

EXTENDED TO NOVEMBER 15, 2
Return of Private Foundation

2949105302305

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

For	or calendar year 2018 or tax year beginning , and ending								
Na	me of	foundation		A Employer identification number					
THE NALEN FOUNDATION 65-6309736  Number and street (or P O box number if mail is not delivered to street address)  Room/suite  B Telephone number									
			street	address)	Room/suite	l '			
		BANYAN ROAD					-7468		
		own, state or province, country, and ZIP or for F STREAM, FL 33483	•	C If exemption application is p	pending, check here				
		call that apply Initial return	rmer public charity	D 1 Foreign organizations	s, check here				
		Final return		2 -					
		Address change		Name change		2 Foreign organizations me check here and attach co	omputation Leading the 85% test,		
H_(	_			empt private foundation	$\Delta$	E If private foundation sta			
<u> </u>		ction 4947(a)(1) nonexempt charitable trust		Other taxable private foundate		under section 507(b)(1)			
		arket value of all assets at end of year   J Acc Part II, col. (c), line 16)	_	ng method: X Cash her (specify)	Accrual	F If the foundation is in a under section 507(b)(1)			
	\$	383.936. (Part I,	colun	nn (d) must be on cash basis	i.)	under section 507(b)(1)	)(D), Check liefe		
_	ırt I			(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements		
		necessarily equal the amounts in column (a) )	not	expenses per books	income	income	(cash basis only)		
	1 -	Contributions, gifts, grants, etc., received		5,000.		N/A			
	2	Check if the foundation is not required to attach Schinterest on savings and temporary	В	301.	301.		STATEMENT 1		
	ا ا	3 cash investments 4 Dividends and interest from securities 5a Gross rents		\9,757.	9,757.		STATEMENT 2		
	5a			371310		<del></del>			
<b>o</b>	b Net rental income or (loss)		•						
	6a	Net gain or (loss) from sale of assets not on line 10		56,893.					
eun	b	Gross sales price for all assets on line 8a 354,412	<u>2.</u>			RECEIN	FD 1		
Revenue	7 Capital gain net income (from Part IV, line 2)				56,893.	RECEI	701		
	8	Net short-term capital gain Income modifications				11	5050 /2/		
	1	Gross sales less returns and allowances				S FEB 1	100 Jak		
		Less Cost of goods sold				101	1111		
	C	Gross profit or (loss)				OGDE	IN.		
	11	Other income		671.	0.		STATEMENT 3		
	12	Total Add lines 1 through 11		72,622.	66,951.		ļ <u>-</u>		
	13	Other employee selectors and wages		0.	0.		0.		
	14 15	Other employee salaries and wages Pension plans, employee benefits							
ses		Legal fees							
)en	Ь	Accounting fees STMT 4	1	4,441.	4,441.		0.		
Ä	C	Other professional fees STMT	5	5,045.	5,045.		0.		
tive	17	Interest -		627	427				
stra	18	Taxes STMT 6 Depreciation and depletion	<b>'</b>	637.	437.	<u> </u>	0.		
nIn.	3	Occupancy	ł			<del></del>			
Adr	.21 :21	Travel, conferences, and meetings		12,432.	12,432.		0.		
þű	<u>2</u> 2	Printing and publications							
ρ̈́	<i>7</i> 73	Other expenses STMT 7	7	987.	0.		0.		
jati	24	Total operating and administrative		00 540	00 255				
ÓĐĆ	16 b c 17 18 19 (34 A) (37 23, 24 25	expenses Add lines 13 through 23	ł	23,542. 108,320.	22,355.		108,320.		
<u>بر</u>		Contributions, gifts, grants paid  Total expenses and disbursements	ŀ	100,320.			100,320.		
<u>~</u> _		Add lines 24 and 25		131,862.	22,355.		108,320.		
=		Subtract line 26 from line 12:							
		Excess of revenue over expenses and disbursements	ļ				<u>'</u>		
		Net investment income (if negative, enter -0-)	}		44,596.	27 / 3			
	C	Adjusted net income (if negative, enter -0-)				N/A	Corm <b>QQQ-DE</b> (2018)		

7
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Form 990-PF (2018) 65-6309736 THE NALEN FOUNDATION Page 2 Beginning of year End of year Attached schedules and amounts in the description column should be for end-of-year amounts only **Balance Sheets** (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 55,808. 44,331. 2 Savings and temporary cash investments 44,331. 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 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 2,685. 10a Investments - U.S. and state government obligations STMT 8 2,682. 285,340. 224,724. 234,095. b Investments - corporate stock 37,744. 33,648. STMT 10 32,760. c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 59,999. 74,263 70,068. STMT 11 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 438,891. 379,651. 383,936. instructions Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) **▶** 🗓 Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31. Net Assets or Fund Balances 438,891. 379,651 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds 438,891 379,651 30 Diotal net assets or fund balances 30 Total liabilities and net assets/fund balances 438,891 379,651 Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 438,891. (must agree with end-of-year figure reported on prior year's return) -5<u>9,2</u>40. 2 Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) 379,651. Add lines 1, 2, and 3

823511 12-11-18

379,651.

Form 990-PF (2018)

Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Page 3

(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 )					ow acquired Purchase Donation	(c) Date acc		(d) Date sold (mo., day, yr.)
1a SEE ATTACHED S				U-	P			
b SEE ATTACHED S				_	P			
c CAPITAL GAINS								· · · · · · · · · · · · · · · · · · ·
d	<u></u>					<del></del>		
e						<u> </u>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain ((e) plus (f)	or (loss) ) minus (	a))
a 58,577.		<u> </u>	59,01	7.				-440.
b 294,697.			238,50					56,195.
_c 1,138.								1,138.
_d							_	
_e								
Complete only for assets showing	ng gain in column (h) and owned by	the foundation	n on 12/31/69.			(I) Gains (Col		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			ol. (k), but not Losses (fro		
_a		<u> </u>	· <del>-</del> -				_	-440.
_b		<u> </u>						56,195.
_c		ļ						<u>1,138.</u>
_d								<del></del>
_e					<del></del>		-	
2 Capital gain net income or (net ca	apital loss) $ \begin{cases} & \text{if gain, also enter} \\ & \text{if (loss), enter -} \end{cases} $			}	2			56,893.
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,		nd (6):						
If (loss), enter -0- in Part I, line 8					3		N/A	
Part V   Qualification U	nder Section 4940(e) for	r Reduced	Tax on Net	Inve	stment In	come		
(For optional use by domestic private	e foundations subject to the section	4940(a) tax on	net investment ind	come.)				
If section 4940(d)(2) applies, leave the	nis nart hlank							
ii section 4340(u)(2) applies, leave to	no part blank						,	
Was the foundation liable for the sec			•	ioqs			Į	Yes X No
If "Yes," the foundation doesn't qualit	<del>`</del>							
1 Enter the appropriate amount in	each column for each year; see the	instructions de	fore making any er					'd\
Base period years Calendar year (or tax year beginni			Net value of nor			100	Distribu I. (b) divid	d) ition ratio ded by col. (c))
2017		21,199.			520,72			.232750
2016		31,998.			554,52		_	.238036
2015		33,808.			657,563			.127452
2014		22,195.			392,035			.056614
2013		L6 <u>,300.</u>			328,29	<u> </u>		.049651
2 Total of line 1, column (d)			<b>.</b>			2	_	.704503
3 Average distribution ratio for the the foundation has been in existe		on line 2 by 5.0	u, or by the numbe	er ot ye	ars	3	-	.140901
4 Enter the net value of noncharitab	ele-use assets for 2018 from Part X,	line 5				4		450,470.
					5		63,472.	
	5 Multiply line 4 by line 3						=	
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6		446.
7 Add lines 5 and 6						7		63,918.
8 Enter qualifying distributions from			Ļ			8		108,320.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	e 1b, and comp	lete that part using	a 1%	tax rate			^ *
823521 12-11-18	<del></del>						Fo	rm 990-PE (2018)

823521 12-11-18

823531 12-11-18

10 Did any persons become substantial contributors during the tax yoar? if "Yes," attach a schedule listing their names and addresses

Form 990-PF (2018)

Form 990-PF (2018) THE NALEN FOUNDATION 65-6309736 Part 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 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 12 Х 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address N/A 14 The books are in care of ► THOMAS A SMITH, CPA Telephone no.  $\triangleright$  (561) 276-7468 Located at ▶96 NE FOURTH AVE, DELRAY BEACH, ZIP+4 ▶33483 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 N/A Yes No 16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank securities, or other financial account in a foreign country? 16 Х See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No 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 foundation agreed to make a grant to or to employ the official for a period after Yes X No 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 16 Organizations relying on a current notice regarding disaster assistance, check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected X before the first day of the tax year beginning in 2018? 1c 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)). a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning Yes X No before 2018? If "Yes," list the years ▶\_ 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 N/A 2b statement - see instructions ) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time 🗌 Yes 🗶 No during the year? b if "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

Form 990-PF (2018)

3b

4a

N/A

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

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

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

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

532 BANYAN ROAD			[	
GULF STREAM, FL 33483	1.00	0.	0.	0.
ERIK E. JOH	TRUSTEE			
4600 N. OCEAN BLVD., STE 206				
GULF STREAM, FL 33435	1.00	_ 0.	0.	o .
KATHERINE M. NALEN	TRUSTEE			
P.O. BOX 6419			1	
KETCHUM, ID 83340	1.00	0.	<u> </u>	O .
PETER H. NALEN	TRUSTEE			<del>-</del>
630 FOSTER CREEK ROAD				
BELGRADE, MT 59714	1.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
	<u> </u>			
	-		!	li

Form 990-PF (2018)

Total number of other employees paid over \$50,000

Form **990-PF** (2018)

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Total. Add lines 1 through 3

All other program-related investments. See instructions

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<del></del>
-	Average monthly fair market value of securities	1a	407,260.
	Average of monthly cash balances	1b	50,070.
	Fair market value of all other assets	1c	3070701
d	Total (add lines 1a, b, and c)	1d	457,330.
e	Reduction claimed for blockage or other factors reported on lines 1a and	·•	
٠	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	457,330.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	6,860.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	450,470.
6	Minimum investment return Enter 5% of line 5	6	22,524.
_	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are		22/5231
Ŀ	foreign organizations, check here  and do not complete this part.)	ia ooriami	
1	Minimum investment return from Part X, line 6	1	22,524.
' 2а	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018 (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	446.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	22,078.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	22,078.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	22,078.
<u></u>			
<u> </u>	art XII Qualifying Distributions (see instructions)	r	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	108,320.
b	Program-related investments - total from Part IX-B	1b	0.
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:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	108,320.
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	5	446.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	107,874.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for	the section
	4940(e) reduction of tax in those years.		

Form **990-PF** (2018)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,	001740	10010 prior to 2011	2011	2010
line 7				22,078.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			0.	
<b>b</b> Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013 114.				
<b>b</b> From 2014 2,903.				
c From 2015 50,964.				
d From 2016 104,296.				
e From 2017 95,355.				
f Total of lines 3a through e	253,632.			
4 Qualifying distributions for 2018 from				
Part XII, line 4 ► \$ 108,320.	[			
a Applied to 2017, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				22,078.
e Remaining amount distributed out of corpus	86,242.		·	
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 31, 4c, and 4e Subtract line 5	339,874.			
<b>b</b> Prior years' undistributed income. Subtract			<del></del>	<u> </u>
line 4b from line 2b		0.		
c Enter the amount of prior years'				•
undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2017. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must		-		
be distributed in 2019				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013				ı
not applied on line 5 or line 7	114.			
9 Excess distributions carryover to 2019				
Subtract lines 7 and 8 from line 6a	339,760.			
10 Analysis of line 9				
a Excess from 2014 2,903.				
<b>b</b> Excess from 2015 50,964.				
c Excess from 2016 104, 296.				
d Excess from 2017 95, 355.				ı
e Excess from 2018 86, 242.				

823581 12-11-18

Form **990-PF** (2018)

	EN FOUNDAT				<u> 109736 Page 1</u>
Part XIV Private Operating F			I-A, question 9)	N/A	
1 a If the foundation has received a ruling o					/
foundation, and the ruling is effective for		-	▶ └	T	
b Check box to indicate whether the found		ing foundation described i		4942(j)(3) or 49	942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0017	Prior 3 years	(4) 2045	// //
income from Part I or the minimum	(a) 2018	<b>(b)</b> 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,			/		
line 4 for each year listed					
d Amounts included in line 2c not					·
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:  a "Assets" alternative test - enter:				İ	
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed			<u> </u>	1	
c "Support" alternative test - enter.					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public			-		
and 5 or more exempt					
organizations as provided in sectjon 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					· <del>-</del>
an exempt organization			}		
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	ore in assets
at any time during the	he year-see inst	ructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who	-	than 2% of the total contr	ributions received by the	foundation before the clos	se of any tax
year (but only if they have contributed m	iore than \$5,000). (See s	section 507(d)(2).)	•		•
CRAIG A. NALEN					
b List any managers of the foundation who	own 10% or more of th	ne stock of a corporation (	or an equally large portion	on of the ownership of a pa	artnership or
other entity) of which the foundation has	a 10% or greater intere	st.			
NONE					
2 Information Regarding Contribution	on, Grant, Gift, Loan	, Scholarship, etc., Pr	ograms:		-
Check here <b>X</b> if the foundation or	nly makes contributions	to preselected charitable of	organizations and does r	not accept unsolicited requ	ests for funds If
the foundation makes gifts, grants, etc.,	to individuals or organiz	ations under other conditi	ons, complete items 2a,	b, c, and d.	
a The name, address, and telephone numb	per or email address of the	he person to whom applic	ations should be addres	sed.	
<b>b</b> The form in which applications should be	e submitted and informa	tion and materials they sh	ould include:		
			<u> </u>	- <u>-</u>	
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields,	kinds of institutions, or o	other factors:	
823601 12-11-18					Form <b>990-PF</b> (2018)

Part XV Supplementary Inform	<del>-</del> · · · · · · · · · · · · · · · · · · ·			
3 Grants and Contributions Paid During		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	oona ibaaon	
a Paid during the year				
UN VALLEY FILM FESTIVAL	NONE	501(C)3	UNRESTRICTED	
P.O. BOX 3471		ORGANIZATION		
SUN VALLEY, ID 83353				4,000
HE COMMUNITY LIBRARY	NONE	501(C)3	UNRESTRICTED	
15 SPRUCE AVE		ORGANIZATION		
KETCHUM, ID 83340				100
FRIENDS OF THE EARTH	NONE	501(C)3	UNRESTRICTED	
1101 15TH ST		ORGANIZATION		
WASHINGTON DC 20005				100
BOYS CLUB OF NEW YORK	NONE	501(C)3	UNRESTRICTED	
321 E 111TH ST		ORGANIZATION		
NEW YORK, NY 10029				250
ST. LUKES HOSPITAL FOUNDATION	NONE	501(C)3	UNRESTRICTED	
100 HOSPITAL DR		ORGANIZATION		
SAWTOOTH CITY ID 83340				2,500
	CONTINUATION SHEE	T(S)	<b>▶</b> 3a	108 320
<b>b</b> Approved for future payment				
NONE				

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor BLAINE COUNTY RECREATION DISTRICT NONE 501(C)3 UNRESTRICTED 1050 FOX ACRES RD #107 ORGANIZATION HAILEY ID 83333 1,000. ST. LUKES WOODRIVER FOUNDATION NONE 501(C)3 UNRESTRICTED COMPASSIONATE CARE ORGANIZATION 100 HOSPITAL DR SAWTOOTH CITY ID 83340 2,500. CARTER CENTER 501(C)3 UNRESTRICTED NONE 453 FREEDOM PARKWAY ORGANIZATION ATLANTA, GA 30307 100. BOISE ST PUBLIC RADIO NONE 501(C)3 UNRESTRICTED 1910 W UNIVERSITY DR ORGANIZATION BOISE \_ ID 83725 100. 501(C)3 DNRESTRICTED BOZEMAN SYMPHONY NONE 1001 W OAK ST #110 ORGANIZATION BOZEMAN MT 59715 3,500. CHILDRENS NATIONAL MEDICAL CENTER NONE 501(C)3 UNRESTRICTED 111 MICHIGAN AVE NW DRGANIZATION WASHINGTON, DC 20010 500. CITY OF KETCHUM IDAHO NONE 501(C)3 UNRESTRICTED ORGANIZATION P.O. BOX 2315 480 E AVE. N KETCHUM, ID 83340 2,500. UNRESTRICTED 501(C)3 NONE FLORIDA COALITION FOR PRESERVATION ORGANIZATION 4600 N OCEAN BLVD. #102 1,000. OCEAN RIDGE FL 33435 UNRESTRICTED CRC RECOVERY FOUNDATION NONE 501(C)3 1700 LAKE IDA RD DRGANIZATION 500. DELRAY BEACH FL 33445 HABITAT FOR HUMANITY NONE 501(C)3 UNRESTRICTED ORGANIZATION 322 WEST LAMAR ST AMERICUS, GA 31709 200. 101,370, Total from continuation sheets

65-6309736 THE NALEN FOUNDATION Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor HOSPICE OF THE WOOD RIVER VALLEY NONE 501(C)3 UNRESTRICTED 507 1ST AVE N ORGANIZATION KETCHUM ID 83340 5,000. HOTCHKISS SCHOOL NONE 501(C)3 UNRESTRICTED 11 INTERLAKEN RD ORGANIZATION LAKEVILLE CT 06039 10,000. FLORIDA WILDLIFE FEDERATION NONE 501(C)3 UNRESTRICTED P.O. BOX 6870 ORGANIZATION 100. TALLAHASSEE FL 32314 LEE PESKY LEARNING CENTER NONE 501(C)3 UNRESTRICTED 3324 ELDER ST ORGANIZATION BOISE ID 83705 500. ·LIVING WITH WOLVES NONE 501(C)3 UNRESTRICTED P.O. BOX 896 ORGANIZATION 300. SUN VALLEY, ID 83353 501(C)3 UNRESTRICTED MEDICINS SANS BORDERS NONE 40 RECTOR ST 16TH FL ORGANIZATION 250. NEW YORK, NY 10006 GIVE KIDS THE WORLD NONE 501(C)3 UNRESTRICTED ORGANIZATION 210 S BASS RD KISSIMMEE, FL 34746 100. CFACT EDUCATIONAL PROGRAM UNRESTRICTED NONE 501(C)3 1717 PENNSYLVANIA AVE NW STE 1025 ORGANIZATION

501(C)3

501(C)3

**DRGANIZATION** 

ORGANIZATION

NONE

NONE

UNRESTRICTED

UNRESTRICTED

100.

5,000.

200.

Total from continuation sheets

WASHINGTON, DC 20006

MONTANA LAND RELIANCE

PRINCETON UNIVERSITY

PRINCETON, NJ 08544

324 FULLER AVE #2

HELENA, MT 59601

Part XV | Supplementary Information

3 Grants and Contributions Paid During the		T	<del></del>	<del> </del>
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
; tame and address (nome or business)	or substantial contributor	recipient		
		ĺ		,
SAWTOOTH IDAHO BOTANICAL GARDENS	NONE	501(C)3	UNRESTRICTED	
1 GIMLET RD		ORGANIZATION		
ETCHUM ID 83340				200
11/7m/		501 (5) 3		
MITH COLLEGE	NONE	501(C)3 ORGANIZATION	UNRESTRICTED	
ORTHAMPTON, MA 01063		DRGAN1ZATION		250
ON THE VIOLETTE OF THE VIOLETT				
WIFTHSURE RANCH EQUINE THERAPY	NONE	501(C)3	UNRESTRICTED	
14 CALYPSO LANE		ORGANIZATION		
ELLEVUE, ID 83313		<u>-</u>		5,000
T. ALPHONSE HOSPITAL FOUNDATION	NONE	501(C)3	UNRESTRICTED	
055 N CURTIS RD		ORGANIZATION		
DISE, ID 83706				10,000
D. D. W. J. G. D. T. C.		E01/G)3	INVENTOR I COMP	
T. PAUL'S EPISCOPAL CHURCH 88 S SWINTON AVE	NONE	501(C)3 ORGANIZATION	UNRESTRICTED	
ELRAY BEACH, FL 33444		DRGANIZATION		9,100
Daniell, 11 33444				
T. THOMAS EPISCOPAL CHURCH	NONE	501(C)3	UNRESTRICTED	
01 SUN VALLEY RD		ORGANIZATION		3 000
UN VALLEY, ID 83353				3,000
UN VALLEY BALLET	NONE	501(C)3	UNRESTRICTED	
11 N 1ST AVE #1A		ORGANIZATION		
AILEY, ID 83333				3,500
UN VALLEY SYMPHONY	NONE	501(C)3	UNRESTRICTED	
20 2ND AVE		ORGANIZATION	1	
ETCHUM, ID 83340				5,300
HE HUNGER COALITION	NONE	501(C)3	UNRESTRICTED	
21 HONEYSUCKLE ST		ORGANIZATION	1	
ELLEVUE, ID 83313			۲	11,250
HE INSTITUTE FOR ETHNO MEDICINE	NONE	501(C)3	UNRESTRICTED	
130 US-89	COM	ORGANIZATION		
ACKSON WY 83001				1,000
Total from continuation sheets				<u>-, -, -, -, -, -, -, -, -, -, -, -, -, -</u>

Part XV Supplementary Informat	ion			
3 Grants and Contributions Paid During th	ne Year (Continuation)			
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	Contribution	
			•	
THE ADVOCATES	NONE	501(C)3	UNRESTRICTED	
P.O. BOX 3216	1	ORGANIZATION	•	
HAILEY, ID 83333				7,500
MEDICINES SANS FRONTIERS	NONE	501(C)3	UNRESTRICTED	
40 RECTOR ST 16TH FL		ORGANIZATION		
NEW YORK, NY 10006				250
UNITED NEGRO COLLEGE FUND	NONE	501(C)3	UNRESTRICTED	ļ
1805 7TH ST NW	NONE ,	ORGANIZATION	ORRESTRICTED	
WASHINGTON DC 20001		DRGANIZATION		100.
NAPATORG FOR OUTER NAMERS	NOVE	501(C)3	(B) PCMD I CMDD	
WARRIORS FOR QUIET WATERS 351 EVERGREEN DR STE A	NONE	ORGANIZATION	UNRESTRICTED	
BOZEMAN, MT 59715		DROZETIZATION		5,000.
W Votes Words	vova	E01/0\3	TRADEGER TOWNS	
WAYSIDE HOUSE 378 NE 6TH AVE	NONE	501(C)3 ORGANIZATION	UNRESTRICTED	
DELRAY BEACH, FL 33483		DRGANIZATION		2,500.
an privates utilian	NO.	E01/0\3	I BYD D CMD I CMDD	
SAN FRANCISCO VILLAGE 3220 FULTON ST	NONE	501(C)3 ORGANIZATION	UNRESTRICTED	
SAN FRANCISCO CA 94118		DROMITZATION		1,000.
WOOD RIVER YMCA 101 SADDLE RD	NONE	501(C)3 ORGANIZATION	UNRESTRICTED	1
KETCHUM, ID 83340		ORGANIZATION		2,850,
WXEL PUBLIC RADIO	NONE	501(C)3	UNRESTRICTED	
3401 S CONGRESS AVE BOYNTON BEACH, FL 33426	,	ORGANIZATION		120.
BOINTON BEACH, FL 33420			<del></del>	120,
		I	J	
Total from continuation sheets			·····	<u> </u>

Part XVI-A	<b>Analysis of Income-Producing Activities</b>
------------	--

Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	Amount	
a	·		+ +		
b		·	+ +		
<u> </u>			+ +		
d	1		+ +		
e	· <del> </del>			<del></del>	
g Fees and contracts from government agencies	· <del>  -</del>		<del> </del>		·
2 Membership dues and assessments	<b>-</b>		+		<del></del>
3 Interest on savings and temporary cash	<del> </del>		+ +		<del></del>
investments			14	301.	
4 Dividends and interest from securities		<del></del> .	14	9,757.	
5 Net rental income or (loss) from real estate:	-		1 - 1	<u> </u>	
a Debt-financed property			<u> </u>	<del></del>	
b Not debt-financed property				···	<del></del>
6 Net rental income or (loss) from personal			1 1		
property					
7 Other investment income			14	671.	
8 Gain or (loss) from sales of assets other					
than inventory			18	56,893.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	L				
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	Li_	0.		67,622.	
13 Total Add line 12, columns (b), (d), and (e)				13	67,622.
(See worksheet in line 13 instructions to verify calculations.)				·	
Part XVI-B Relationship of Activities	to the Accon	nplishment of Ex	kempt	Purposes	
Line No. Explain below how each activity for which income	ome is reported in a	column (e) of Part XVI-A	contribu	ited importantly to the accomp	lishment of
the foundation's exempt purposes (other than			_		
PRESERVING AND MAINTAI	NING ASS	ETS FOR FUT	URE	CONTRIBUTIONS	
			_	<del></del>	
		<del> </del>			
		<del>_</del>			<del></del>
		<del></del>			
		<del></del>		<del>-</del>	
	<del></del>			·	
		· · ·			· <del>-</del>
	***************************************				
			_		

823621 12-11-18

Part XVII			nsfers to a	and Transactions	and Relations	ships With Nonch	naritable	•	
1 Did the c	<del></del>		of the following	ng with any other organize	tion described in an	etion E01/a)	<del></del>	Yes	No
_	rganization directly or indi an section 501(c)(3) orgai					GIIOH 30 I(G)		163	140
	s from the reporting found	•	•	- ' -	,				
(1) Casi	. •	ation to a monorial in	abio oxompt of	gamzanon or.			1a(1)		Х
(2) Othe							1a(2)		X
<b>b</b> Other tra							1.0(2)	-	
	s of assets to a noncharita	ible exempt organiz	ation				15(1)		Х
	chases of assets from a no						1b(2)		Х
(3) Ren	tal of facilities, equipment,	or other assets					1b(3)		X
(4) Rein	nbursement arrangements	i					1b(4)		Х
(5) Loan	ns or loan guarantees						15(5)		Х
(6) Perí	ormance of services or me	embership or fundra	ising solicitatio	ons			lb(6)		X
c Sharing	of facilities, equipriient, ma	aling lists, other ass	els, or paid em	ployees			_tc		Х
	wer to any of the above is			* *		-		els,	
	es given by the reporting for				alue in any transaction	on or sharing arrangemen	it, show in		
	d) the value of the goods,	<del>,</del>			(4)				
(a) Line no	(b) Amount involved	(c) Name o		e exempt organization	(d) Descripti	on of transfers, transactions, a	and sharing ari	angeme	nts
	<del></del>	<del></del>	N/A	<del></del>					
	<del></del>	<del> </del>							
<del></del>									
		<del></del>		<u> </u>					
	<del></del>								
							·· <b></b> -	_	
				<del></del>	<del>-  </del>				
						<u> </u>			
2a is the fou	indation directly or indirect	tly affiliated with, or	related to, one	or more tax-exempt organ	nizations described				_
	n 501(c) (other than sectio	, , , , , ,	ection 527?				Yes	X	No
b If "Yes," c	omplete the following sch			· · · · · · · · · · · · · · · · · · ·	<del></del>	<del></del>			
	(a) Name of org	anization		(b) Type of organization		(c) Description of relation	inship		
	N/A								
		<del></del>			<del>  -</del>	_ <del></del>			
	·			<del></del>	<del>                                     </del>				
Linda	r penalties of perjury, I declare	that I have examined th	us return, includin	no accompanying schedules an	od statements, and to th	e best of my knowledge			
	relief, it is true, correct, and con					or han any kaoviladaa	May the IRS or	scuss the	1IS r
Here	a su	سلوي		12/4/20	TRUST		shown below?	See ins	tr 1
📜	nature of officer or trustee		<del>-</del>	Date	Title	<u> </u>	LX. Yes		J No
Sig	Print/Type preparer's na		Preparer's si		Date	Check   If PTI	N		
	THOMAS A.		- Oparor 3 si	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		self- employed			
Paid	CPA	OMIIN,	the	d +	05/13/19	· ·	00954	611	
Preparer	Firm's name ► SMI	TH, GRAHA	<del></del>	LINGSWORTH,	P.A.	Firm's EIN ► 59 –			
Use Only		III, GIGHE	V. LIL	ZZIIODHOICIII,					
- •	Firm's address ▶ 96	N.E. FOI	JRTH AV	ENUE	<del></del>		-		
		LRAY BEAC		33483		Phone no. (561	) 276	<u>-74</u> 6	58
							Form <b>990</b>		

## . ., . Schedule B

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

## **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.
➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Name of the organization

THE NALEN FOUNDATION

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

Employer identification number

65-6309736

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

Organiz	ation type (check o	ne)
Filers o	f:	Section:
Form 99	0 or 990-EZ	501(c)( ) (enter number) organization
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
		527 political organization
Form 99	0-PF	X 501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
	nly a section 501(c)(	s covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions
X		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special	Rules	
	sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990·EZ that met the 33 1/3% support test of the regulations under 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 r, 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, line 1 Complete Parts I and II.
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the ty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address),
	year, contributions is checked, enter h purpose Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., nplete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year.
but it <b>m</b> ı	ust answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 ne filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

THE	NALEN	FOUNDATION

65-6309736

Part I	Contributors (see instructions) Use duplicate copies of Part I	ıf addıtıonal space is needed	J-0309730
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CRAIG A. NALEN  532 BANYAN ROAD  GULF STREAM, FL 33483	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Omnicash 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
		<b>\$</b>	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )

09180513 729628 32900

Name of organization

Employer identification number

THE	NALEN	FOUNDATION
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ırt II	Noncash Property (see instructions) Use duplicate copies of F	Part II if additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		<b>\$</b>	
(a) No. from Part I	(b) Description of noncash property given	. (c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\ \ \\$	

Name of o	organization			Employer identification number
THE N	ALEN FOUNDATION			65-6309736
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	) through (e) and the following line er charitable, etc., contributions of \$1,000 or	ntry For organizations	that total more than \$1,000 for the year
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
	1			
		(e) Transfer of gr	ft	
	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee
(a) No.				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	eription of how gift is held
	Transferee's name, address, a	(e) Transfer of git		nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
-		(e) Transfer of git	ft	
	Transferee's name, address, at	nd ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
	Transferee's name, address, ar	(e) Transfer of gif		nsferor to transferee
	mansieree s name, audress, al			

<del></del>									
FORM 990-PF INTERE	ST ON SAVING	S AND T	EMPOR	ARY C	ASH I	NVESTMENTS	SI	TATEMENT	1
SOURCE		RE	(A) VENUE BOOK			(B) NVESTMENT NCOME		(C) ADJUSTED JET INCOMI	Ξ
WELLS FARGO BANK, N.A. WELLS FARGO BANK, N.A.				67. 34.		67. 234.		'	
TOTAL TO PART I, LI	301.			301.					
FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM	SECU	RITIES	ST	PATEMENT	2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	S	REV!	A) ENUE BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTI NET INCO	
WELLS FARGO BANK, N.A.	10,895.	1,	138.		9,757	. 9,75	57.		
TO PART I, LINE 4	10,895.	1,	138.		9,757	9,75	57.		
FORM 990-PF		OTHER	INCO	ME			ST	ATEMENT	3
DESCRIPTION			RE	(A) VENUE BOOK		(B) NET INVEST- MENT INCOME		(C) ADJUSTEI NET INCON	
WF NONDIVIDEND DIST ALERIAN MLP INCOME	RIBUTIONS	•			365. 306.		— — ).		
TOTAL TO FORM 990-P	F, PART I, I	INE 11			671.	C		<del></del>	

FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
SMITH, GRAHAM, ELLINGSWORTH LEGAL SERVICES	3,412. 1,029.			0.
TO FORM 990-PF, PG 1, LN 16B	4,441.	4,441.		0.
FORM 990-PF C	THER PROFES	SIONAL FEES	S'	ratement 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
INVESTMENT ADVISOR FEES	5,045.	5,045.		0.
TO FORM 990-PF, PG 1, LN 16C	5,045.	5,045.		0.
FORM 990-PF	TAX	ES	S	ratement 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX WITHHELD ADR FEES FEDERAL EXCISE TAX	427. 10. 200.			0.
TO FORM 990-PF, PG 1, LN 18	637.	437.		0.

FORM 990-PF	OTHER E	XPENSES		STATEMENT
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) ST- ADJUSTI OME NET INCO	
OTHER EXPENSE ADJUSTMENT	987.		0.	
TO FORM 990-PF, PG 1, LN 23	987.		0.	C
FORM 990-PF U.S. AND S	STATE/CITY G	OVERNMENT	OBLIGATIONS	STATEMENT
DESCRIPTION	U.S GOV''		BOOK VALUE	FAIR MARKET VALUE
U.S. GOVERNMENT BONDS	X		2,685.	2,682
TOTAL U.S. GOVERNMENT OBLIGAT	TIONS	•	2,685.	2,682
TOTAL STATE AND MUNICIPAL GOV	ERNMENT OBL	IGATIONS		
TOTAL TO FORM 990-PF, PART II	, LINE 10A	=	2,685.	2,682
FORM 990-PF	CORPORATI	E STOCK		STATEMENT
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
COMMON AND PREFERRED STOCK		-	224,724.	234,095
TOTAL TO FORM 990-PF, PART I	, LINE 10B	=	224,724.	234,095
FORM 990-PF	CORPORATI	E BONDS		STATEMENT 1
			BOOK VALUE	FAIR MARKET VALUE
DESCRIPTION				
DESCRIPTION CORPORATE BONDS		-	33,648.	32,760

FORM 990-PF OTH	ER INVESTMENTS		STATEMENT 11
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
CORPORATE TRUSTS	COST	74,263.	70,068.
TOTAL TO FORM 990-PF, PART II, LIN	E 13	74,263.	70,068.