2949132710013

### 990-PF

### Return of Private Foundation

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

2018

Department of the Treasury

▶Do not enter social security numbers on this form as it may be made public. ▶Go to www.irs.gov/Form990PF for instructions and the latest information. \_\_\_\_\_

Inter	nal Rev	venue Service	▶Go to	www.irs.gov/Forn	n990PF for instruc	tions and the	latest info	rmation.	Open to Public Inspec	tion
For	calen	dar year 2018 or t	ax year beginning	, 1	and ending					
Na	me of for	oundation					A Emple	oyer identification number		
~			,				1 47	6000560		
		S LONG FO	DUNDA'T'TON mber if mail is not delivered	to stored address)		Da areste inte		-632 <u>9</u> 563		
			NOOD BLVD.,					hone number (see instructio	ns)	
			ntry, and ZIP or foreign pos		<u> </u>		<u> </u>			=
		T LOUIS		MO 63105			C If exer	mption application is pendin	g, check here	Ш
		all that apply	Initial return		rn of a former public	charity	   D 1 Fo	reign organizations, check i	here	
			Final return	Amended	•	o		reign organizations meeting		ш
			Address change	Ħ				% test, check here and atta		
ш с	`hock	type of organization	on X Section 501(	<u> </u>		011	1			
_			xempt charitable trus		; roundation le private foundatior	04	1	ate foundation status was te n 507(b)(1)(A), check here	rminated under	
		rket value of all as				ooruol	┪		<b>.</b>	
		rear (from Part II, o	I –	Other (specify)	A Casii A	ccrual	1	oundation is in a 60-month section 507(b)(1)(B), check	_	X
	-		365,094 (Par		ho on each back )		}		.,,-,-	
	art I		venue and Expense				1		(d) Disbursements	_
_ <u></u>	41 <b>.</b>		(b), (c), and (d) may not ne		(a) Revenue and expenses per	(b) Net in		(c) Adjusted net	for charitable	
			nn (a) (see instructions) )		books	inco	mie	income	purposes (cash basis only)	
	1	Contributions, gifts	grants, etc , received (a	attach schedule)	2,018,42	2				<u>l</u>
_	2	Check ▶ ☐ If t	he foundation is <b>not</b> req	uired to attach Sch B						
•	3	Interest on savin	igs and temporary ca	ish investments	7,61	7	1,685			
	4	Dividends and in	iterest from securities	S	4,42	8				
	5a	Gross rents				_ <u> </u>		·		1
<u>o</u>	b	Net rental incom	e or (loss)					1		
Š	6a	Net gain or (loss) from	sale of assets not on line 10		5.9	2				Į
Revenue	ь	Gross sales price for al	l assets on line 6a	39 <b>,</b> 697						
ď	7	Capital gain net	income (from Part IV	', line 2)			31,652			!
	8	Net short-term c	apıtal gaın						0	
	9	Income modifica	itions							
	10a	Gross sales less retur	ns and allowances							_
	Ь	Less Cost of go	ods sold	<del></del>					ļ	{
	C	Gross profit or (I	oss) (attach schedule	e)					<u> </u>	!
	11	Other income (a	•							{
	12_	Total. Add lines		<del></del>	2,031,05		33,337	(	0	!
ses	13	Compensation o	f officers, directors, t	rustees, etc		0			<del>                                     </del>	
nse	14	• •	salaries and wages						<del>                                     </del>	
<b>\</b> \( \)	15	•	employee benefits	OWNER 1	00.00			<del>-</del> -	<del> </del>	
ŽŽ.	16a		h schedule) SEE		28,22				28,2	
Administrative Expe	b		(attach so向便便)		18,81	· ·			18,8	
Ĭ,	C		fees (attach schedule)	STMT	153,36	T			153,3	<u>61</u>
ێڹ	17	Interest	P NOV 2		4.0	5			<del>                                     </del>	25
Ę.	18		dula) see instructions)		42	<u> </u>			+ 4	25
Ξ	19	. ,	h schedule) and depletic			<del>                                     </del>			<del>                                     </del>	!
Ad	20	Occupancy	OGDE	N, UI	74 00	<del> </del>		<u>.</u>	74.0	20
and	21		ces, and meetings		74,93	<u> </u>			74,9	<u>30</u>
<u>ā</u> /	22	Printing and pub		стмт с	307 00	Q -			207 0	00
ng.	23	Other expenses (att so	•	STMT 5	397,80	0			397,8	<u>00</u>
ati	24		and administrative	expenses.	673 E	2	ام	,	672 5	62
oe.	25	Add lines 13 thro	•		673,56		0		0 673,5	
Operating	25	Contributions, gifts, gra		ld lines 24 and 25	1,680,08				1,680,0	
•	26		nd disbursements. Ad	iu lines 24 and 25	2,353,65		0		0 2,353,6	<u> </u>
•	27	Subtract line 26		diahuraamsanta	-322,59			1		- }
	a		e over expenses and		-322,35		33,337	<u> </u>		
	b		income (if negative, come (if negative, er	•		+	10,001		n	
	1 (2	MUIUSIEU NEI IN	COURT II LIBUNIIVA PI	11 (2) -(3-)		1				

For Raperwork Reduction Act Notice, see instructions.

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Form 990-PF (2018)

Г	Part I	Balance Sheets Attached schedules and amounts in the description column	1	Beginning of year	End o	f year
_		should be for end-of-year amounts only (See instructions )	)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing				
	2	Savings and temporary cash investments		1,488,257	1,169,234	1,169,234
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see				
		instructions)				
	7	Other notes and loans receivable (att. schedule)			1	
		Less allowance for doubtful accounts	0		· · · · · · · · · · · · · · · · · · ·	
S	8	Inventories for sale or use	_			
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments – U.S. and state government obligations (attach schedule) STMT	6	210,542	206,974	195,860
	b	Investments – corporate stock (attach schedule)				
	С	Investments – corporate bonds (attach schedule)				
ĺ	11	Investments – land, buildings, and equipment basis			:	
i		Less accumulated depreciation (attach sch.)			··	
	12	Investments – mortgage loans				
	13	Investments – other (attach schedule)				
	14	Land, buildings, and equipment basis			1	
		Less accumulated depreciation (attach sch.)				
	15	Other assets (describe >	)			<del></del>
	16	Total assets (to be completed by all filers – see the	,			· · · · · · · · · · · · · · · · · · ·
		instructions Also, see page 1, item I)		1,698,799	1,376,208	1,365,094
٦	17	Accounts payable and accrued expenses				
	18	Grants payable				
es	19	Deferred revenue				
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable (attach schedule)				ì
	22	Other liabilities (describe ▶	)			
	23	Total liabilities (add lines 17 through 22)	,	0	0	
П		Foundations that follow SFAS 117, check here	<b>▶</b> □			
ces		and complete lines 24 through 26, and lines 30 and 31.	_			ĺ
2	24	Unrestricted				
ala	25	Temporanly restricted				
8	26	Permanently restricted			_	
Ĕ		Foundations that do not follow SFAS 117, check here	<b>▶</b> 🗓			j
핍		and complete lines 27 through 31.	_			
0	27	Capital stock, trust principal, or current funds				İ
iet	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
AS.	29	Retained earnings, accumulated income, endowment, or other funds		1,698,799	1,376,208	
Net Assets or Fund Balan	30	Total net assets or fund balances (see instructions)		1,698,799	1,376,208	
Z	31	Total liabilities and net assets/fund balances (see				4
$\perp$		instructions)		1,698,799	1,376,208	
	Part I					
1		net assets or fund balances at beginning of year - Part II, column (a), line	30 (mu	st agree with		
		of-year figure reported on pnor year's return)			1	1,698,799
		amount from Part I, line 27a			2	-322,591
		r increases not included in line 2 (itemize)			3	<del></del>
		ines 1, 2, and 3			4	1,376,208
_		eases not included in line 2 (itemize)			5	1 074 005
_6	ı otal	net assets or fund balances at end of year (line 4 minus line 5) – Part II, c	column (t	o), line 30	6	1,376,208

Part IV Capital Gains a	<u>nd Losses for Tax on Investm</u>	<u>ent Income</u>					
	(a) List and describe the kind(s) of property sold (for example, real estate,  2-story brick warehouse, or common stock, 200 shs MLC Co )  (b) How acquired P - Purchase D - Donation						
1a 37 T ROWE PRICE	GWTH STOCK FD		D	03/01	/18	03/14/18	
b 65 ISHARES S&P	500 GROWTH		D	04/04	1/13	01/12/18	
c 70 PFIZER INC			D	03/18	3/02	12/07/18	
d 650 REATA PHARM	MACEUTICALS	_	D	12/18	3/09	07/03/18	
e							
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale	-	(h) Gaın ((e) plus (f)	or (loss) minus (g))	
a 2,579			2,579				
<b>b</b> 10,382			5,310	_		5,072	
<u>c</u> 3,080			155			2,925	
<u>d</u> 23,656			1			23,655	
e							
Complete only for assets showin	g gain in column (h) and owned by the fo	oundation on 12/31/6	59	(1)	Gains (Col	(h) gain minus	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	1 ''	s of col (i) (j), if any			less than -0-) or	
_b						5 <b>,</b> 072	
С			2,925				
d						23,655	
_e							
2 Capital gain net income or (net c	apital loss) If gain, also enter in If (loss), enter -0- in			31,652			
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and (6	5)					
If gain, also enter in Part I, line 8	, column (c) See instructions If (loss), e	enter -0- in					
Part I, line 8				3			
	nder Section 4940(e) for Reduc			me			
(For optional use by domestic private	foundations subject to the section 4940	(a) tax on net invest	ment income)				
If section 4940(d)(2) applies, leave th	ns part blank						
. , , , , ,	•						
	tion 4942 tax on the distributable amoun	• •	pase period?			∐ Yes X No	
	y under section 4940(e) Do not complet				,	<u> </u>	
1 Enter the appropriate amount in	each column for each year, see the instr	uctions before makir	ng any entnes				
(a) Base penod years	(b)		(c)		Disti	(d) abution ratio	
Calendar year (or tax year beginning in	<u> </u>		of noncharitable-use assets			ivided by col (c))	
2017	893	,915	346,0			2.583218	
2016		,112	294,0			<u>1.343471</u>	
2015		, 999	472,			0.681190	
2014	29	<u>, 159</u>	475,6	514		0.061308	
2013							
2 Total of line 1, column (d)				2	ļ	4.669187	
3 Average distribution ratio for the	5-year base period – divide the total on I	ine 2 by 5 0, or by					
the number of years the foundate	on has been in existence if less than 5 years	ears		3		1.167297	
4 Enter the net value of nonchantal	ble-use assets for 2018 from Part X, line	5		4		1,138,683	
5 Multiply line 4 by line 3				5	_	1,329,181	
6 Enter 1% of net investment income (1% of Part I, line 27b)				6		333	
7 Add lines 5 and 6						1,329,514	
8 Enter qualifiums distributions from	Part XII. line 4					2,353,650	
8 Enter qualifying distributions from		and complete thet	nod upies = 40/ 4= =	to Sooths		2,333,630	
Part VI instructions	n line 7, check the box in Part VI, line 1b	, and complete that	part using a 1% tax ra	ale see ine	;		

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Form	990-PF (2018) CHRIS LONG FOUNDATION 47-6329563				Pa	age 4	
l Pa	art 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 ▶ ☐ and enter "N/A" on line 1						
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1				333	
	here ▶ X and enter 1% of Part I, line 27b					1	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of						
	Part I, line 12, col (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2		·		0	
3	Add lines 1 and 2	3	-			333	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4				0	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5				333	
6	Credits/Payments		· · · · · · · · · · · · · · · · · · ·				
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 544						
b	Exempt foreign organizations – tax withheld at source 6b					1	
С	Tax paid with application for extension of time to file (Form 8868)  6c						
d	Backup withholding erroneously withheld 6d	_					
7	Total credits and payments Add lines 6a through 6d	7				544	
8	Enter any penalty for underpayment of estimated tax. Check here  if Form 2220 is attached	8					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		-			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			- 2	211	
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 211 Refunded ▶	11					
l Pa	rt·VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				Yes	No	
	participate or intervene in any political campaign?			1a		Χ	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the						
	instructions for the definition			1b		<u>X</u>	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					- 1	
	published or distributed by the foundation in connection with the activities						
С	Did the foundation file Form 1120-POL for this year?			1c		_X_	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			1 1		- 1	
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$	_				1	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
_	on foundation managers  \$					<u>_</u>	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	$\longrightarrow$	<u>X</u>	
	if "Yes," attach a detailed description of the activities					1	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					<del>~</del>	
4.	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	$\rightarrow$	X	
4a b	Did the foundation have unrelated business gross income of \$1,000 or more during the year?  If "Yes," has it filed a tax return on Form 990-T for this year?	,	N/A	4a	$\dashv$		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	1	. 1 / 12	4b 5	$\overline{}$	X	
J	If "Yes," attach the statement required by General Instruction T			-	$\rightarrow$	1	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					- 1	
-	By language in the governing instrument, or					ļ	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that					- 1	
	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	t XV		7	Х		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.						
	MO, VA, CA, PA, OK, MD, NY, WA, OH						
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 <sup>2</sup> If "No," attach explanation			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 taxable year beginning in 2018? See instructions for Part XIV If "Yes,"						
	complete Part XIV			9		<u>X</u>	4
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their						
	· · · · · · · · · · · · · · · · · · ·	7		10 orm 99	Х		

l P	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	_13	Х	
	Website address ► CHRISLONGFOUNDATION.ORG			
14	The books are in care of ▶ GUS GAST Telephone no ▶ 314 –	126-	230	0
	100 S BRENTWOOD BLVD			
	Located at ▶ ST. LOUIS MO ZIP+4 ▶ 6310	5		_
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			
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	l	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			
<u>i Pa</u>	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<del></del> -		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?  Yes X No  (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X 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)?  Yes X No			!
	the benefit or use of a disqualified person)?  (6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days )	'		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
_	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions  N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	1		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2018?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2018?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	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.) $N/A$	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	▶ 20   , 20   , 20   , 20	!		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?  Yes X No			
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or	ĺ		
	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			-
4-	foundation had excess business holdings in 2018 )  N/A	3b		v
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	41-		X
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b Form 99	10-PF	
		rorm 73	, v - r - r	12018

P	art VII-B Statements Regardin	g Activities for Which For	<u>m 4720 May Be F</u>	Required (cont	inued)			
5a	During the year did the foundation pay or	ncur any amount to		<u></u>			Yes	No
	(1) Carry on propaganda, or otherwise att	empt to influence legislation (section	on 4945(e))?		∕es X No			
	(2) Influence the outcome of any specific	public election (see section 4955),	or to carry on,	_	_			
	directly or indirectly, any voter registra	tion drive?			∕es X No			
	(3) Provide a grant to an individual for tra-	vel, study, or other similar purpose	s?	Πì	∕es X No			
	(4) Provide a grant to an organization oth	er than a charitable, etc , organizat	ion described in	_	_			
	section 4945(d)(4)(A)? See instruction	s		\	res X No			
	(5) Provide for any purpose other than rel	igious, charitable, scientific, literary	, or educational	_	<del></del>			
	purposes, or for the prevention of crue	elty to children or animals?			res X No			
b	If any answer is "Yes" to 5a(1)-(5), did an	y of the transactions fail to qualify i	under the exceptions d	lescribed in				
	Regulations section 53 4945 or in a currer	nt notice regarding disaster assista	nce? See instructions		N/A	5b		
	Organizations relying on a current notice r	egarding disaster assistance, chec	k here		▶ □			
С	If the answer is "Yes" to question 5a(4), do	es the foundation claim exemption	from the tax			i		
	because it maintained expenditure respon	sibility for the grant?		N/A 🗌 ነ	res No			
	If "Yes," attach the statement required by	Regulations section 53 4945-5(d)		_				
6a	Did the foundation, during the year, receiv		o pay premiums					
	on a personal benefit contract?	•			res X No			
b	Did the foundation, during the year, pay pr	emiums, directly or indirectly, on a	personal benefit conti	ract?		6b		Х
	If "Yes" to 6b, file Form 8870	•	•					
7a	At any time during the tax year, was the fo	undation a party to a prohibited tax	shelter transaction?		res X No			
b	If "Yes," did the foundation receive any pro-	oceeds or have any net income attr	butable to the transac	ction?	_N/A	7b		
8	Is the foundation subject to the section 49	60 tax on payment(s) of more than	\$1,000,000 in					
	remuneration or excess parachute payme				∕es ∑ No		-	
LP:	art VIII Information About Offi	cers, Directors, Trustees,	Foundation Man	agers, Highly	Paid Employ	ees,		
	and Contractors							
1	List all officers, directors, trustees, and f	oundation managers and their co	ompensation. See ins	structions.				
	(a) Name and add	Iress	(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		pense ad r allowa	
CI	HRISTOPHER H. LONG	SAINT LOUIS	TRUSTEE			<del>                                     </del>		
	00 S BRENTWOOD BLVD SUITE 500	MO 63105	1.00	0	o			0
	EGAN O'MALLEY LONG	SAINT LOUIS	TRUSTEE					
10	00 S BRENTWOOD BLVD SUITE 500	MO 63105	1.00	0	o			0
	-							
2	Compensation of five highest-paid emp "NONE."	loyees (other than those include	ed on line 1 – see ins	tructions). If non	e, enter			
	(a) Name and address of each employee pa	d 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		pense ad r allowa	
NO	DNE							
Tota	I number of other employees paid over \$50	000			•			0
							A DE	

Form 990-PF (2018) CHRIS LONG FOUN	DATION	<del>17-632<u>9</u>563</del>		Page <b>7</b>
Part VIII Information About Officers	s, Directors, Trustees, Foundation	Managers, Highly Paid E	mplo	yees,
and Contractors (continued				
3 Five highest-paid independent contractors f	· · · · · · · · · · · · · · · · · · ·	. If none, enter "NONE."		
(a) Name and address of each pe		(b) Type of service		(c) Compensation
FRUITION STRATEGIES, LLC	HUNTINGTON BEACH			
1407 CALIFORNIA ST APT 4	CA 92648	CONSULTANT	+	73,000
	· · · · · · · · · · · · · · · · · · ·			
		<u> </u>	+	
Total number of others receiving over \$50,000 for pro	fessional services	· · · · · · · · · · · · · · · · · · ·	<b>•</b>	0
Part IX-A Summary of Direct Chari	table Activities			
List the foundation's four largest direct chantable activities during the organizations and other beneficiaries served, conferences convened		a number of		Expenses
1 N/A				
	<u> </u>		-	
2				
3				
4				
I Doubly D. L. Common of Drawn D.		<u>,                                      </u>		
Part IX-B Summary of Program-Re  Describe the two largest program-related investments made by the fe	lated Investments (see instructions			Amount
1 N/A			<u> </u>	vandan
		<del></del>	1	<u>-</u>
2				
All other program-related investments. See instructions				
3			1	
			<u>L</u>	
Total. Add lines 1 through 3		<u> </u>		

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Form 990-PF (2018)

2,353,650

4

Pa	art XIII Undistributed Income	e (see instructions	)			
			(a)	(b)	(c)	(d)
1	Distributable amount for 2018 from Part	XI,	Corpus	Years prior to 2017	2017	2018
	line 7				i i	56,601
2	Undistributed income, if any, as of the ei	nd of 2018				· · · · · · · · · · · · · · · · · · ·
а	Enter amount for 2017 only					
	Total for prior years 20 , 20	. 20			ŧ	
3	Excess distributions carryover, if any, to					,
	From 2013				į	
_	From 2014	5,982			,	
	From 2015	298,546			1	
d		380,411			,	
	From 2017	876,619			F	
f		0,0,013	1,561,558		1	
4	Qualifying distributions for 2018 from Pa	ort XII	1,301,330		t t	
7	line 4 ▶ \$2,353,650	ut All,			ŧ	
2	Applied to 2017, but not more than line 2	) Pa				
	Applied to undistributed income of prior				· · ·	
D	(Election required – see instructions)	years				
_	· · · · · · · · · · · · · · · · · · ·	loction			1	
C	Treated as distributions out of corpus (E required – see instructions)	iection			1	
4	Applied to 2018 distributable amount			<del></del>	1	56,601
			2,297,049	<del></del>	,	30,001
e E	J	`	2,231,043		T T	
5	Excess distributions carryover applied to					
	(If an amount appears in column (d), the	same			<u> </u>	
c	amount must be shown in column (a) )					
6	Enter the net total of each column as					
_	indicated below:	et line 5	3,858,607		,	
	Corpus Add lines 3f, 4c, and 4e Subtra Prior years' undistributed income Subtra		3,030,007	<u></u>	!	
Ь	line 4b from line 2b	aCl			, '	
_	Enter the amount of prior years' undistrib	hutad			1	
C	· · ·					
	income for which a notice of deficiency have received as an which the section 400					
	been issued, or on which the section 494 tax has been previously assessed	42(a)			į	
	· ·				1	
u	Subtract line 6c from line 6b Taxable					
_	amount – see instructions	lima			1	
е	Undistributed income for 2017 Subtract	iine				
	4a from line 2a Taxable amount – see					
£	Instructions Undistributed income for 2018 Subtract	lines			1	-
ı	4d and 5 from line 1. This amount must				1	
		ue			1	0
7	distributed in 2019					· · · · · · · · · · · · · · · · · · ·
′	Amounts treated as distributions out of c	· '			[	
	to satisfy requirements imposed by secti				'	
	170(b)(1)(F) or 4942(g)(3) (Election may	be			1	
•	required—see instructions)	2				
8	Excess distributions carryover from 2013				1	
^	applied on line 5 or line 7 (see instruction			-		
9	Excess distributions carryover to 201	J.	2 050 607		'	
4.0	Subtract lines 7 and 8 from line 6a		3,858,607			
10	Analysis of line 9					
a		5,982			,	
b	Excess from 2015	298,546				
С	Excess from 2016	380,411				
d	Excess from 2017	876,619			,	
е	Excess from 2018	2,297,049				

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

b The form in which applications should be submitted and information and materials they should include NI / D

c Any submission deadlines

N/A

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

N/A

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	Foundation status of recipient	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient	ļ					
a Paid during the year UNITED WAY OF GREATER PHIL. PO BOX 15760 PHILADELPHIA PA 19103	ADELPHIA NONE	PUB CHARITY	GENERAL	134,000				
SUMMER SEARCH PHILADELPHIA 101 HOWARD STREET SAN FRANCISCO CA 94105	NONE	PUB CHARITY	GENERAL	165,760				
FIGHT FOR THE FORGOTTEN 2525 NW 112TH OKLAHOMA CITY OK 73120	NONE	PUB CHARITY	GENERAL	15,877				
SUMMER SEARCH BOSTON 3840 WASHINGTON STREET BOSTON MA 02130	NONE	PUB CHARITY	GENERAL	138,108				
WORLDSERVE INTERNATIONAL P.O. BOX 3437 SPRINGFIELD MO 65808	NONE	PUB CHARITY	GENERAL	737,577				
COLLEGE BOUND 128 M STREET WASHINGTON DC 20001	NONE	PUB CHARITY	GENERAL	142,617				
THE LITTLE BIT FOUNDATION 516 HANLEY INDUSTRIAL CT SAINT LOUIS MO 63144	NONE	PUB CHARITY	GENERAL	142,617				
ST. PATRICK CENTER 800 TUCKER BLVD. SAINT LOUIS MO 63101	NONE	PUB CHARITY	GENERAL	4,095				
THE PHILADELPHIA FOUNDATION 1835 MARKET STREET PHILADELPHIA PA 19103	NONE	PUB CHARITY	GENERAL	25,000				
FIRST BOOK 1319 F STREET NW WASHINGTON DC 20004	NONE	PUB CHARITY	GENERAL ▶ 3a	74,600 1,680,088				
b Approved for future payment			► Ja	1,000,000				
N/A								
Total			▶ 3b					
Total								

3 Grants and Contributions Paid During		or Future Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year VARIOUS CHARITABLE ORGANIZ 100 S BRENTWOOD BLVD SAINT LOUIS MO 63105	ATIONS NONE	PUB CHARITY	GENERAL	99,83
		<u> </u>		
Total b Approved for future payment			▶ 3a	
N/A				
Total				
Total			<b>&gt;</b> 3b	

Enter gross amounts unless otherwise indicated

Part XVI-A Analysis of Income-Producing Activities

Excluded by section 512, 513, or 514

Unrelated business income

	unis uniess outerwise maicalea	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Program ser	vice revenue.					(See instructions )
a						
b						
٠.						
е						
f						
g Fees an	d contracts from government agencies					
2 Membership	dues and assessments					
3 Interest on s	avings and temporary cash investments			14	7,617	
	nd interest from securities			14	4,428	
5 Net rental in	come or (loss) from real estate		-		,	
	anced property					
	i-financed property				-	
	come or (loss) from personal property			<b>†</b>		
7 Other investi						
	s) from sales of assets other than inventory			18	592	
	or (loss) from special events			+ + +	3,2	···
	or (loss) from sales of inventory			1 1		
11 Other revenu		-		+ +		<del></del>
		<b>—</b>		+		<del> </del>
<u> </u>				+		<del></del>
			<u>'</u>	1	-	
e				+		
	d columns (b), (d), and (e)				12,637	0
	ne 12, columns (b), (d), and (e)			<u> </u>		12,637
					13	12,637
Part XVI-B	n line 13 instructions to verify calculations )  Relationship of Activities to the Ac	complishm	ont of Evennt B	urnosos		
Line No.	Explain below how each activity for which income					
Line No. ▼	accomplishment of the foundation's exempt purpo					no. )
N/A	accomplishment of the loundation's exempt purpo	ses (other than	by providing funds it	or such pur	poses) (See instructio	
N/A						
		<del></del>		•		
		· · · · · ·		<del></del>		
		<del></del>				
	<del>-</del>	<del></del>				
		<del></del>				
			· .			
			<u>.                                    </u>			<del></del>
			·			
						5 000-DE (0040)

UIIII 33		of CHILTO HOL					0022303			ray	le io
Part		Information Reg	arding Tr	ansfers To an	d Transaction	ons and Rela	ationships W	ith N	oncharitable E	xemp	ot
1 D		Organizations  Prization directly or indire	nothe ongoon	in any of the follow	ing with any other	organization do	achad			Yes	No
		1(c) (other than section			-	-	scribeo			34.52	100
	ganizations	· · ·	50 ((0)(0) 0	rgamzanorio, or m	000000000000000000000000000000000000000	ing to pointed					
	-	om the reporting founda	ition to a none	charitable exempt o	organization of						
	) Cash	, 3		·					1a(1)		X
(2	) Other as	sets			•				1a(2)		Х
<b>b</b> O	her transa	ctions									
(1	) Sales of	assets to a noncharitat	ole exempt or	rganization					1b(1)		X
(2	) Purchas	es of assets from a nor	ncharitable ex	xempt organization					1b(2)	<u> </u>	X
(3	) Rental o	facilities, equipment, o	or other asse	ts					1b(3)		X
		sement arrangements							1b(4)		X
		loan guarantees							1b(5)		<u>X</u>
-		ance of services or mer		<del>-</del>					1b(6)		X
	•	cilities, equipment, mai	-	•		The second of the second	aba a da a	-ls	10	اا	<u>X</u>
		to any of the above is '		_		· ·					
		goods, other assets, or transaction or sharing a									
	ine no	(b) Amount involved		e of noncharitable exem					is, and sharing arrangeme	nts	
A/N		· · · · · · · · · · · · · · · · · · ·	·			17,555			<u> </u>		
· · · · ·						<u> </u>					
				·							
				·····	<del></del>		····				
			ļ				- <del></del>				
			<u> </u>		····				<del></del>		
		-		<del></del>	<del></del>				<del></del>		
	<u></u>										
					· · · · · · · · · · · · · · · · · · ·				<del></del>		
									<del></del>		
2a Is	the founda	tion directly or indirectly	y affiliated wi	th, or related to, on	e or more tax-exe	mpt organization	<u> </u>				
de	scribed in	section 501(c) (other th	nan section 5	01(c)(3)) or in sect	ion 527?				☐ Ye	s X	No
b If	'Yes," com	plete the following sche	edule.								
		) Name of organization		(b) Type of o	rganization		(c) Descrip	tion of re	lalionship		
N/	<u>A</u>										
		· · · · · · · · · · · · · · · · · · ·					<del></del>		<del> </del>		
					·						
		······································		<u> </u>	· · · · · · · · · · · · · · · · · · ·		<del></del>		<del></del>		
	Under pen	alties of perjury, I declare tha	t I have examine	) ed this return, including	accompanying sched	ules and statements.	and to the best of my	knowlede	ge and belief, it is true.	<del></del>	
		d complete Declaration of pr						ſ	May the IRS discuss this r	aluro	_
Sign			/	,				l	with the preparer shown b		_
lere		///////	, 					1	See instructions X	Yes	No
1010		Kil			1//	5/19	TRUS	TEE			
	Signa	ture of officer or trustee			Dále	<del>/ · / ·</del>	Title				
	Print/Typ	pe preparer's name		1	Preparer's signatur	e			Date	Check	$\overline{\neg}$
المارة	1 "				[					self-emp	" ployed
ald	LAWRE	NCE E. STAAB	CPA		LAWRENCE	E. STAAB	CPA		11/04/19		
repare Ise Onl	Fum's n			SLE LLC				PTIN	P00274		
oc UIII	Firm's a			E STE 341			ļ	Firm's			
		ST. L	OUIS,	MO 63119	)			Phone	<u> 314−96</u>	<u>8-5</u>	<u> 341</u>

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

Internal Revenue Service

Name of the organization

**Schedule of Contributors** 

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

**Employer identification number** 

2018

CHRIS LONG I	FOUNDATION	47-6329563
Organization type (check		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private following	undation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt chantable trust treated as a private foundate	tion
	501(c)(3) taxable private foundation	
Note: Only a section 501( instructions	is covered by the <b>General Rule</b> or a <b>Special Rule</b> . c)(7), (8), or (10) organization can check boxes for both the General Rule ar	d a Special Rule See
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributer or property) from any one contributor. Complete Parts I and II. See instruct contributions.	-
Special Rules		
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 and that received from any one contributor, during the year, total contributions of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1	or 990-EZ), Part II, line s of the greater of <b>(1)</b>
contributor, during literary, or educati	in described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that in the year, total contributions of more than \$1,000 exclusively for religious, clonal purposes, or for the prevention of cruelty to children or animals. Complete instead of the contributor name and address), II, and III	nantable, scientific,
contributor, during contributions total during the year for General Rule app	in described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that if the year, contributions exclusively for religious, chantable, etc., purposes, bed more than \$1,000. If this box is checked, enter here the total contribution an exclusively religious, chantable, etc., purpose. Don't complete any of the lites to this organization because it received nonexclusively religious, chantamore during the year.	out no such s that were received e parts unless the
990-EZ, or 990-PF), but it	that isn't covered by the General Rule and/or the Special Rules doesn't file s must answer "No" on Part IV, line 2, of its Form 990, or check the box on line, to certify that it doesn't meet the filing requirements of Schedule B (Form section).	ne H of its Form 990-EZ or on its

PAGE 1 OF 2

Page **2** 

Name of organization

CHRIS LONG FOUNDATION

Employer identification number 47-6329563

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 CHRIS LONG Person 617 PARK STREET **Payroll** \$ 375,000 Noncash CHARLOTTESVILLE VA 22902 (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. 2 GREG LEDFORD Person 17 RITZ COVE DRIVE **Payroll** 90,000 Noncash DANA POINT CA 92629 (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 3 JUSTIN WREN FOUNDATION Person 13208 MAYBERRY PL Payroll 45,000 Noncash OK 73142 OKLAHOMA CITY (Complete Part II for noncash contributions ) (a) (b) (c) (d) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. 4 KYLE LONG Person 525 CRAB TREE LN Payroll 63,505 Noncash IL 60045 LAKE FOREST (Complete Part II for noncash contributions ) (b) (c) (d) (a) Type of contribution Name, address, and ZIP + 4 **Total contributions** No 5 PHIL WENDEL Person 1701 BENTIVAR DRIVE **Payroll** 95,000 \$ Noncash CHARLOTTESVILLE VA 22911 (Complete Part II for noncash contributions) (b) (d) (a) (c) Type of contribution Name, address, and ZIP + 4 **Total contributions** No. 6 TAYLOR GLOBAL INC Person 350 5TH AVENUE SUITE 3800 Payroll 55,000 \$ Noncash NY 10118 NEW YORK (Complete Part II for noncash contributions)

PAGE 2 OF 2

Pane 2

Name of organization

Employer identification number

_CHRI	S LONG FOUNDATION		, 47	-6329563
-Part I	Contributors (see instruction	ns). Use duplicate copies o	of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, a	ınd ZIP + 4	(c) Total contributions	(d) Type of contribution
7	NFL FOUNDATION 345 PARK AVENUE NEW YORK	NY 10154	<b>\$</b> 55,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)		(c)	(d)
No.	Name, address, a	ind ZIP + 4	Total contributions	Type of contribution
8	NFL PLAYERS INC 1133 20TH ST NW WASHINGTON	DC 20036	<b>\$</b> 82,500	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, a	ind ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, a	and 7IP + 4	(c) Total contributions	(d) Type of contribution
NO.	Name, address, e		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, a	and 7IP + 4	(c) Total contributions	(d) Type of contribution
130.	Name, audiess, e		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, a	and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)

LONG0C02 Chris Long Foundation 47-6329563 FYE: 12/31/2018	Federal S	Federal Statements		11/4/2019 8:30 AM
Sta	Statement 1 - Form 990-PF,	n 990-PF, Part I, Line 16a - Legal Fees	l Fees	
Description LEGAL FEES	Total 28,	Net Investment	Adjusted Net	Char
TOTAL	\$ 28,223	\$	\$	\$ 28,223
<u>Stater</u>	Statement 2 - Form 990-PF, Par	- Form 990-PF, Part I, Line 16b - Accounting Fees	ting Fees	
	Tota	Net Investment	Adjusted Net	Chari Purp
ACCOUNTING FEES TOTAL	\$ 18,815	0	w w	\$ 18,815
Statemen	Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees	Line 16c - Other Profe	ssional Fees	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
CONTRACT SERVICES TOTAL	\$ 153,361 \$ 153,361	\$ \$	\$	\$ 153,361 \$ 153,361
	Statement 4 - Form 990-F	- Form 990-PF, Part I, Line 18 - Taxes	Sey	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
TAXES TOTAL	\$ 425	\$ \$	\$ \$	\$ 425
				1-4

11/4/2019 8:30 AM ·

### LONG0C02 Chris Long Foundation 47-6329563

## **Federal Statements**

FYE: 12/31/2018

Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses

Charitable Purpose	, s		20,035	101,453	4,832	129,522	403		3,601		5,136	1,833	128,961	\$ 397,808
Adjusted Net	·v-													0 8
Net Investment	ς,													\$
Total	<u></u>		20,035	101,453	4,832	129,522	403	1,493	3,601	539	5,136	1,833	128,961	\$ 397,808
Description		EXPENSES	BANK CHARGES AND FEES	FUNDRAISING EXPENSES	INSURANCE	MARKETING AND ADVERTISING	MEALS AND ENTERTAINMENT	MISCELLANEOUS	POSTAGE AND MAILING	PRINTING	SOFTWARE	OFFICE EXPENSES	PROGRAMMING	TOTAL

# Statement 6 - Form 990-PF, Part II, Line 10a - US and State Government Investments

Description		Beginning of Year		End of Year	Basis of Valuation	<b>ــ</b>	Fair Market Value
SCHWAB 9884	w	210,542	ၯ	206,974	COST	ၯ	195,860
TOTAL	ς» <sup> </sup>	210,542	φ	206,974		ς <u>,</u>	195,860

## Statement 7 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors

City, State, Zip

Name

Address

SEE SCHEDULE B