






For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation DODSON FOUNDATION INC C/O MARK R DODSON		A Employer identification number 39-1694304	
Number and street (or P O box number if mail is not delivered to street address) 347 PLYMOUTH DRIVE		Room/suite	B Telephone number (see instructions) (312) 307-2326
City or town, state or province, country, and ZIP or foreign postal code INVERNESS, IL 60067			
G Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 30,884,222	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) (Part I, column (d) must be on cash basis )		
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	29,135			
	2 Check ▶ <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments	48,858	47,518		
	4 Dividends and interest from securities . . .	530,704	530,704		
	5a Gross rents . . . . .				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	-241,140			
	b Gross sales price for all assets on line 6a 3,739,950				
	7 Capital gain net income (from Part IV, line 2) . . .		0		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .	 -201,308	0		
	12 Total. Add lines 1 through 11 . . . . .	166,249	578,222		
	13 Compensation of officers, directors, trustees, etc	125,000	93,750		31,250
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .	 5,888	2,944		2,944
	c Other professional fees (attach schedule) . . . . .	 4,930	4,930		0
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . .	 209,907	6,147		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	 60,405	60,405		0
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	406,130	168,176		34,194
	25 Contributions, gifts, grants paid . . . . .	1,550,000			1,550,000
	26 Total expenses and disbursements. Add lines 24 and 25	1,956,130	168,176		1,584,194
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-1,789,881			
	b Net investment income (if negative, enter -0-)		410,046		
c Adjusted net income (if negative, enter -0-) . . .					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	<b>1</b>	Cash—non-interest-bearing . . . . .					
	<b>2</b>	Savings and temporary cash investments . . . . .	3,694,961	2,454,655	2,454,655		
	<b>3</b>	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	<b>4</b>	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	<b>5</b>	Grants receivable . . . . .					
	<b>6</b>	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .					
	<b>7</b>	Other notes and loans receivable (attach schedule) ▶ _____ 139,500 Less allowance for doubtful accounts ▶ _____ 0	325,500	139,500	139,500		
	<b>8</b>	Inventories for sale or use . . . . .					
	<b>9</b>	Prepaid expenses and deferred charges . . . . .					
	<b>10a</b>	Investments—U S and state government obligations (attach schedule)					
	<b>b</b>	Investments—corporate stock (attach schedule) . . . . .	18,522,359	20,760,482	23,662,879		
	<b>c</b>	Investments—corporate bonds (attach schedule) . . . . .					
	<b>11</b>	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____	1,894,344				
	<b>12</b>	Investments—mortgage loans . . . . .					
	<b>13</b>	Investments—other (attach schedule) . . . . .	9,303,306	8,594,886	4,627,188		
	<b>14</b>	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
<b>15</b>	Other assets (describe ▶ _____)						
<b>16</b>	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	33,740,470	31,949,523	30,884,222			
Liabilities	<b>17</b>	Accounts payable and accrued expenses . . . . .					
	<b>18</b>	Grants payable . . . . .					
	<b>19</b>	Deferred revenue . . . . .					
	<b>20</b>	Loans from officers, directors, trustees, and other disqualified persons					
	<b>21</b>	Mortgages and other notes payable (attach schedule) . . . . .					
	<b>22</b>	Other liabilities (describe ▶ _____)					
	<b>23</b>	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0			
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>						
	<b>24</b>	Unrestricted . . . . .					
	<b>25</b>	Temporarily restricted . . . . .					
	<b>26</b>	Permanently restricted . . . . .					
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>						
	<b>27</b>	Capital stock, trust principal, or current funds . . . . .	0	0			
	<b>28</b>	Paid-in or capital surplus, or land, bldg, and equipment fund	0	0			
	<b>29</b>	Retained earnings, accumulated income, endowment, or other funds	33,740,470	31,949,523			
<b>30</b>	<b>Total net assets or fund balances</b> (see instructions) . . . . .	33,740,470	31,949,523				
<b>31</b>	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	33,740,470	31,949,523				

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b>	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	33,740,470
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b>	-1,789,881
<b>3</b>	Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	0
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b>	31,950,589
<b>5</b>	Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	1,066
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	31,949,523

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1a</b> See Additional Data Table				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	<b>2</b>	-241,140
<b>3</b> 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) (see instructions) If (loss), enter -0- in Part I, line 8		<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries


(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	1,285,057	30,009,732	0 042821
2016	1,235,031	25,766,351	0 047932
2015	450,837	6,415,785	0 070270
2014	495,000	4,190,214	0 118132
2013	255,000	3,453,304	0 073842
<b>2</b> Total of line 1, column (d)			<b>2</b> 0 352997
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years			<b>3</b> 0 070599
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5			<b>4</b> 32,399,380
<b>5</b> Multiply line 4 by line 3			<b>5</b> 2,287,364
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			<b>6</b> 4,100
<b>7</b> Add lines 5 and 6			<b>7</b> 2,291,464
<b>8</b> Enter qualifying distributions from Part XII, line 4			<b>8</b> 1,584,194

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

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	8,201
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	8,201
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	8,201
<b>6</b>	Credits/Payments		
<b>a</b>	2018 estimated tax payments and 2017 overpayment credited to 2018	<b>6a</b>	18,071
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	0
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	0
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	18,071
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	0
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	9,870
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2019 estimated tax</b> ▶ 9,870 <b>Refunded</b> ▶	<b>11</b>	0

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). . . . . If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ 0 (2) On foundation managers ▶ \$ _____ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____ 0		
<b>2</b> 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	<b>2</b>	No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T	<b>5</b>	No
<b>6</b> 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 remain in the governing instrument? . . . . .	<b>6</b>	Yes
<b>7</b> 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 . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ WI		
<b>b</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) of each state as required by General Instruction G? If "No," attach explanation .	<b>8b</b>	Yes
<b>9</b> 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 taxable year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  . . . . .	<b>10</b>	Yes

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	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. . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ▶ <u>MARK R DODSON</u> Telephone no ▶ <u>(312) 307-2326</u>			

Located at ▶ 347 PLYMOUTH DRIVE INVERNESS IL ZIP+4 ▶ 60067

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . . ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶ <b>15</b>			
<b>16</b>	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .	<b>16</b>	<b>Yes</b>	<b>No</b>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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. . . . .	<b>1b</b>		<b>No</b>
	Organizations relying on a current notice regarding disaster assistance check here. . . . . ▶ <input type="checkbox"/>			
<b>c</b>	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? . . . . .	<b>1c</b>		<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
<b>a</b>	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? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
<b>b</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 incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions). . . . .	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018). . . . .	<b>3b</b>		<b>No</b>
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	<b>4b</b>		<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

		Yes	No
<b>5a</b>	During the year did the foundation pay or incur any amount to		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.	<b>5b</b>	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>	
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870	<b>6b</b>	No
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
<b>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	<b>7b</b>	
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
<b>Total number of other employees paid over \$50,000.</b>				<b>0</b>

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

<b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".</b>		
<b>(a)</b> Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	<b>(c)</b> Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . . ►		<b>0</b>

<b>Part IX-A Summary of Direct Charitable Activities</b>	
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
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

<b>Part IX-B Summary of Program-Related Investments</b> (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ►	<b>0</b>

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	29,493,350
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	3,009,571
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	389,851
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	32,892,772
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	32,892,772
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	493,392
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	32,399,380
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	1,619,969

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	1,619,969
<b>2a</b>	Tax on investment income for 2018 from Part VI, line 5.	<b>2a</b>	8,201
<b>b</b>	Income tax for 2018 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	8,201
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	1,611,768
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	1,611,768
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	1,611,768

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	1,584,194
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	1,584,194
<b>5</b>	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.	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	1,584,194

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
<b>1</b> Distributable amount for 2018 from Part XI, line 7				1,611,768
<b>2</b> Undistributed income, if any, as of the end of 2018				
<b>a</b> Enter amount for 2017 only. . . . .			0	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013. . . . .	61,788			
<b>b</b> From 2014. . . . .	286,746			
<b>c</b> From 2015. . . . .	132,847			
<b>d</b> From 2016. . . . .	67,543			
<b>e</b> From 2017. . . . .				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	548,924			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ <u>1,584,194</u>				
<b>a</b> Applied to 2017, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2018 distributable amount. . . . .				1,584,194
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )	27,574			27,574
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	521,350			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 . . . . .				0
<b>7</b> 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			
<b>8</b> Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions). . . .	34,214			
<b>9</b> <b>Excess distributions carryover to 2019.</b> Subtract lines 7 and 8 from line 6a . . . . .	487,136			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . .	286,746			
<b>b</b> Excess from 2015. . . .	132,847			
<b>c</b> Excess from 2016. . . .	67,543			
<b>d</b> Excess from 2017. . . .				
<b>e</b> Excess from 2018. . . .				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> 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.)**

**1 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) )

**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

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ 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. See instructions.

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed

**b** The form in which applications should be submitted and information and materials they should include

**c** Any submission deadlines

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

**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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	

Enter gross amounts unless otherwise indicated

	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) (See instructions)
<b>1</b> Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	48,858	
<b>4</b> Dividends and interest from securities. . . .			14	530,704	
<b>5</b> Net rental income or (loss) from real estate					
a Debt-financed property. . . . .					
b Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .					
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			18	-241,140	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue					
a A&A COATING, INC K-1 _____	310000	-201,308			
b _____					
c _____					
d _____					
e _____					
<b>12</b> Subtotal Add columns (b), (d), and (e). .		-201,308		338,422	0
<b>13</b> Total. Add line 12, columns (b), (d), and (e). . . . .					137,114

[illegible]

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of			
<b>(1)</b> Cash.	<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets.	<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions			
<b>(1)</b> Sales of assets to a noncharitable exempt organization.	<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization.	<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets.	<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements.	<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees.	<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations.	<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	<b>1c</b>		<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received.			

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	*****	2019-05-14	*****	May the IRS discuss this return with the preparer shown below? (see instr )? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee	Date	Title	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input checked="" type="checkbox"/>	PTIN
	LYNN M GARDINIER CPA		2019-05-14		P00073260
	Firm's name <b>BAKER TILLY VIRCHOW KRAUSE LLP</b>				Firm's EIN <b>39-0859910</b>
Firm's address <b>500 MIDLAND COURT PO BOX 8130 JANESVILLE, WI 535478130</b>					Phone no (608) 752-5835

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1	CSFB MORTGAGED-BACKED PASS-THROUGH CERTIFICATES	P	2015-11-05	2018-10-25
1	CSFB MORTGAGED-BACKED PASS-THROUGH CERTIFICATES	P	2015-11-05	2018-12-31
	OAKMARK GLOBAL SELECT FUND UNSOLICITED	P	2017-01-01	2018-12-17
	BANK OF CHINA NEW YORK CIT	P	2018-08-23	2018-12-17
	BEAL BK USA LAS VEGAS NEV CD	P	2018-08-23	2018-12-26
	GREEN BK NATL ASSN HOUSTON	P	2018-08-23	2018-12-31
	INVESTMENT PROPERTY	P	2015-11-19	2018-12-31
	CAPITAL GAINS DIVIDENDS	P		

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
50		53	-3
28,198		29,984	-1,786
1,291,588		1,306,709	-15,121
250,000		250,000	0
250,000		250,000	0
250,000		250,000	0
1,603,122		1,894,344	-291,222
66,992			66,992

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-3
			-1,786
			-15,121
			0
			0
			0
			-291,222
			66,992

**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
J MICHAEL DODSON  9226 N 128TH WAY SCOTTSDALE, AZ 85259	DIRECTOR, PRESIDENT 3 00	50,000	0	0
CYNTHIA L GARDNER  7643 DUNCANS GLEN DRIVE WESTERVILLE, OH 43082				
MARK R DODSON  347 PLYMOUTH DRIVE INVERNESS, IL 60067	DIRECTOR, TREASURER 3 00	60,000	0	0
MARY MOLOFSKY  913 ARMY ROAD RUXTON, MD 21204				
SUSAN DODSON WOLLWERT  4014 WHITE ROCK TRAIL GARLAND, TX 75043	DIRECTOR 1 00	0	0	0
ROBERT DODSON  3839 E LAKE SAMMAMISH SHORE LAND SE SAMMAMISH, WA 98075				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
3W MEDICAL FOR WOMEN PO BOX 31463 SEATTLE, WA 98103	N/A	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	10,000
ALZHEIMERS SUPPORT NETWORK 660 TAMIAMI TRAIL NORTH SUITE 21 NAPLES, FL 34102	N/A	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	10,000
ARIZONA PUG ADOPTION AND RESCUE NETWORK 1106 N GILBERT RD MESA, AZ 85203	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
<b>Total . . . . .</b> ► <b>3a</b>				1,550,000



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ART WITH A HEART INC 3355 KESWICK ROAD SUITE 104 BALTIMORE, MD 21211	N/A	PUBLIC CHARITY	ANNUAL OPERATIONSANNUAL OPERATIONSANNUAL OPERATIONS	10,000
AVENUES TO INDEPENDENCE 515 BUSSE HWY PARK RIDGE, IL 60068	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	20,000
BRIDGE YOUTH AND FAMILY SERVICES 721 S QUENTIN RD 103 PALATINE, IL 60067	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	25,000
<b>Total . . . . . ▶ 3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BUEHLER YMCA 1400 W NORTHWEST HWY PALATINE, IL 60067	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	15,000
CATHOLIC HOUSING SERVICES OF WESTERN WASHINGTON 100 23RD AVENUE S SEATTLE, WA 98144	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	20,000
CATHOLIC RELIEF SERVICES 228 W LEXINGTON ST BALTIMORE, MD 212013443	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	20,000
<b>Total . . . . . ▶ 3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COMMUNITY FOUNDATION OF COLLIER COUNTY 1110 PINE RIDGE ROAD SUITE 200 NAPLES, FL 34108	N/A	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	30,000
COMMUNITY IN SCHOOLS OF RENTON 1055 S GRADY WAY RENTON, WA 98057	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	5,000
CROHN'S & COLITIS FOUNDATION OF AMERICA 386 PARK AVENUE SOUTH 17TH FLOOR NEW YORK, NY 10013	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	30,000
<b>Total . . . . . ▶ 3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CYFM (CAPUCHIN YOUTH & FAMILY MINISTRIES) PO BOX 192 GARRISON, NY 10524	N/A	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	10,000
DFW PUG RESCUEPO BOX 2591 GRAPEVINE, TX 760992591	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
DOMINICAN FOUNDATION 141 EAST 65TH ST NEW YORK, NY 10065	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	25,000
<b>Total . . . . .</b> ► <b>3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FOOD LIFELINE815 S 96TH ST SEATTLE, WA 98108	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
FREMD HIGH SCHOOL 1000 S QUENTIN ROAD PALATINE, IL 60067	N/A	PUBLIC CHARITY	CROSS COUNTRY AND TRACK & FIELD ATHLETICS	10,000
FREMD VIKING BOOSTER CLUB 1000 S QUENTIN ROAD PALATINE, IL 60067	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	5,000
<b>Total . . . . . ▶ 3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GOOD SAMARITANS OF GARLAND TEXAS 214 NORTH 12TH STREET GARLAND, TX 75040	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
HAPPILY EVER AFTER LEAGUE 11445 E VIA LINA 2-493 SCOTTSDALE, AZ 85259	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	30,000
HARRY CHAPIN FOOD BANK OF SOUTHWEST FLORIDA 3760 FOWLER FORT MYERS, FL 33901	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	20,000
<b>Total . . . . . ▶ 3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HAZELDON BETTY FORD FOUNDATION PO BOX 11 OS3 CENTER CITY, MN 55012	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	35,000
HEALING THE CULTURE 605 2ND STREET SUITE 218 SNOHOMISH, WA 98290	N/A	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	10,000
HOLY FAMILY SOUP KITCHEN AND FOOD PANTRY 57 S GRUBB ST COLUMBUS, OH 43215	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	15,000
<b>Total . . . . . ▶ 3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HOME OF THE MOTHERPO BOX 1134 WORTHINGTON, OH 43085	N/A	PUBLIC CHARITY	FOR ECUADOR PROJECT- PROJECT MISERERE	80,000
INVERNESS SCHOLARSHIP FUND 102 ROSELLE RD INVERNESS, IL 60067	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
ISSAQUAH FOOD BANK179 1ST AVE SE ISSAQUAH, WA 98027	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
<b>Total . . . . . ▶ 3a</b>				1,550,000



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ISSAQUAH PLAY HOUSE 303 FRONT ST N ISSAQUAH, WA 98027	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
ITINERIS FOUNDATION 2201 OLD COURT RD BALTIMORE, MD 21208	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
JEMICY SCHOOL11 CELADON RD OWINGS MILLS, MD 211173099	N/A	PUBLIC CHARITY	ANNUAL OPERATIONSANNUAL OPERATIONS	20,000
<b>Total . . . . . ▶ 3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JOURNEYS THE ROAD HOME 1140 E NORTHWEST HIGHWAY PALATINE, IL 60074	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	25,000
LITTLE CITY650 E ALGONQUIN RD 104 SCHAUMBURG, IL 60173	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	25,000
LOUIS-DODSON SCHOLARSHIP AT ITHACA HIGH SCHOOL SCHOOL DISTRICT OF ITHACA 24615 STATE HWY 58 RICHLAND CENTER, WI 53581	N/A	PUBLIC CHARITY	PAYMENTS FOR SCHOLARSHIPS	60,000
<b>Total . . . . .</b> ► <b>3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LUTHERN SOCIAL SERVICES FOOD PANTRY 500 W WILSON BRIDGE ROAD ST 245 WORTHINGTON, OH 43085	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	25,000
MAGGIES PLACE ARIZONAPO BOX 1102 PHOENIX, AZ 85001	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	40,000
MARYLAND FAMILY NETWORK 1001 EASTERN AVENUE BALTIMORE, MD 21202	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	20,000
<b>Total . . . . .</b> ► <b>3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MCDONOGH SCHOOL 8600 MCDONOGH ROAD OWING MILLS, MD 21117	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
NAPLES THERAPEUTIC RIDING CENTER 206 RIDGE DRIVE NAPLES, FL 34108	N/A	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	10,000
NORTH TEXAS FOOD BANK 4500 S COCKEREL HILL RD DALLAS, TX 75236	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
<b>Total . . . . .</b> ► <b>3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NORTHWEST HARVESTPO BOX 12272 SEATTLE, WA 98102	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
OUR LADY OF THE SHOALS CATHOLIC CHAPEL 200 EAST COMMONS STREET NORTH TUSCUMBIA, AL 35674	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
OUR MILITARY KIDS 6861 ELM ST SUITE 2A MCLEAN, VA 22101	N/A	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	10,000
<b>Total . . . . .</b> ► <b>3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
OVERLAKE MEDICAL CENTER FOUNDATION 1035 116TH AVE NE BELLEVUE, WA 98004	N/A	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	10,000
PALATINE TOWNSHIP NEEDY FAMILY FUND 721 S QUENTIN ROAD PALATINE, IL 60067	N/A	PUBLIC CHARITY	PAYMENTS FOR SCHOLARSHIPS	10,000
PARTNERS FOR OUR COMMUNITIES 1585 N RAND RD PALATINE, IL 60067	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	25,000
<b>Total . . . . . ▶ 3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PELOTONIA FUND FOR CANCER RESEARCH L-3454 COLUMBUS, OH 432603454	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	50,000
PHI DELTA THETA FOUNDATION 2 SOUTH CAMPUS AVENUE OXFORD, OH 45056	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
PRSDC (PUG RESCUE OF SAN DIEGO COUNTY) PO BOX 151449 SAN DIEGO, CA 921751449	N/A	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	10,000
<b>Total . . . . . ▶ 3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PUG RESCUE SACRAMENTO PO BOX 5094 CONCORD, CA 94524	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
SALVATION ARMY 8787 N STEMMONS FREEWAY SUITE 800 DALLAS, TX 75235	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	20,000
SANDPIPERSPO BOX 72 HERMOSA BEACH, CA 90254	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
<b>Total . . . . .</b> ► <b>3a</b>				1,550,000



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SHIDLER SCHOOLS FOUNDATION 217 SOUTH MAGNOLIA AVENUE NEWKIRK, OK 74647	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
ST CATHERINES UNIVERSITY 601 25TH AVE MINNEAPOLIS, MN 55454	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
ST COLETTAS OF ILLINOIS FOUNDATION 18350 CROSSING DR TINLEY PARK, IL 60487	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	35,000
<b>Total . . . . . ▶ 3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ST MARY'S FOOD BANK ALLIANCE 2831 N 31ST AVE PHOENIX, AZ 85009	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	50,000
ST MATTHEWS HOUSE 2001 AIRPORT RD S NAPLES, FL 34112	N/A	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	10,000
ST PATRICKS CATHOLIC CHURCH 280 NORTH GRANT AVENUE COLUMBUS, OH 43215	N/A	PUBLIC CHARITY	LITTLE MARGARET'S CHARITY	10,000
<b>Total . . . . . ▶ 3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
STOUT UNIVERSITY FOUNDATION 320 SOUTH BROADWAY STREET MENOMONIE, WI 54751	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	115,000
THE HUMANE SOCIETY OF THE UNITED STATES 1521 W DOBBINS ROAD PHOENIX, AZ 85041	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	50,000
THE LUISA PICCARRETA CENTER FOR THE DIVINE WILL POBOX 415 JACKSBORO TN 37757 JACKSBORO, TN 37757	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	15,000
<b>Total . . . . . ▶ 3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THOMAS AQUINAS COLLEGE 10000 OJAI RD SANTA PAULA, CA 93060	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	15,000
THROWAWAY PONIES PO BOX 149 17990 COUNTY ROAD 656 FARNERSVILLE, TX 75442	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	15,000
TORRANCE MEMORIAL FOUNDATION 3330 LOMITA BOULEVARD TORRANCE, CA 90505	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	20,000
<b>Total . . . . .</b> ► <b>3a</b>				1,550,000


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TORTOISE GROUPPO BOX 33866 LAS VEGAS, NV 891333866	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
UNITED WAY OF LEE HENDRY GLADES AND OKEECHOBEE 7273 CONCOURSE DRIVE FORT MYERS, FL 33908	N/A	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	10,000
UNIVERSITY OF OKLAHOMA FOUNDATION 307 WEST BROOKS ST NORMAN, OK 73019	N/A	PUBLIC CHARITY	PAYMENTS FOR SCHOLARSHIPS	10,000
<b>Total . . . . .</b> ► <b>3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UNIVERSITY SCHOOL OF MILWAUKEE 2100 WEST FAIRY CHASM ROAD MILWAUKEE, WI 53217	N/A	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	20,000
US OLYMPIC COMMITTEE 1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	50,000
UW FOUNDATION 1848 UNIVERSITY AVENUE MADISON, WI 53726	N/A	PUBLIC CHARITY	BUSINESS SCHOOL GENERAL OPERATING EXPENSES	25,000
<b>Total . . . . .</b> ► <b>3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UW FOUNDATION ATHLETICS 1848 UNIVERSITY AVE MADISON, WI 53708	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	10,000
VENTURA COUNTY LIBRARY FOUNDATION PO BOX 7531 VENTURA, CA 93006	N/A	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	10,000
VETERANS ON THE CAMINO INC 13458 VINCENT ROAD MT VERNON, OH 43050	N/A	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	10,000
<b>Total . . . . . ▶ 3a</b>				1,550,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WILKINSON CENTERPO BOX 720248 DALLAS, TX 75372	N/A	PUBLIC CHARITY	GENERAL OPERATING EXPENSES	20,000
WINGS OF SHELTER 21301 S TAMIAMI TRAIL SUITE 320 PMB 335 ESTERO FL, FL 33928	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	30,000
WYOMING CATHOLIC COLLEGE 163 LEEDY DRIVE LANDER, WY 82520	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	25,000
<b>Total . . . . . ▶ 3a</b>				1,550,000



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YOUTH HAVEN5867 WHITAKER RD NAPLES, FL 34112	N/A	PUBLIC CHARITY	ANNUAL OPERATIONS	20,000
<b>Total</b> . . . . .  <b>3a</b>				1,550,000

**TY 2018 Accounting Fees Schedule****Name:** DODSON FOUNDATION INC

C/O MARK R DODSON

**EIN:** 39-1694304

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	5,888	2,944		2,944

## TY 2018 Investments Corporate Stock Schedule

**Name:** DODSON FOUNDATION INC

C/O MARK R DODSON

**EIN:** 39-1694304

### Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
18,900 SHS. OF SPDR S&P 500 ETF TRUST	3,388,440	4,723,488
24,408 SHS. OF VANGUARD 500 INDEX FD ADMIRAL	4,694,201	5,648,963
16,625 SHS. OF VANGUARD EXTENED MARKET ETF	1,454,845	1,659,341
7,710 SHS. OF VANGUARD S&P SMALL CAP 600	781,341	969,610
61,586 SHS. OF VANGUARD GLOBAL MINIMUM VOLATILITY	1,425,837	1,527,338
27,000 SHS. OF VANGUARD FTSE DEVELOPED MARKETS	972,276	1,001,700
11,000 SHS. OF ISHARES MSCI EAFE SMALL CAP	540,986	570,020
29,508 SHS. OF AMERICAN FUNDS NEW WORLD	1,605,573	1,692,562
1,200,000 SHS. OF CSFB MORTGAGE-BACKED CERTIFICATES CUSIP 225458UE6	184,347	181,753
125,053 SHS. OF LOOMIS SAYLES STRATEGIC INCOME	1,712,099	1,693,223
144,969 SHS. OF PIMCO INCOME FUND	1,700,265	1,712,082
12,000 SHS. OF VICTORY PORTFOLIOS II VICTORYSHARES US EQ INCOME ETF	519,696	507,840
12,000 SHS. OF VICTORY PORTFOLIOS II VICTORYSHARES US 500 INCOME ETF	530,576	526,920
250,000 SHS. OF UNITED BK VERNON ROCKVILLE CT C/D	250,000	250,000
250,000 SHS. OF KS STATE BANK MANHATTAN KS CD C/D	250,000	250,000
250,000 SHS. OF COMPASS BK BIRMINGHAM ALA C/D	250,000	249,618
250,000 SHS. OF BROOKLINE MK MASS 2.6% 20 C/D	250,000	249,143
250,000 SHS. OFJPM MORGAN CHASE BK CD CLL C/D	250,000	249,278

## TY 2018 Investments - Other Schedule

**Name:** DODSON FOUNDATION INC

C/O MARK R DODSON

**EIN:** 39-1694304

### Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
INVESTMENT IN A&A COATING, INC.	AT COST	8,594,886	4,627,188

**TY 2018 Other Decreases Schedule****Name:** DODSON FOUNDATION INC

C/O MARK R DODSON

**EIN:** 39-1694304**Description****Amount**

A&amp;A COATING, INC. K-1 - NON-DEDUCTIBLE EXPENSES

1,066

**TY 2018 Other Expenses Schedule**

**Name:** DODSON FOUNDATION INC  
C/O MARK R DODSON

**EIN:** 39-1694304

**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT EXPENSES	60,405	60,405		0

**TY 2018 Other Income Schedule****Name:** DODSON FOUNDATION INC

C/O MARK R DODSON

**EIN:** 39-1694304**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
A&A COATING, INC K-1	-201,308		-201,308

**TY 2018 Other Professional Fees Schedule**

**Name:** DODSON FOUNDATION INC  
C/O MARK R DODSON

**EIN:** 39-1694304

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	4,930	4,930		0



**TY 2018 Substantial Contributors  
Schedule**

**Name:** DODSON FOUNDATION INC  
C/O MARK R DODSON

**EIN:** 39-1694304

Name	Address
JAMES D DODSON ESTATE	9226 N 128TH WAY SCOTTSDALE, AZ 85259

**TY 2018 Taxes Schedule**

**Name:** DODSON FOUNDATION INC  
C/O MARK R DODSON

**EIN:** 39-1694304

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	203,760	0		0
FOREIGN TAX PAID	6,147	6,147		0

<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF)  Department of the Treasury Internal Revenue Service	<b>Schedule of Contributors</b>  ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Go to <u><a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a></u> for the latest information	OMB No 1545-0047  <b>2018</b>
	<b>Name of the organization</b> DODSON FOUNDATION INC C/O MARK R DODSON	<b>Employer identification number</b> 39-1694304

Organization type (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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 other 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<sup>1</sup>/<sub>3</sub>% 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, 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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> DODSON FOUNDATION INC C/O MARK R DODSON	<b>Employer identification number</b> 39-1694304
---	---

<b>Part I</b> <b>Contributors</b> (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	JAMES D DODSON ESTATE 9226 N 128TH WAY SCOTTSDALE, AZ 85259	\$ 29,135	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

39-1694304

(d)  
Date received

(d)  
Date received

(d)  
Date received

(d)  
Date received

(d)  
Date received

(d)  
Date received

<b>Name of organization</b> DODSON FOUNDATION INC C/O MARK R DODSON	<b>Employer identification number</b> 39-1694304
---	---

<b>Part III</b>	<b>Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____</b> 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
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	