
	COMPENSATION	.0	· o	0.
FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE 1.00	TRUSTEE 1.00	GRAND TOTALS
FORM 990PF, PART VIII - LIST O	NAME AND ADDRESS	PHILIP F. MUCK 9731 HARMONY DRIVE PITTSBURGH, PA 15237	PATRICIA S. MUCK 9731 HARMONY DRIVE PITTSBURGH, PA 15237	

38-7097514

ATTACHMENT 6

# FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

PHILIP & PATRICIA MUCK 9731 HARMONY DRIVE PITTSBURGH, PA 15237 - -

> PAGE 26 V 18-4.5F 8054HC 1860

ATTACHMENT 7

## FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

MRS. PATRICIA MUCK 9731 HARMONY DRIVE PITTSBURGH, PA 15237 412-297-4841

FORM IN WHICH APPLICATION SHOULD BE SUBMITTED AND INFORMATION THEY SHOULD INCLUDE:

THERE ARE NO REQUIRED FORMAL FORMS BUT MUST SUBMIT DOCUMENTATION OF CHARITABLE PURPOSES OF GRANT AND TAX-EXEMPT STATUS OF THE ORGANIZATION.

SUBMISSION DEADLINES:

THERE ARE NO SUBMISSION DEADLINES.

RESTRICTIONS OR LIMITATIONS ON AWARDS:

THERE ARE NO RESTRICTIONS ON AWARDS.

8054HC 1860 V 18-4.5F PAGE 27

PHILIP AND PATRICIA MUCK CHARITABLE

38-7097514

ATTACHMENT 8

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
COVENANT HOUSE TIMES SQUARE STATION, PO BOX 731 NEW YORK, NY 10108	NONE PC	GENERAL OPERATIONS	5,000
SISTERS OF ST JOSEPH 1020 STATE STREET BADEN, PA 15005	NONE PC	GENERAL OPERATIONS	2,030
LITTLE SISTERS OF THE POOR 1028 BENTON AVE PGH., PA 15212	NONE PC	GENERAL OPERATIONS	3,030
OHIO UNIVERSITY COLLEGE OF BUSINESS, COPELAND HALL ATHENS, OH 45701	NONE PC	GENERAL OPERATIONS	40,000
GUADALUPE SOCIAL SERVICES 211 NINTH STREET IMMOKALEE, FL 34142	NONE.	FOOD KITCHEN	2,030
SAINTS JOHN & PAUL 343 SOUTH MAIN STREET COVENTRY, RI 02816	NONE PC	GENERAL OPERATIONS	5,000

CHARITABLE
MUCK
PATRICIA
AND
PHILIP

2018 FORM 990-PF

38-7097514

ATTACHMENT 8 (CONT'D)

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

AMOUNT	1, 000	1,000	1,000	10,000
PURPOSE OF GRANT OR CONTRIBUTION	GENERAL OPERATIONS	GENERAL OPERATIONS	GENERAL OPERATIONS	GENERAL OPERATIONS
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE PC	NONE PC	NONE PC	NONE PC
RECIPIENT NAME AND ADDRESS	WOUNDED WARRIOR 4899 BELFORT ROAD SUITE 300 JACKSONVILLE, FL 32256	JUDICIAL WATCH 425 THIRD ST, SW STE 800 WASHINGTON, DC 20024	HERITAGE FOUNDATION 214 MASSACHUSETTS AVE NE WASHINGTON, DC 20002	ABIDING MISSIONS (BETHLEHEM LUTHERAN CHURCH) 731 EXCELSIOR ST PITTSBURGH, PA 15210

TOTAL CONTRIBUTIONS PAID

70,000

ATTACHMENT 8 PAGE 31

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