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.

Department of the Treasury Internal Revenue Service

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

| | alendar year 2018 or tax year beginning | | , 2018, | and endi | | |
|-------------------------|--|--|--|--|--|--|
| • | of foundation | | | | A Employer identif | , |
| | INDUSTRIAL FOUNDATION | | | , | 47-236394 | |
| Numbe | r and street (or P Q box number if mail is not delivered | to street address) | . [| Room/suite | B Telephone numb | er (see instructions) |
| d h d | O VENEDANO DIVO | (202) 63 | 36 6004 ' | | | |
| | 00 VETERANS BLVD | tal anda | | | (262) 63 | 36-6004 . |
| City of | town, state or province, country, and ZIP or foreign pos | tai code | | | C If exemption applica | ation is |
| בווק | RR RIDGE, IL 60527 | | | | pending, check here | 5 ▶ ☐ |
| | eck all that apply Initial return | Initial return | of a former pu | iblic chari | ty | . □ |
| G CIII | Final return | Amended re | • | JUIIC CHAIT | D 1. Foreign organiza 2. Foreign organiza | • |
| | Address change | Name chang | = = - = = - | · · | 85% test, check l | here and attach |
| H Che | eck type of organization X Section 501 | _ | | | computation . | |
| $\overline{}$ | Section 4947(a)(1) nonexempt charitable trust | Other taxable p | | on 04 | . | n status was terminated |
| | | | Cash X Accr | | under section 507(b | |
| , | | Other (specify) | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | uui | 1 | in a 60-month termination (1)(B), check here |
| | | , column (d) must be on c | ash basis) | | _ , | , , , , , , , , , , , , , , , , , , , |
| Part | Analysis of Revenue and Expenses (The | | T | | | (d) Disbursements |
| | total of amounts in columns (b), (c), and (d) | (a) Revenue and expenses per | (b) Net inves | | (c) Adjusted net income | for charitable purposes |
| | may not necessarily equal the amounts in column (a) (see instructions)) | books | Income | ' | income , | (cash basis only) |
| 1 | Contributions, gifts, grants, etc., received (attach schedule) . | 640,000 | ACCOUNTS OF THE | LAND TO | PROPERTY AND A STATE OF THE STA | |
| 2 | Charle If the foundation is not required to | WEIGHT WEIGHT | | 第0条 至分 | | ZTALININE YAT |
| 3 | attach Sch B | | 1 100 | | | TO WEIGHT STATE |
| 4 | Dividends and interest from securities | | | | | CHECKNOST CONTRACTOR |
| 5a | Gross rents | | | | | WAS THE WAY OF THE PARTY OF THE |
| b | Net rental income or (loss) | | THE ROLL OF THE | PATRICE IS | | ATTENDED FOR SELECT |
| 2 6a | Net gain or (loss) from sale of assets not on line 10 | | 145443 | SERVE S | \$5166.27XXXXXX | XVOYES FOR EACH |
| 6a b | Gross sales price for all assets on line 6a | UNITED SERVICE | | WE WILL D | HI WAS A STATE OF THE STATE OF | |
| 7 | Capital gain net income (from Part IV, line 2) . | | | 0.6 | DARGARIAN XXX | |
| 8 | Net short-term capital gain, | TRANSPORTS | STORY AND S | | | AMERICAN PROPERTY. |
| 9 | Income modifications | | 科关系数据 | | | 学院到1998年 |
| 10 a | Gross sales less returns and allowances | | STATE OF THE | SAME IS | | |
| b | Less Cost of goods sold . | ACMURANT PROPER | WEATHER TO | ***** | | |
| C | Gross profit or (loss) (attach schedule) | | \$4\$\C\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | 2.484E | | |
| 11 | Other income (attach schedule) | | | | | |
| 12 | Total. Add lines 1 through 11 | 640,000. | | 0. | ceived In Corre | |
| 13 | Compensation of officers, directors, trustees, etc | 0. | , | - 100 | IRS - OSC 05 | 5 |
| 14 | Other employee salaries and wages | | - | | 15 | |
| 15 | Pension plans, employee benefits | | | | NOV € 2019 | · · · · · · · · · · · · · · · · · · · |
| 15 16 a b c 17 18 19 20 | Legal fees (attach schedule) | | | | 2013 | <u> </u> |
| b | Accounting fees (attach schedule) | | | | Ogram III | |
| C | Other professional fees (attach schedule) | | | | Geden, Utah | |
| 17 | Interest | | | | | |
| 18 | Taxes (attach schedule) (see instructions) | | | | | Company of the Compan |
| 19 | Depreciation (attach schedule) and depletion. | | - | | | THE PROPERTY OF THE PROPERTY O |
| 20 | Occupancy | | | | | |
| 21 22 | Travel, conferences, and meetings | | | | | |
| 22 | Printing and publications | 1,521. | | | | 1,521 |
| 23 | Other expenses (attach schedule) ATCH .1 . | 1,021. | | | ····· | |
| 24 | Total operating and administrative expenses. | 1,521. | | | | 1,521 |
| 23 24 25 | Add lines 13 through 23 | 345,084. | | | | 322,907 |
| 25 26 | Contributions, gifts, grants paid | 346,605. | THE PART OF THE PA | THE PARTY OF THE P | PER STANDARD | 324,428 |
| 27 | Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12 | | 100 C | अवस्थान हा | | |
| 1 | Excess of revenue over expenses and disbursements | 293,395. | | | | |
| 1 | Net investment income (if negative, enter -0-) | | ALCOMOLOGICA COLOR | 0.82 | | |
| 1 | Adjusted net income (if negative, enter -0-). | yo aharan katan ka | XX 37 W C 134 | 10000000000000000000000000000000000000 | CLASSING SECTION SECTI | THE COLUMN TWO IS NOT THE |
| | perwork Reduction Act Notice, see instructions. | Anna Maria Calledon Calledon Andreas Carlo | SHIPPING FOR BUILDING | 18 182 St. 461. ? | <u>_</u> | Form 990-PF (2018) |

| | 11 Aug 11 | Deleves Sheets | Attached schedules and amounts in the | Beginning of year | End | of year |
|--------------|-----------|---|---|---|---|---|
| نا | art II | Balance Sheets | 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-beari | ng | 725,256. | 1,143,885. | 1,143,885 |
| | 2 | | cash investments | | | |
| | ٠ 3 | Accounts receivable ▶ | | | | |
| | ١., | Less allowance for doul | btful accounts ▶ | | | |
| | 4 | Pledges receivable ▶ | · · · · · · · · · · · · · · · · · · · | | | |
| | | _ | otful accounts ▶ | | | |
| | 5 | Grants receivable | | | | |
| | 6 | | officers, directors, trustees, and other | | | |
| | | | ach schedule) (see instructions) | | | , |
| | l | | eceivable (attach schedule) | | | |
| | l | | otful accounts ► | | | |
| ţ | ľ | | e | | _ | |
| ssets | | | eferred charges | | | |
| Ą | | | government obligations (attach schedule), | 1 | | |
| | | | stock (attach schedule) | | | |
| | | · | bonds (attach schedule) | | | |
| - 1 | 11 | Investments - land, buildings, | | | | WEST WATER |
| Ī | | and equipment basis Less accumulated depreciat | ion > | | Milita Micha Millige-in i da Merkuluk uldezil Militakktur ide | 1020/2007 CHREST PROLITY CHANGE IN RECENTIVE CARD CONTROL |
| - | | (attach schedule) | oans | | · · · · · · | |
| | | | ch schedule) | | | |
| - | 14 | Land, buildings, and | • | VARACHO PPARACEO AN | | |
| | | Less accumulated depreciat | ion | AND THE PROPERTY OF THE PROPERTY OF THE PROPERTY. | | |
| - 1 | | |) | | | |
| | | | completed by all filers - see the | | | |
| ł | | | ge 1, item I) | 725,256. | 1,143,885. | 1,143,885. |
| 7 | | | ccrued expenses | 285,346. | | |
| - 1 | | | ` | | 22,177. | |
| ွှ | | | | | | |
| <u>≘</u> | | | | | | |
| ≂ | | | s, trustees, and other disqualified persons es payable (attach schedule) | | | |
| " I | | Other liabilities (describe | | - ' | | |
| | 22 ' | Other habilities (describe |) | | | |
| 1 | 23 - | Total liabilities (add lines | 17 through 22) | 285,346. | 206,580. | |
| † | | | SFAS 117, check here | | | |
| S | | | nrough 26, and lines 30 and 31. | | | |
| ان | | | | | | |
| 2 | | | | | | |
| 01 | | • | · · · · · · · · · · · · · · · · · · · | | | |
| 21 | | | follow SFAS 117, check here | | | |
| | | and complete lines 27 th | · — , | | - | |
| 5 | | | _ | 439,910. | 937,305. | |
| 72 | | • | pal, or current funds | 100,010 | | |
| ומ | | • | and, bldg , and equipment fund | | | |
| ٤l | | • | ated income, endowment, or other funds | 439,910. | 937,305. | |
| ונו | | | balances (see instructions) | 103/3201 | 33.7333. | |
| ۱ ا | | | | 725,256. | 1,143,885. | |
| | | | | | 1/145/005. | |
| | | | lances at beginning of year - Part I | | nuet agree with | |
| • | | | | 1.1 | - | 439,910. |
| 2 | | - | on prior year's return) | | | 293,395. |
| | | | ne 27a | | | 293,393. |
| | | | ed in line 2 (itemize) ► ATCH 2 | | 3 | 937,305. |
| | | | | | 4 | |
| | | eases not included in I | | las C) Dart II and a | Received | In Corres |
| 0 | lotal | net assets or fund ba | lances at end of year (line 4 minus | iine 5) - Mart II, column (b |), ime 30 IRS 5- (| 19C 00 937,303. |
| | | | | | | Form 990-PF (2018) |

| | | | | | | (d) Date sold (mo , day, yr) |
|--|---|-----------|---|--------------|--|----------------------------------|
| 1 a | | | | D - Donation | | |
| b . | | | | | | |
| c | | | | | | |
| <u>d</u> | | | | | | |
| <u>e</u> | <u> </u> | | T | | | |
| (e) Gross sales price | (f) Depreciation allow (or allowable) | ed | (g) Cost or other basis plus expense of sale | | (h) Gain or (los ((e) plus (f) minu | |
| <u>a</u> | | | | ļ | | |
| b | | | | | | |
| d | | | | ļ | | |
| | - | | | - | | |
| | howing gain in column (h) ai | nd owned | by the foundation on 12/31/69 | (0) | Corps (Col. (b) as | |
| (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 | | Gains (Col. (h) ga (k), but not less th Losses (from col | nan -0-) or |
| a | | | | | - | |
| b | | | | | | |
| С | - | | | | | |
| d | | | | | | |
| е | | | | | | |
| 2 Capital gain net income | or (net capital loss) | | ain, also enter in Part I, line 7 | | | |
| _ | | | oss), enter -0- in Part I, line 7 | 2 | | |
| 3 | ain or (loss) as defined in | | structions If (loss), enter -0- in | | | |
| | | | inductions in (loss), enter -0- in | | | |
| Part V Qualification \ | Inder Section 4940(e) | for Re | duced Tax on Net Investment In | ncome | · · · · · · · · · · · · · · · · · · · | |
| | the section 4942 tax on th | | outable amount of any year in the ba | ase period | ? <u> </u> | Yes X No |
| f "Yes," the foundation doesn | | | | | | |
| 1 Enter the appropriate ar | | each yea | ar, see the instructions before makii | ng any ent | ries (d) | |
| Base penod years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributi | ions - | (c) Net value of nonchantable-use assets | | Distribution ratio | |
| 2017 | 351, | | 582,497. | | col (b) divided by c | .603413 |
| 2016 | 1,647, | | 410,914. | | | .009576 |
| 2015 | | | | | | |
| 2014 | | | | | | |
| 2013 | | | | | | |
| | | | | | _ | |
| | | | | 2 | 4 | .612989 |
| - | • | | e the total on line 2 by 5 0, or by | | • | 225125 |
| the number of years the | foundation has been in exi | stence i | f less than 5 years | 3 | 2 | .306495 |
| 4 Enter the net value of no | ncharitable-use assets for | r 2018 fr | rom Part X, line 5 | 4 | 9 | 03,783. |
| Multiply line 4 by line 3. | | | | 5 | 2,0 | 84,571. |
| 6 Enter 1% of net investme | ent income (1% of Part I, Iii | ne 27b). | | _6 | | |
| 7 Add lines 5 and 6 | | | | 7 | 2,0 | 84,571. |
| B Enter qualifying distribution of the British Structure of the British | ons from Part XII, line 4 eater than line 7, check t | he box | | 8 hat part u | | 24,428. rate See the |

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| Pa | rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see | instructions) |
|----|--|--|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here | |
| | 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 | 0. |
| | here and enter 1% of Part I, line 27b | |
| c | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of | |
| · | Part I, line 12, col (b) | MAN A PROPERTY AND A STATE AND |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) Add lines 1 and 2 | 0. |
| 3 | Add lines 1 and 2 | 0. |
| 4 | Souther A (mostle) fax (comeste decite) 4547(c)(4) habie and taxable foundations only, eviding office of | 0. |
| 5 | The based of investment mediae, and the first mine of the based was | AND WATER ASSESSED. |
| 6 | Credits/Payments | |
| a | 2018 estimated tax payments and 2017 overpayment credited to 2018 6a Exempt foreign organizations - tax withheld at source | |
| b | Zzempt foreign organizations (ax minimes at costs) | |
| C | Tax paid with application for extension of time to file (Form 8868) | |
| ď | | 0. |
| 7 | Total credits and payments Add lines 6a through 6d | |
| 8 | Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached | 0. |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | |
| 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 | |
| | rt VII-A Statements Regarding Activities | Yes No |
| 1a | 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? | 1a X |
| D | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the | 1 _b X |
| | instructions for the definition | \$480 X4489 X928 |
| | 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 | 1c X |
| | Did the foundation file Form 1120-POL for this year? | 252 2002 900 |
| u | (1) On the foundation \blacktriangleright \$ 0 . | |
| | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | |
| • | on foundation managers > \$ | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 X |
| | If "Yes," attach a detailed description of the activities | "你" 公路 1366 |
| 3 | 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 | 3 X |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b |
| 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 | |
| | conflict with the state law remain in the governing instrument? | 6 X |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV | 7 X |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. | |
| | DE, IL, 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 ² If "No," attach explanation ATCH 3 | 8b X |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | |
| | 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If "Yes," | - Annual Continues of the Continues of t |
| | complete Part XIV | g X |
| | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | |
| | names and addresses | 10 X |
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| Par | t VII-A Statements Regarding Activities (continued) | | | |
|------|---|---------------|-------------|-----------------------|
| | | | Yes | No |
| 11 | Ât any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | | | |
| | meaning of section 512(b)(13)? If "Yes," attach schedule See instructions | 11 | | x |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified | | | |
| | person had advisory privileges? If "Yes," attach statement. See instructions ATCH 4 ATCH 5 | 12 | х | |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х | |
| | Website address SEE GENERAL EXPLANATION STATEMENT | | | |
| 14 | The books are in care of ▶ CASE NEW HOLLAND INDUST. INC. Telephone no ▶ 262-636 | -600 | 4 | |
| | Located at \$700 STATE STREET RACINE, WI ZIP+4 \$53404 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | | | |
| | and enter the amount of tax-exempt interest received or accrued during the year | | – | ш |
| 16 | At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority | | Yes | No |
| | over a bank, securities, or other financial account in a foreign country? | 16 | | <u> </u> |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of | 55K93.567 WKS | | 1943 - |
| | the foreign country | | | |
| Par | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | SERVICE | | ALTERNAL PROPERTY. |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | E-YZ® | Yes | No |
| 12 | During the year, did the foundation (either directly or indirectly) | 375.47 | 2332 | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | | 35.7 | 200 |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | | | |
| | | | | |
| | | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for | | | |
| | the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the | | 44 | |
| | | | | |
| | 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) | | | |
| ь. | | | | |
| | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | 1b | | X |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions | 会議会は | 85855 S | |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | |
| | were not corrected before the first day of the tax year beginning in 2018? | 1c | 2011 | X |
| , | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | 200 | 12. ES11. B | |
| | operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | |
| | 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? | | | |
| | If "Yes," list the years | | | |
| | Are there any years listed in 2a for which the foundation is not 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 | | | |
| | all years listed, answer "No" and attach statement - see instructions) | 2b | 2002000 | 24.227 |
| | f the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | # X X | 18.E. | |
| | | | | 7 |
| 3a [| Did the foundation hold more than a 2% direct or indirect interest in any business enterprise | | | 90 |
| | at any time during the year? | | | |
| | f "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 | | | |
| | he 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the | | | |
| | oundation had excess business holdings in 2018) | 3b | and I | #3.7 .6 55 |
| | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | _ | X |
| | | | 3,42 | |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018? | 4b | WANT IN | X |
| | | m 990 | -PF a | |

| - | t VII-B Statements Regarding Activities | for Which Form | 4720 May Be Req | uired (continued) | |
|----------|---|--|-------------------------------------|--|--|
| 5a | During the year, did the foundation pay or incur any am | ount to | | | Yes No |
| | (1) Carry on propaganda, or otherwise attempt to influ | ence legislation (section | on 4945(e))? | . Yes X N | 0 44 27 2 |
| | (2) Influence the outcome of any specific public el | ection (see section | 4955), or to carry or | 1, | |
| | directly or indirectly, any voter registration drive? | | | . Yes X N | |
| | (3) Provide a grant to an individual for travel, study, or | | | | o |
| | (4) Provide a grant to an organization other than a | • • | | | |
| | section 4945(d)(4)(A)? See instructions | | - | | o |
| | (5) Provide for any purpose other than religious, c | | | | |
| | purposes, or for the prevention of cruelty to children | | | | |
| ь | If any answer is "Yes" to 5a(1)-(5), did any of the | | | | The same of the sa |
| - | Regulations section 53 4945 or in a current notice regal | | | | 1 1 1 |
| | Organizations relying on a current notice regarding disa | | | | |
| С | If the answer is "Yes" to question 5a(4), does the | | | | |
| · | because it maintained expenditure responsibility for the | | • | | |
| | • | <u>-</u> | | · | |
| ٠. | If "Yes," attach the statement required by Regulations s | | | | |
| 6a | Did the foundation, during the year, receive any ful | • | | Yes X N | |
| | on a personal benefit contract? | | | | 72 |
| b | Did the foundation, during the year, pay premiums, dire | ectly or indirectly, on a | i personal benefit contra | Ct / | . 6b A |
| _ | If "Yes" to 6b, file Form 8870 | | | Yes X N | |
| 7a | At any time during the tax year, was the foundation a p | | | | was and was and and a second |
| b | If "Yes," did the foundation receive any proceeds or ha | | | on/ | . 7b |
| 8 | Is the foundation subject to the section 4960 tax on pa | | | ☐ □ | |
| D | remuneration or excess parachute payment(s) during the VIII Information About Officers, Directo | year? | ndation Managara | Yes X No | |
| | and Contractors | | | | pioyees, |
| 1 | List all officers, directors, trustees, and foundat | | | | |
| | (a) Name and address | (b) Title, and average | (c) Compensation | (d) Contributions to | (e) Expense account, |
| | (a) Name and address | hours per week | (If not paid, | employee benefit plans | |
| | (a) Name and address | devoted to position | (If not paid, enter -0-) | employee benefit plans and deferred compensation | other allowances |
| ATCH | | devoted to position | enter -0-) | and deferred compensation | other allowances |
| ATCH | | devoted to position | (If not paid, enter -0-) | employee benefit plans and deferred compensation | |
| ATCH | | devoted to position | enter -0-) | and deferred compensation | other allowances |
| ATCH | | devoted to position | enter -0-) | and deferred compensation | other allowances |
| ATCH | | devoted to position | enter -0-) | and deferred compensation | other allowances |
| ATCH | | devoted to position | enter -0-) | and deferred compensation | other allowances |
| ATCH | | devoted to position | enter -0-) | and deferred compensation | other allowances |
| | 6 | devoted to position | enter -0-) | and deferred compensation 0 . | 0 . |
| 2 (| Compensation of five highest-paid employees | devoted to position | enter -0-) | and deferred compensation 0 . | O. |
| 2 (| Compensation of five highest-paid employees | (other than thos | enter -0-) 0. e included on line | 1 - see instructi (d) Contributions to | O. O. ons). If none, enter |
| 2 (| Compensation of five highest-paid employees | (other than thos | enter -0-) | 1 - see instructi (d) Contributions to employee benefit plans and deferred | O. |
| 2 (| Compensation of five highest-paid employees 'NONE." | (other than thos | enter -0-) 0. e included on line | 1 - see instructi | ons). If none, enter |
| 2 (a) { | Compensation of five highest-paid employees NONE." | (other than thos | enter -0-) 0. e included on line | 1 - see instructi (d) Contributions to employee benefit plans and deferred | ons). If none, enter |
| 2 (a) { | Compensation of five highest-paid employees 'NONE." | (other than thos | enter -0-) 0. e included on line | 1 - see instructi (d) Contributions to employee benefit plans and deferred | ons). If none, enter |
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| 2 (a) { | Compensation of five highest-paid employees NONE." | (other than thos | enter -0-) 0. e included on line | 1 - see instructi (d) Contributions to employee benefit plans and deferred | ons). If none, enter |
| (a) i | Compensation of five highest-paid employees NONE." Name and address of each employee paid more than \$50,000 | (other than those to be a consistent of the cons | e included on line (c) Compensation | 1 - see instructi (d) Contributions to employee benefit plans and deferred compensation | ons). If none, enter |
| (a) i | Compensation of five highest-paid employees NONE." | (other than those to be a consistent of the cons | e included on line (c) Compensation | 1 - see instructi (d) Contributions to employee benefit plans and deferred compensation | ons). If none, enter |

| 3 Five | highest-paid independent contractors for professional services. See instructions. If none, enter "NON | IE." |
|---------------------------|--|------------------|
| | (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Compensation |
| | | |
| NONE | | |
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| tal numb | per of others receiving over \$50,000 for professional services | |
| art IX-A | Summary of Direct Charitable Activities | |
| List the for organization | undation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ins and other beneficianes served, conferences convened, research papers produced, etc. | Expenses |
| NONE | <u> </u> | |
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| art IX-B | Summary of Program-Related Investments (see instructions) | |
| | e two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amount |
| NONE | | |
| | | |
| | | |
| ? | | |
| | | |
| All other pr | ogram-related investments. See instructions | |
| } | | |
| NONE | | |
| | | |

| Pa | Minimum Investment Return (All domestic foundations must complete this part. For see instructions.) | eign found | ations, |
|-----|--|--|---------------------------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes | 7. H. | |
| á | Average monthly fair market value of securities | 1a | |
| | Average of monthly cash balances | | 917,546. |
| | Fair market value of all other assets (see instructions) | | |
| | d Total (add lines 1a, b, and c) | 1d | 917,546. |
| 6 | 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 | 917,546. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see | | · · · · · · · · · · · · · · · · · · · |
| | instructions) | 4 | 13,763. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. | 5 | 903,783. |
| 6 | Minimum investment return. Enter 5% of line 5 | | 45,189. |
| Pa | Int XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating four | | |
| | and certain foreign organizations, check here ▶ and do not complete this part) | naations | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 45,189. |
| 2 a | _ | | |
| b | | † | |
| C | | 2c | |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 45,189. |
| 4 | Recoveries of amounts treated as qualifying distributions | | , 2001 |
| 5 | Add lines 3 and 4 | 5 | 45,189. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 10/103. |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, | | |
| • | line 1 | 7 | 45,189. |
| | | | 43,103. |
| Pa | rt XII Qualifying Distributions (see instructions) | _ | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | Warring contribu | |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 324,428. |
| b | Program-related investments - total from Part IX-B | 1b | |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | A | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 324,428. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income | | |
| | Enter 1% of Part I, line 27b See instructions | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 324,428. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca | | |
| | qualifies for the section 4940(e) reduction of tax in those years | | |

Form 990-PF (2018)

| Part XIII Undistributed Income (see instructions) | | | | | | | | | |
|--|---|--|--|--|--|--|--|--|--|
| 1. Distributable amount for 2018 from Part XI. | (a) Corpus | (b) Years prior to 2017 | (c) 2017 | / (d) 2018 | | | | | |
| line 7 | ###################################### | ALTERNATION OF THE | ACCUMENTAL SELA | 45,189. | | | | | |
| 2 Undistributed income, if any, as of the end of 2018 | | | St. W. Woman days a series and the state of | | | | | | |
| a Enter amount for 2017 only | | | | | | | | | |
| b Total for pnor years 20 16 ,20 15 ,20 14 | | THE ACRES OF A STREET STREET | ## ## ## ## ## ## ## ## ## ## ## ## ## | PAGE OF NAME OF | | | | | |
| 3 Excess distributions carryover, if any, to 2018 | | ANTEN ANTEN SELS | ASSIN STATE OF | | | | | | |
| a From 2013 | en e Color a la propositionimo | and comes displaced to be a first to be | ij en stavinaj importbiognostionopolisti. | Con This destruit destruit de complete principal de communication de commu | | | | | |
| b From 2014 | | | | | | | | | |
| c From 2015 | | | | | | | | | |
| d From 2016 | | | | | | | | | |
| e From 2017 | | | | | | | | | |
| f Total of lines 3a through e | 1,949,357. | | TO SOME STATE AND | | | | | | |
| 4 Qualifying distributions for 2018 from Part XII. | 2010/XXX AV 2510 AV 44 | | 14-4-3-8-C 0-14-4-5-2 xx 40-4-7-4 xx 5-8-70-7-7 | | | | | | |
| line 4 ▶ \$ 324,428. | | | | | | | | | |
| a Applied to 2017, but not more than line 2a | | | | | | | | | |
| b Applied to undistributed income of prior years | | TOTAL STATE OF CONTRACT OF THE STATE OF THE | | | | | | | |
| (Election required - see instructions) | | | | | | | | | |
| c Treated as distributions out of corpus (Election | | | | | | | | | |
| required - see instructions) | | | | | | | | | |
| d Applied to 2018 distributable amount | SZZZAWAZNA | MORNING TO SERVICE | | 45,189. | | | | | |
| e Remaining amount distributed out of corpus | 279,239. | 苏拉斯亚拉拉纳 | 张思·克斯斯斯 | | | | | | |
| 5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same | | | | | | | | | |
| amount must be shown in column (a) | | | | | | | | | |
| G Enter the net total of each column as indicated below: | , | | All All The All And All Popularies of the Company o | erinandor antique especialmentes en especial | | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 2,228,596. | | | | | | | | |
| b Prior years' undistributed income Subtract | | | | | | | | | |
| line 4b from line 2b | | | | | | | | | |
| c Enter the amount of prior years' undistributed | | | | | | | | | |
| income for which a notice of deficiency has been issued, or on which the section 4942(a) | | | | | | | | | |
| tax has been previously assessed | | | | | | | | | |
| d Subtract line 6c from line 6b Taxable | | | | | | | | | |
| amount - see instructions | | in the state of th | | | | | | | |
| e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount - see | | | | | | | | | |
| instructions | | | | | | | | | |
| f Undistributed income for 2018 Subtract lines | | | | | | | | | |
| 4d and 5 from line 1. This amount must be | | | | | | | | | |
| distributed in 2019 | TOPEN OF PROPERTY AND | | | | | | | | |
| 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) | , i | | | | | | | | |
| 8 Excess distributions carryover from 2013 not | | | | | | | | | |
| applied on line 5 or line 7 (see instructions) | - | | | | | | | | |
| 9 Excess distributions carryover to 2019. | *** | | | | | | | | |
| Subtract lines 7 and 8 from line 6a | 2,228,596. | | | | | | | | |
| nalysis of line 9 | 217226123798 | ALCONOMIC TO THE PARTY OF THE P | | | | | | | |
| a Excess from 2014 | | | | | | | | | |
| b Excess from 2015 | | | | | | | | | |
| c Excess from 2016 1,627,045. | | | | | | | | | |
| d Excess from 2017 322, 312. | | | | | | | | | |
| e Excess from 2018 279, 239. | | | | | | | | | |

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors JSA 8E1490 1 000 Form 990-PF (2018)

c Any submission deadlines

| Part XV Supplementary Information | (continued) | | | |
|---|--|----------------------|----------------|---------------|
| 3 Grants and Contributions Paid Du | ring the Year or App | proved for | Future Payment | - |
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | contribution | • |
| a Paid during the year | | | | |
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| Total | | | ▶ 3a | 322,907. |
| b Approved for future payment | | | | |
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| Total | | | | 22,177. |
| | | | <u>.</u> | |

| nter gross amounts unless otherwise indicated | | ted business income | Excluded b | y section 512, 513, or 514 | (e) Related or exem |
|---|----------------------|---------------------|--|--------------------------------|---------------------------------------|
| Program service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function income (See instructions |
| a | | | | - | |
| b | | | | | ··· · · · · · · · · · · · · · · · · · |
| · | | | - | | |
| d | | | | | |
| e | | | | | |
| f | _ | | - | | |
| g Fees and contracts from government agencies | | | - | | |
| Membership dues and assessments | | | + | | |
| Interest on savings and temporary cash investments - | | | | | |
| Dividends and interest from securities | | ** _**,** | 1 6 | | , |
| Net rental income or (loss) from real estate | | | ··· · · · | , t | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | - · - | | | | |
| Net rental income or (loss) from personal property | | | - | | |
| Other investment income | | | _ | | |
| Gain or (loss) from sales of assets other than inventory | | .= | | | · · · · · · · · · · · · · · · · · · · |
| Net income or (loss) from special events · · · | | | | | - |
| Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue a | _ | | | | |
| b | | | | | · |
| · | | | | | |
| d | | | | | |
| e | | | | | |
| Subtotal Add columns (b), (d), and (e) [| · | | 1 1 | | |
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| ne No. Explain below how each activity | to the Acc | complishment of E | xempt Purp | oses of Part XVI-A contribu | ited importantly to |

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

| 1 | | ne organization direction 501(c) (other | • | | | - | - | | | - | Yes | No |
|--------------|----------|--|--|---|--|--|------------------|-------------|---------------------------|------------|------------------------|-------|
| | | izations? | than section | 1 301(0)(3) 019 | janizations) o | i ili seciii |) J21, | siating | to political | | | |
| а | _ | fers from the reporti | ng foundation t | o a noncharitabl | e exempt orga | enization of | | | | [· > , *] | $\hat{\mathbf{X}}_{i}$ | |
| - | | ash | - | | | | | | | 1a(1) | | X, |
| | | ther assets | | | | | | | | | | Х |
| b | | transactions | | | | | | | | 14(-) | ` | 4, 2 |
| | | ales of assets to a no | oncharitable exe | empt organization | 1 | | | | | 16(1) | - | X |
| | | irchases of assets fr | | | | | | | | | | Х |
| | | ental of facilities, equ | | | | | | | i | | | Х |
| | | eimbursement arrang | • | | | | - | | | - | | Х |
| | (5) Lo | ans or loan guarante | es | | | | | | | 1h(5) | | X |
| | (6) Pe | erformance of service | es or members | hip or fundraisin | g solicitations . | | | | . . | 1b(6) | | X |
| c | Sharır | ng of facilities, equipm | nent, mailing lis | ts, other assets, | or paid emplo | yees | | | | 1c |] | Х |
| d | If the | answer to any of the | ne above is "Yo | es," complete th | ne following s | chedule C | olumn (b) | should | always show | the f | air m | arke |
| | | of the goods, other | | | | | | | | | | |
| | value | in any transaction of | r sharing arran | gement, show i | n column (d) | the value of | of the good | s, othe | r assets, or se | rvices | rece | ved |
| (a) Li | ne no | (b) Amount involved | (c) Name of | noncharitable exemp | ot organization | | ription of trans | sfers, tran | sactions, and shan | ng arrar | ngemer | ıts |
| | | N/A | | | | N/A | | | | | | _ |
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| (| descri | foundation directly oped in section 501(c)," complete the follow | (other than se | ction 501(c)(3)) | or in section 5 | | • | • | _ | Ye | s X | No |
| | | (a) Name of organization | 1 | (b) Type | of organization | | | (c) Desci | ription of relationsh | ıp | | |
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| Sign Here | correc | penalties of penury, I declar d, and complete Declaration of COMPANY And Complete Declaration of mature of officer or trustee | re that I have exami greparer (other than t | ned this return, includ axpayer) is based on all Date | ing accompanying s information of which | chedules and si preparer has any TREAS | knowledge | o the bes | May the IRS with the prep | discuss | this r | eturn |
| Paid | | Print/Type preparer's nar | | Preparer's signa | ature | | Date | | - I I | N N | | |
| | | MICHELLE G MIC | | ///// | 1a | | NOV 1 4 | 2019 s | | 0075 | | 1 |
| rep | | | | USECOOPERS | | | | Firm's E | IN ▶13-40 | 0832 | 4 | |
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| | , | WA: | SHINGTON, | DC | | 200 | 05 | Phone r | | | | |
| | | | | | | | | | Form | 990- | PF (2 | :018) |

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

Department of the Treasury

Schedule of Contributors

OMB No 1545-0047

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

► Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service Name of the organization Employer identification number CNH INDUSTRIAL FOUNDATION 47-2363945 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions

Special Rules

| For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1 Complete Parts I and II |
|---|
| For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III |
| For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year. |

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Employer identification number 47-2363945

| Part I | Contributors (see instructions). Use duplicate cop | pies of Part I if additional space is n | eeded. |
|------------|--|---|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | CNH INDUSTRIAL AMERICA LLC 700 STATE STREET RACINE, WI 53404 | \$640,000. | Person X Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | 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) |

Employer identification number 47-2363945

| Part II | Noncash Property (see instructions). Use duplicate copies | of Part II if additional space is ne | eded |
|---------------------------|---|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | , |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | | |

Employer identification number 47-2363945

| Part III | Exclusively religious, charitable, etc. | ., contributions to | organizations des | cribed 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 |
| ٠ | the following line entry For organizat | ions completing Pa | rt III, enter the total | of exclusively religious, charitable, etc. |
| | contributions of \$1,000 or less for th | e year. (Enter this i | nformation once. S | See instructions) ►\$ |
| _ | Use duplicate copies of Part III if addit | | | , |
| (a) No. | (h) Dunnan (af alle | | | |
| from Part I | (b) Purpose of gift | (c) Use | e of gift | (d) Description of how gift is held |
| | | | | |
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| | | | | |
| | | | | |
| | | (e) Trans | fer of gift | |
| • | | (0) | nor or give | |
| | Transferee's name, address, ar | nd ZIP + 4 | Relatio | nship of transferor to transferee |
| | | | Tenado | ising of transferor to transferee |
| | | | | |
| | | | - | |
| | | | | |
| (a) No. | | | | <u> </u> |
| (a) No. from | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held |
| Part i | - | | | |
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| | l ———————————————————————————————————— | | | |
| | <u> </u> | | | |
| | | (e) Trans | fer of gift | |
| | | | | |
| | Transferee's name, address, an | d ZIP + 4 | Relatio | nship of transferor to transferee |
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| (a) No. from | (b) Purpose of gift | (c) Use | of aift | (d) Description of how gift is held |
| _ Part I | (b) Purpose of gift | | | (-, |
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| | | | | |
| | | er of gift | | |
| | | | | |
| | Transferee's name, address, and | d ZIP + 4 | Relation | nship of transferor to transferee |
| | | | | |
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| | | | | |
| (a) No. from | (h) Durnage of sife | (a) 11aa | of mile | (d) December of how office held |
| Part I | (b) Purpose of gift | (c) Use | or gift | (d) Description of how gift is held |
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| Ì | | (e) Transf | er of gift | |
| | | (0) | -: -/ g.··• | |
| | Transferee's name, address, and | 1 ZIP + 4 | Relation | ship of transferor to transferee |
| ł | randidad a name, address, and | | Kelation | omp or denoteror to denote the |
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FORM 990PF - GENERAL EXPLANATION ATTACHMENT

FORM 990-PF, PART VII-A, LINE 13 - WEBSITE ADDRESS

HTTPS://WWW.CNHINDUSTRIAL.COM/EN-US/KNOW_US/CNH_INDUSTRIAL FOUNDATION/

- OTHER EXPENSES FORM 990PF, PART I

REVENUE AND EXPENSES PER BOOKS

DESCRIPTION BANK FEES

ATTACHMENT

CHARITABLE PURPOSES 1,521.

1,521.

1,521.

TOTALS

48750v 3857 11/14/2019 10:57:33 AM v 18-7.6F

ATTACHMENT 2

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u> <u>AMOUNT</u>

PRIOR PERIOD ADJUSTMENT 204,000.

TOTAL 204,000.

FORM 990PF, PART VII-A, LINE 8B - EXPLANATION OF NON-FILING

NON-PROFIT ORGANIZATIONS REGISTERED IN THE STATE OF DELAWARE ARE ONLY REQUIRED TO FILE A COPY OF THE FORM 990-PF IF THE NON-PROFIT ACTIVITIES OF THE ORGANIZATION ARE CONDUCTED WITHIN THE STATE. THE FOUNDATION DID NOT CONDUCT ANY NON-PROFIT ACTIVITIES WITHIN THE STATE OF DELAWARE; AS A RESUT, THE FOUNDATION IS NOT REQUIRED TO FILE THE FORM 990-PF IN THE STATE OF DELAWARE.

2018 FORM <u>990-PF</u>

ATTACHMENT 4

FORM 990PF, PART VII-A -DISTRIBUTION TO A DONOR ADVISED FUND FOR QUALIFYING DISTRIBUTION

FORM 990-PF, PART VII-A, LINE 12

DURING ITS 2018 TAX YEAR, THE CNH INDUSTRIAL FOUNDATION MADE A \$4,455

GRANT TO A DONOR ADVISED FUND(S) OVER WHICH THE FOUNDATION HAS

ADVISORY PRIVILEGES. THE GRANT HAS BEEN TREATED AS A QUALIFYING

DISTRIBUTION ON THIS RETURN.

ATTACHMENT 5

FORM 990PF, PART VII-A -DISTRIBUTION TO A DONOR ADVISED FUND FOR SECTION 170 C 2B

FORM 990-PF, PART VII-A, LINE 12
DISTRIBUTIONS WILL BE MADE FROM THE DONOR ADVISED FUND TO PUBLIC
CHARITIES IN FURTHERANCE OF THE FOUNDATION'S SECTION 170(C)(2)(B)
PURPOSES.

ATTACHMENT 6

| NAME AND ADDRESS | TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION | COMPENSATION | CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS | EXPENSE ACCT AND OTHER ALLOWANCES |
|--|---|--------------|---|-----------------------------------|
| BRIAN FRENCH 6900 VETERANS BLVD BURR RIDGE, IL 60527 | PRESIDENT33 | .0 | .0 | . 0 (|
| MAUREEN L YAX 6900 VETERANS BLVD BURR RIDGE, IL 60527 | SECRETARY .33 | °. | Ö | .0 |
| RENAE CUBBIN 6900 VETERANS BLVD BURR RIDGE, IL 60527 | TREASURER .33 | .0 | Ö | ·o |
| ATHENA CAMPOS 6900 VETERANS BLVD BURR RIDGE, IL 60527 | DIRECTOR .33 | .0 | · 0 | • 0 |
| CHRISTINE CHLEBOUN 6900 VETERANS BLVD BURR RIDGE, IL 60527 | DIRECTOR (AS OF 9/20/18) | .0 | Ö | ·o |
| KURT COFFEY 6900 VETERANS BLVD BURR RIDGE, IL 60527 | DIRECTOR (AS OF 7/30/18) 33 | .0 | .0 | °. |

2018 FORM 990-PF

| ATTACHMENT 6 (CONT'D) | CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES | .0 | .0 | .0.0 | .0 |
|---|---|--|--|---|--|
| | CONT TO E COMPENSATION BENE | · o | o | · o | ·o |
| FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES | TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION | DIRECTOR 2.00 | DIRECTOR .33 | DIRECTOR .33 | DIRECTOR (UNTIL 9/20/18) |
| FORM 990PF, PART VIII - LIST | NAME AND ADDRESS | LISA MORÂN 6900 VETERANS BLVD BURR RIDGE, IL 60527 | STEVE NADHERNY 6900 VETERANS BLVD BURR RIDGE, IL 60527 | ERIC WEAVER 6900 VETERANS BLVD BURR RIDGE, IL 60527 | CHUN WOYTERA 6900 VETERANS BLVD BURR RIDGE, IL 60527 |

GRAND TOTALS

ATTACHMENT 7

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

CNH INDUSTRIAL FOUNDATION 6900 VETERANS BLVD BURR RIDGE, IL 60527 262-636-6004

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

GRANT APPLICATIONS ARE AVAILABLE AT THE WEBSITE BELOW AND SHOULD BE SUBMITTED ONLINE.

HTTPS://GRANTSTREAM.COM/CNHINDUSTRIAL/FORM/DEFAULT/EN

SUBMISSION DEADLINES:

FOR 2018, THE APPLICATION SUBMISSION DEADLINES WERE: 3/2/2018, 5/30/2018, 8/29/2018, 11/14/2018

RESTRICTIONS OR LIMITATIONS ON AWARDS:

THE GOAL OF THE CNH INDUSTRIAL FOUNDATION (THE "FOUNDATION") IS TO TRANSFORM LOCAL COMMUNITIES WHERE CNH INDUSTRIAL DOES BUSINESS. THE PURPOSE OF THE FOUNDATION IS TO MAKE DONATIONS, GRANTS, GIFTS, SCHOLARSHIPS OR CONTRIBUTIONS FOR THE PUBLIC WELFARE OR FOR CHARITABLE, SCIENTIFIC, LITERARY, OR EDUCATIONAL PURPOSES. THE FOUNDATION'S PHILANTHROPIC EFFORTS ARE FOCUSED ON FIVE MAIN AREAS: EDUCATION, HEALTH & HUMAN SERVICES, CIVIC & COMMUNITY IMPROVEMENT, FOOD SECURITY, AND DISASTER RELIEF.

ATTACHMENT 8

2018 FORM 990-PF

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

| | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR | | |
|---|---|--|----------|
| | AND | | |
| RECIPIENT NAME AND ADDRESS | FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
| TEAM RUBICON INC 6171 W CENTURY BLVD SUITE 310 LOS ANGELES, CA 90045 | PC | DISASTER RELIEF SUPPORT FOR HURRICANE FLORENCE | 50,000. |
| HEARTLAND UNITEC WAY INC 1441 N WEBB RD GRAND ISLAND, NE 68803 | P.C. | 2018 FALL COMMUNITY GIVING CAMPAIGN MATCHING FUNDS | 46,654. |
| UNITED WAY OF RACINE COUNTY 2000 DOMANIK DRIVE RACINE, WI 53404-2910 | | 2018 FALL COMMUNITY GIVING CAMPAIGN MATCHING FUNDS | 44,666. |
| PEQUEA VALLEY SCHOOL DISTRICT 166 SOUTH NEW HOLLAND ROAD PO BOX 130 KINZERS, PA 17535 | лов | PLC TRAINING LAB | 23,529. |
| UNITED WAY OF LANCASTER COUNTY 630 JANET AVE LANCASTER, PA 17601 | PC | 2018 FALL COMMUNITY GIVING CAMPAIGN MATCHING FUNDS | 21, 681. |
| UNITED WAY OF METROPOLITAN CHICAGO 75 REMITTANCE DR SUITE 5828 CHICAGO, IL 60675-5828 | PC | 2018 FALL COMMUNITY GIVING CAMPAIGN MATCHING FUNDS | 13,454. |

ATTACHMENT 8 (CONT'D)

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2018 FORM 990-PF

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

| | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND | - | |
|---|--|---|---------|
| RECIPIENT NAME AND ADDRESS | FOUNDATION STATUS OF RECIPIENT | PURFOSE OF GRANT OR CONTRIBUTION | AMOUNT |
| LAKE AGASSIZ HABITAT FOR HUMANITY 210 11TH STREET N MOORHEAD, MN 56550 | PC | 2018 lake agassiz habitat for humanity homes - 3 homes total | 10,000. |
| HUNGER TASK FORCE INC 201 S HAWLEY CT MILWAUKEE, WI 53214-1966 | PC | THE HUNGER TASK FORCE FARM | 10,000. |
| DUPAGE HABITAT FOR HUMANITY 1600 E ROOSEVELT RD STE B WHEATON, IL 60187 | DG. | COMMUNITY BUILDING GRANT 2018 | 10,000. |
| RACINE HABITAT FOR HUMANITY INC 1501 VILLA ST RACINE, WI 53403 | PC , | 1913 CARLISLE AVENUE | 10,000. |
| WICHITA HABITAT FOR HUMANITY PO BOX 114 WICHITA, KS 67201-0114 | PC | COMMUNITY BUILD | 10,000. |
| UNITED WAY OF CASS CLAY 219 7TH ST S FARGO, ND 58107-1609 | PC | 2018 FALL COMMUNITY GIVING CAMPAIGN MATCHING FUNDS | 6,005. |

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

ATTACHMENT 8 (CONT.D)

| | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR | | |
|---|---|--|----------|
| RECIPIENT NAME AND ADDRESS | AND FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
| BURLINGTON/WEST BURLINGTON AREA UNITED WAY 218 NORTH THIRD STREET, STE 217 BURLINGTON, IA 52601 | PC | 2018 FALL COMMUNITY GIVING CAMPAIGN MATCHING FUNDS | 5, 382 . |
| JUNIOR ACHIEVEMENT OF CHICAGO 651 W WASHINGTON BLVD STE 404 CHICAGO, IL 606£1 | SQ. | JUNIOR ACHIEVEMENT DUPAGE COUNTY CLASS SPONSORSHIP PROGRAM | 4,000. |
| PURDUE UNIVERSITY 225 S UNIVERSITY ST WEST LAFAYETTE, IN 47907-2093 | S.A. | CNH SCHOLARSHIPS TO ABE STUDENTS (AGRICULTURAL AND BIOLOGICAL ENGINEERING) | 4,000. |
| JUNIOR ACHIEVEMENT OF WISCONSIN INC PO BOX 1721 RACINE, WI 53401-1721 | P.C. | JUNIOR ACHIEVEMENT IN RACINE SCHOOLS (JUNIOR ACHIEVEMENT SERVICING RACINE AND KENOSHA COUNTIES) | 4,000. |
| JUNIOR ACHIEVEMENT OF LINCOLN INC PO BOX 110 GRAND ISLAND, NE 68802 | Ď. | JUNIOR ACHIEVEMENT SPONSOR OF ENGLEMAN, SHOEMAKER AND GATES ELEMENTARY SCHOOLS (JUNIOR ACHIEVEMENT DISTRICT OF GRAND ISLAND) | 4,000. |
| JUNIOR ACHIEVEMENT OF THE HEARTLAND 800 12TH AVE MOLINE, IL 61265 | | JA CORE-MISSION PROGRAMS: DEVELOPING OUR FUTURE WORKFORCE | 4,000. |

2018 FORM 990-PF

FORM 990PE, PAET XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

| | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR | | |
|---|---|---|---------|
| RECIPIENT NAME AND ADDRESS | FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
| JUNIOR ACHIEVEMENT OF SOUTH CENTRAL PENNSYLVANIA 610 SOUTH GEORGE STREET YORK, PA 17401 | P.C. | JA'S 2018-19 STEM SUMMIT PROGRAMS IN LANCASTER COUNTY | 4,000. |
| UNITED WAY OF QUAD CITIES 852 MIDDLE RD SUITE 401 BETTENDORE, IA 52722 | . 24 | 2018 FALL COMMUNIY GIVING CAMPAIGN MATCHING FUNDS | 3, 594. |
| BURLINGTON AREA COMMUNITY YMCA-YWCA 2410 MT PLEASAN: STREET BURLINGTON, IA 52601-2764 | , , | CAMP MCBRIDE RENOVATION | 3,200. |
| YWCA OF CASS CLAY 3100 12TH AVE N FARGO, ND 58102 | | YWCA CASS CLAY OPERATING SUPPORT | 3,000. |
| AMERICAN ONLINE GIVING FOUNDATION, INC. (AOGF) PO BOX 645725 PITTSBURGH, PA 15264-5255 | PC . | PAYMENTS TO DONOR ADVISED FUND MANAGED BY BENEVITY, INC. FOR CHARITABLE DONATIONS (HURRICANE FLORENCE DISASTER RELIEF CAMPAIGN - TEAM RUBICON, INC. MATCHING FUNDS) | 4,455. |
| LANCASTER LEBANCN HABITAT FOR HUMANITY 443 FAIRVIEW AVENUE LANCASTER, PA 17603-5713 | PC | SOUTHWEST LANCASIER NEIGHBORHOOD REVITALIZATION | 2,500. |

ATTACHMENT 8 (CONT.D)

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

ATTACHMENT 8

| | | ATTAC | TTACHMENT 8 (CONT.D) |
|--|---|----------------------------------|----------------------|
| | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR | | |
| | . AND | | |
| RECIPIENT NAME AND ADDRESS | FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
| LANCASTER EDUCATION FOUNDATION 1020 LEHIGH AVENUE | PC | MCCASKEY ROBOTICS | 2,000. |
| LANCASTER, PA 17602 | | | |

2,000.

2,000.

2,000.

| 8 | 8 | 8 | 1 |
|--|---|---|--|
| JAMES B. STERE STUDENT SCHOLARSHIP IN THE COLLEGE OF AGRICULTURAL SCIENCES FOR AGRICULTURAL AND BIOLOGICAL ENGIENEERING STUDENTS | HOUSING INITIATIVES FOR THE HOMELESS | HOLIDAY FOOD BASKET PROGRAM - MATCHING FUNDS | 2018 FALL COMMUNITY GIVING CAMPAIGN MATCHING FUNDS |
| лоб | PC | PC | DA. |
| PENNSYLVANIA STATE UNIVERSITY 235 AG ADMINISTAATION BLDG UNIVERSITY PARK, PA 16802 | CROSSNET MINISTRIES PO BOX 154 NEW HOLLAND, PA 17557-0154 | RACINE KENOSHA COMMUNITY ACTION AGENCY 2113 N WISCONSIN ST RACINE, WI 53402 | UNITED WAY OF MANITOWOC COUNTY INC. 21 EAST WALDO BLVD MANITOWOC, WI 54220 |

2,000.

1,871.

1,606.

BICYCLE DRIVE - MATCHING FUNDS

PC

SALVATION ARMY WICHITA COMMAND

WICHITA, KS 67202-2010

350 N MARKET ST

2018 FORM 990-PF

| YEAR | |
|------------------|--|
| ID DURING THE | |
| CONTRIBUTIONS PA | |
| - GRANTS AND | |
| PF, PART XV | |
| FORM 990 | |

ATTACHMENT 8 (CONT.D)

| | | AMOUNT | 1,000. | 1,000. | 1,000. | 950. | . 006 | 819. |
|---|-----|----------------------------------|---|--|---|--|---|--|
| | | PURPOSE OF GRANT OR CONTRIBUTION | ANNUAL COMMUNITY SUPPORT CAMPAIGN | SWIFT COUNTY MARCH FOOD SHARE CAMPAIGN | WILDLIFE EXPLORERSRACINE 200 | SAFE SCHOOL: BULLYING PREVENTION | SUPPORT FOR DEVELOPMENT OF THE NEW DEMENTIA AND ASSISTED LIVING FACILITY | 2018 FALL COMMUNITY GIVING CAMPAIGN MATCHING FUNDS |
| RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR | AND | FOUNDATION STATUS OF RECIPIENT | D _A | PC | PC | 000 | PC | PC |
| | | RECIPIENT NAME AND ADDRESS | GRAND ISLAND YKCA 221 E SOUTH FRCNT ST GRAND ISLAND, NE 68801 | PRAIRIE FIVE CAC INC PO BOX 159 MONTEVIDEO, MN 56265 | RACINE ZOOLGGICHL SOCIETY 200 GOOLD STREET RACINE, WI 53402 | JACKSON ELEMENTARY SCHOOL 1201 N 18TH STREET MANITOWOC, WI 54220 | SWIFT COUNTY BEHSON HOSPITAL FOUNDATION 1815 WISCONSIN AVE BENSON, MN 56215 | UNITED WAY OF THE PLAINS 245 N WATER WICHITA, KS 672C2 |

ATTACHMENT 8 (CONT'D)

2018 FORM 990-PF

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

| AMOUNT | 700. | 570. | 550. | . 900. | 390. | 310. |
|--|--|--|---|--|---|---|
| PURPOSE OF GRANT OR CONTRIBUTION | FRC 2019 SEASON | 2018 FALL COMMUNITY GIVING CAMPAIGN MATCHING FUNDS | MI. PLEASANT RECREATION SUMMER PROGRAMS | GIRLS ON THE RUN - VALDERS MIDDLE SCHOOL | 2018 FALL COMMUNITY GIVING CAMPAIGN MATCHING FUNDS | 2018 FALL COMMUNITY GIVING CAMPAIGN MATCHING FUNDS |
| RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT | PC | PC | 000 | 000 | PC | PC |
| RECIPIENT NAME AND ADDRESS | AURORA ROBOTICS INC 1735 BEECHWOOD DRIVE AURORA, NE 68813-1408 | UNITED WAY OF CENTRAL INDIANA PO BOX 88409 INDIANAPOLIS, IN 46208-0409 | VILLAGE OF MT PLEASANT 8811 CAMPUS DRIVE RACINE, WI 53406 | VALDERS MIDDLE SCHOOL 138 JEFFERSON STREET VALDERS, WI 54245 | HEART OF ILLINOIS UNITED WAY 509 W HIGH STREET PEORIA, IL 61606 | UNITED WAY OF THE BAY AREA 550 KEARNY STREET SUITE 1000 SAN FRANCISCO, CA 94108 |

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FORM 990PF,

ATTACHMENT 8 (CONT',D)

| TO SUBSTANTIAL CONTRIBUTOR AND N STATUS OF RECIPIENT PURPOSE OF GRANT OR CONTRIBUTION AMOUNT | 2018 FALL COMMUNITY GIVING CAMPAIGN MATCHING FUNDS 275. | SUPPORT THE SWIFT COUNTY 4-H FEDERATION AND 150. SPONSOR RECENT PROJECT AWARDS | 2018 FALL COMMUNITY GIVING CAMPAIGN MATCHING FUNDS 98. | 2018 FALL COMMUNITY GIVING CAMPAIGN MATCHING FUNDS 98. |
|--|---|--|---|--|
| RELATIONSHIP TO SUBSTANTIAL CONTRI. AND FOUNDATION STATUS OF RECIPIENT | S. | G . | PC | PC |
| RECIPIENT NAME AND ADDRESS | UNITED WAY OF HUHT COUNTY INCORPORATED 4912 LEE STREET GREENVILLE, TX 75401 | SWIFT COUNTY 4-H FEDERATION 301 14TH ST NORTH - COURTHOUSE BENSON, MN 56215-0305 | UNITED WAY OF WEST CENTRAL MINNESOTA PO BOX 895 WILLMAR, MN 5620: | UNITED WAY OF LAKE COUNTY 330 S GREENLEAF STREET |

322,907. TOTAL CONTRIBUTIONS PAID

FORM 990PF, PART XV - CONTRIBUTIONS APPROVED FOR FUTURE PAYMENT

V 18-7.6F

2018 FORM 990-PF

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ATTACHMENT 9

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| | | PURPOSE OF GRANT OR CONTRIBUTION | PAYMENTS TO DONOR ADVISED FUND MANAGED BY | BENEVITY, INC. FOR CHARITABLE DONATIONS (EMPLOYEE | GIVING CAMPAIGN - MATCHING FUNDS IN SUPPORT OF | THE LEUKEMIA & LYMPHOMA SOCIETY & PENNSYLVANIA | FFA FOUNDATION, INC.) |
|---|-----|----------------------------------|---|---|--|--|-----------------------|
| RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR | AND | FOUNDATION STATUS OF RECIPIENT | PC | | | | |
| | | RECIPIENT NAME AND ADDRESS | AMERICAN ONLINE GIVING FOUNDATION | PO BOX 645725 | PITTSBURGH, PA 15264-5255 | | |

2,190.

AMOUNT

19,987.

MIDDLE SCHOOL SUMMER SCHOOL MANUFACTURING

GOV

FARGO PUBLIC SCHOOLS 415 NORTH 4TH STREET FARGO, ND 58102

PRE-ENGINEERING ACADEMY

TOTAL CONTRIBUTIONS APPROVED

22,177.

ATTACHMENT 9

487507 3857 11/14/2019