Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

Fo	гса	lendar year 2018 or tax year beginning		ΰ.	1/06 , 201	8, and end	ing		12/31, 2018
Nar	ne of	foundation					A	Employer identif	fication number
.	TA	BLE ROAD FOUNDATION						82-515338	
Nur	nber	and street (or P O box number if mail is not delivered t	o street address	5)		Room/suit	е В	Telephone numb	per (see instructions)
]	.34	5 ABBOTT KINNEY BOULEVARD						(833) 47	78-2253
_		own, state or province, country, and ZIP or foreign post	al code					· · · · · · · · · · · · · · · · · · ·	
		TOT 07 00001					c	If exemption applic pending, check her	
		ICE, CA 90291	1 1.						
G	Che	ck all that apply X Initial return				public cha	rity p	1 Foreign organiza	
		Final return	├	mended re				Foreign organize85% test, check	
		Address change		ame chang					▶ 🗀
. <u>н</u> _	Che	ck type of organization X Section 501				W	 -	If private foundation	on status was terminated
	s	ection 4947(a)(1) nonexempt charitable trust			ivate found		<u>'</u>	•	b)(1)(A) check here .
ı	Fair		unting meth		ash 🔼 🗛	ccrual	F	If the foundation is	s in a 60-month termination
			ther (specify	y)				under section 507()	o)(1)(B) check here . >
٠	16)	▶ \$ 1,205,653. (Part I,	column (d) m	iust be on ca	ish basis)				
, P	art l	Analysis of Revenue and Expenses (The	(a) Reve	nue and	/E.\ A.) = 1		(-)	A	(d) Disbursements for charitable
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expens	ses per	1	vestment ome	(c)	Adjusted net income	purposes
_	_	column (a) (see instructions))	boo)KS					(cash basis only)
Т	1	Contributions, gifts, grants, etc., received (attach schedule)	1,3	383,186.					
•	2	Check ► if the foundation is not required to attach Sch B							
,	3	Interest on savings and temporary cash investments.							
	4	Dividends and interest from securities		1,761.		1,761.			
	т 5а	Gross rents							
;		Net rental income or (loss)							
ø)		Net gain or (loss) from sale of assets not on line 10							
Revenue	b	Gross sales price for all assets not on line to assets on line for all assets on line 6a							
9	7	Capital gain net income (from Part IV, line 2) .				0.			
œ	8	Net short-term capital gain				RECEIV	/FD		
- 1	9	Income modifications						70	
ľ	10 a	Gross sales less returns and allowances			3343			080	
	b	Less Cost of goods sold .			8	NOV 1 8	2019		
	C	Gross profit or (loss) (attach schedule)						<u> </u> &	
-	11	Other income (attach schedule)				GDEN	Ш		
	12	Total. Add lines 1 through 11	1,3	84,947.	<u> </u>	1,761	,		
	13	Compensation of officers, directors, trustees, etc		0.					
Se	14	Other employee salaries and wages							
Su.	15	Pension plans, employee benefits							
ğ	16 a	Legal fees (attach schedule) ATCH 1		4,604.					4,604
ũ	b	Accounting fees (attach schedule)							
<u>×</u>	C	Other professional fees (attach schedule)							
at	17	Interest 👸							
ist	18	Taxes (attach schedule) (see instructions)							
Administrative Expenses	19	Depreciation (attach schedule) and depletion.							
틩	20	Occupancy							
A	21	Travel, conferences, and meetings							
and /	- · 22	Printing and publications							
9	 23	Other expenses (attach schedule) ATCH .2.		3,200.	-		<u> </u>		700
Operating	- J 2.4	Total operating and administrative expenses.			<u> </u>				
ra	-4			7,804.					5,304
ğ	2 5	Add lines 13 through 23	1	18,500.			-		118,500
		Contributions, gifts, grants paid		26,304.		0.	 	0	
\neg	26	Total expenses and disbursements Add lines 24 and 25	 		 	<u>_</u>	ļ		
1	27	Subtractine 26 from line 12	1 2	58,643.					
		Excess of revenue over expenses and disbursements	1,2	50,045.		1,761.	L		
		Net investment income (if negative, enter -0-)			<u> </u>	1,701.			
_1		Adjusted net income (if negative, enter -0-) perwork Reduction Act Notice, see instructions	L				L		Form 990-PF (2018)

Б	art II	Balanca Shoots	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	E	nd of	year
	artıı	balance Sileets	amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-beari	ing		8,69		8, 696.
	2 `	Savings and temporary	cash investments		1,76	51.	1,761.
							•
			btful accounts ▶				
	4	Pledges receivable ▶					
			btful accounts ▶				
			 [
			officers, directors, trustees, and other				
	_		tach schedule) (see instructions)				
	7		receivable (attach schedule)				
			btful accounts ▶			ĺ	
হ			se	***			· · ·
Assets	9		eferred charges				
AS	_		e government obligations (attach schedule),				
			e stock (attach schedule) ATCH 3		1,195,19	6.	1,195,196.
		•	e bonds (attach schedule)			1	
	11	Investments - land, buildings					
		and equipment basis Less accumulated deprecia	ation -				
		(attach schedule)					
	12 13		loans				
	14	Land, buildings, and	_ [
		equipment basis Less accumulated deprecia	ation				
		(attach schedule)					
		Other assets (describe	completed by all filers - see the			\dashv	
	16	•	page 1, item I)	0	1,205,65	ا د	1,205,653.
_				· · · · · · · · · · · · · · · · · · ·	1,203,03	/ 	1,203,033.
	17	• •	accrued expenses				
S	18					_	
ţį	19		• • • • • • • • • • • • • • • • • • • •			\dashv	
藚	20		ors, trustees, and other disqualified persons				
Liabilities	21 22	• •	otes payable (attach schedule)		<u> </u>	-+	
_	22	Other habilities (describe	e ▶)			-	
	23	Total liabilities (add line	es 17 through 22)	0.		0.	
_	23		w SFAS 117, check here		·		
Ś			through 26, and lines 30 and 31.				
ces		·	,				
ā	24					- 1	
B	25						
Б	24 25 26 27 28 29 30 31		ot follow SFAS 117, check here ► X			-	
Ē		and complete lines 27					
5		•					
ţ	27	•	cipal, or current funds				
Se	28	• • •	r land, bldg , and equipment fund		1,205,65	3 3	
As	29	=	ulated income, endowment, or other funds	0.	1,205,65		
et	30		d balances (see instructions)	0.	1,205,00		
Z	31		,	0.	1,205,65	53	
.	ort II		nges in Net Assets or Fund Bala		1,203,00	<u> </u>	
			palances at beginning of year - Part I		nust agree with	Т	
1						,	0
_		• •	ed on prior year's return)			1	1,258,643
			, line 27a			2	1,230,043
			ded in line 2 (itemize) ▶			3 4	1,258,643
			n line 2 (itemize) ► ATCH 4			- +	52,990
				line 5) Bort II solume /h) line 30	<u>5</u>	1,205,653
_6	100	ai net assets or tuno t	palances at end of year (line 4 minus	iiile 5) - Part II, Column (t), iiile 30]	0	- 000 DE

Par	Capital Gains	and Losses for Tax on Inv	estment Income			
Гаі		scribe the kind(s) of property sold (for		(b) How acquired	(c) Date acquired	(d) Date sold
		rick warehouse, or common stock, 200		P - Purchase D - Donation	(mo , day, yr)	(mo , day, yr)
1 a	· ·			D - DONARON	_	
<u> </u>						
						<u>. </u>
d			· · · · · · · · · · · · · · · · · · ·			
<u>u</u>						
	···	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	(22
	(e) Gross sales price	(or allowable)	plus expense of sale		((e) plus (f) minu	
a						
b						
<u>c</u>						
d						
е						
	Complete only for assets s	howing gain in column (h) and owned	by the foundation on 12/31/69	(1)	Gains (Col (h) ga	ain minus
	(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	col	(k), but not less t Losses (from co	
а						
b						
С						
d						
е						
2	Capital gain net income	or (net capital loss)	ain, also enter in Part I, line 7 loss), enter -0- in Part I, line 7	2		
3		ain or (loss) as defined in sections				
	If gain, also enter in P	art I, line 8, column (c) See ins	structions If (loss), enter -0- in $\}$			
	Part I, line 8	<u> </u>	<u></u>	3		
Pai	t V Qualification U	Jnder Section 4940(e) for Re	duced Tax on Net Investment i	ncome		·
(For	optional use by domestic	c private foundations subject to th	ne section 4940(a) tax on net invest	ment inco	me)	
If se	ction 4940(d)(2) applies,	leave this part blank NOT	r available for initial	YEAR R	ETURNS	
	· // / / / · · ·	·				
Was	the foundation liable for	the section 4942 tax on the distril	butable amount of any year in the b	ase perio	d?	Yes No
If "Y	es," the foundation doesr	n't qualify under section 4940(e)	Do not complete this part			
1	Enter the appropriate a	mount in each column for each ye	ear, see the instructions before mak	ing any er	ntries	
	(a)	(b)	(c)		(d) Distribution ra	
Cale	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col (b) divided by	
	2017					
	2016					
	2015					
	2014					
	2013					-
	==		•			
2	Total of line 1 column (d)		2		
3			de the total on line 2 by 5 0, or by			
J	-		of less than 5 years	3		
	the number of years the	Touridation has been in existence	in less than 5 years			
4	Enter the net value of n	oncharitable-use assets for 2018	from Part X, line 5	4	· · · · · · · · · · · · · · · · · · ·	
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investm	nent income (1% of Part I, line 27b))	6		
7	Add lines 5 and 6			7		
		_				
8	Enter qualifying distributed filme 8 is equal to or qualifying the Part VI instructions	tions from Part XII, line 4 greater than line 7, check the box	x in Part VI, line 1b, and complete	that part	using a 1% ta	x rate See th

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	ctions	s)
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			35.
	here and enter 1% of Part I, line 27b			
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-)			
3	Add lines 1 and 2			35.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			35.
6	Credits/Payments			
	2018 estimated tax payments and 2017 overpayment credited to 2018 6a			
b	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c 500.			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		5	500.
8	Enter any penalty for underpayment of estimated tax. Check here			
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		4	165.
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ► 465. Refunded ► 11			
	t VII-A Statements Regarding Activities			
	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		Х
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
•	Instructions for the definition	1b		Х
	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			
c	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
-	(1) On the foundation ▶\$(2) On foundation managers ▶\$			
_	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		Х
-	If "Yes," attach a detailed description of the activities			
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		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	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			
J	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	Х	
8а	Enter the states to which the foundation reports or with which it is registered. See instructions.			
74	CA,			
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	Х	
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,"			1
	complete Part XIV	9		X
40	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
10	names and addresses ATCH 5	10	Х	,
	F		0-PF	(2018)

Par	t VII-A Statements Regarding Activities (continued)			
	,	系编制	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 4		X
12				
	person had advisory privileges? If "Yes," attach statement See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► HOLTHOUSE, CARLIN & VAN TRIGT Telephone no ► (310) 56	5-190	0	
	Located at ▶11444 W. OLYMPIC BLVD. 11TH FLOOR LOS ANGELES, CA ZIP+4 ▶ 90064			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			T
	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		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	0 Tit-	17. 17. 18.	
	the foreign country >	150		
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	-		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	70 70 1	Yes	No
1a	During the year, did the foundation (either directly or indirectly)	(") '	X-15-7	g;y
	(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	[· · ·]	1	
	disqualified person?	2	֧֓֞֝֝֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֟֝֓֓֓֓֓֝֝֝֓֓֝֝֝	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	1.1. 2.2.2.2.3.1.3.1.3.1.3.1.3.1.3.1.3.1.3.1.		
	the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	13.19.1		
	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)	4.7°		
b	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		2 ⁵ 37.	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	,.	12. 1 4
	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	شند	5.7.3	
•	were not corrected before the first day of the tax year beginning in 2018?	1C	1,24,714	X \$2544.4
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			8,7,7
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			A
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and	31	1 (3) 1 (4)	
•	6e, Part XIII) for tax year(s) beginning before 2018?	G		
	If "Yes," list the years			
D	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	18.7	1, 5±	
	(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	<u> ئەقسىتىس</u>	<u> </u>
_	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			Sec.
5,			374	
33	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise *			
Ja	at any time during the year?			
	of Tyes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or	1 1		첉ы
N	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		12.48.	ر الأراكية. الأراكية
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
,	foundation had excess business holdings in 2018)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	2000	1 12	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		Х

Par	t VII-B Statements Regarding Activities	for Which Form	4/20 May Be Rec	luirea (con	tinuea)			
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	n 4945(e))?	Yes	X No			
	(2) Influence the outcome of any specific public el	ection (see section	1955), or to carry or	1,				
	directly or indirectly, any voter registration drive?		•		X No		Ì	
	(3) Provide a grant to an individual for travel, study, or				X No			
	(4) Provide a grant to an organization other than a							
	section 4945(d)(4)(A)? See instructions			1 371	No			
	(5) Provide for any purpose other than religious, of					İ		
	purposes, or for the prevention of cruelty to children				X No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the				scribed in			
	Regulations section 53 4945 or in a current notice rega					5 b	X	
	Organizations relying on a current notice regarding disa	ister assistance, check	here		▶[
C	If the answer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the t	ax			1	
	because it maintained expenditure responsibility for the	grant?		. Yes	X No			
	If "Yes," attach the statement required by Regulations	=						
6a	Did the foundation, during the year, receive any fu	nds, directly or indir	ectly, to pay premiur	ms				
	on a personal benefit contract?			-	X No			
b	Did the foundation, during the year, pay premiums, dir					6ь	<u> </u>	Х
	If "Yes" to 6b, file Form 8870							
7a	At any time during the tax year, was the foundation a p	party to a prohibited ta	x shelter transaction?	. Yes	X No			
b	If "Yes," did the foundation receive any proceeds or ha	ive any net income attr	butable to the transact	ion?		7b		
8	Is the foundation subject to the section 4960 tax on pa	yment(s) of more that	n \$1,000,000 in					
	remuneration or excess parachute payment(s) during the	e year?	· ·	. Yes	X No		1	
Par	Information About Officers, Directors	ors, Trustees, Fou	Indation Manager	s, Highly P	aid Emp	loyees,		
1	List all officers, directors, trustees, and foundar	ion managers and	their compensation	. See instruc	tions.		_	
	(a) Name and address	(b) Title, and average	(c) Compensation	(d) Contribu		(e) Expen		
_	(a) Name and address				efit plans	(e) Expen other al		
		(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contribu employee ben	efit plans mpensation			es
ATCF		(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contribu employee ben	efit plans			es
		(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contribu employee ben	efit plans mpensation			es
		(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contribu employee ben	efit plans mpensation			es
		(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contribu employee ben	efit plans mpensation			es
		(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contribu employee ben	efit plans mpensation			es
		(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contribu employee ben	efit plans mpensation			es
ATCF	I 6	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contribu employee ben and deferred co	efit plans mpensation	other al	lowance	0.
ATCF		(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contribu employee ben and deferred co	efit plans mpensation 0.	other al	lowance	0.
ATCF	Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those (b) Title, and average	(c) Compensation (if not paid, enter -0-) 0 .	(d) Contribu employee ben and deferred co	efit plans mpensation 0.	other al	one,	enter
ATCF	Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	e 1 - see (d) Contribu	instructio	ons). If n	one,	enter
ATCF	Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those hours per week hour	(c) Compensation (if not paid, enter -0-) 0 .	e 1 - see (d) Contribu	instructio	other al	one,	enter
ATCF	Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those hours per week hour	(c) Compensation (if not paid, enter -0-) 0 .	e 1 - see (d) Contribu	instructio	other al	one,	enter
ATCF	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hour	(c) Compensation (if not paid, enter -0-) 0 .	e 1 - see (d) Contribu	instructio	other al	one,	enter
ATCF	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hour	(c) Compensation (if not paid, enter -0-) 0 .	e 1 - see (d) Contribu	instructio	other al	one,	enter
ATCF	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hour	(c) Compensation (if not paid, enter -0-) 0 .	e 1 - see (d) Contribu	instructio	other al	one,	enter
ATCF	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hour	(c) Compensation (if not paid, enter -0-) 0 .	e 1 - see (d) Contribu	instructio	other al	one,	enter
ATCF	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hour	(c) Compensation (if not paid, enter -0-) 0 .	e 1 - see (d) Contribu	instructio	other al	one,	enter
ATCF	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hour	(c) Compensation (if not paid, enter -0-) 0 .	e 1 - see (d) Contribu	instructio	other al	one,	enter
ATCF	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hour	(c) Compensation (if not paid, enter -0-) 0 .	e 1 - see (d) Contribu	instructio	other al	one,	enter
ATCF	Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position (other than those hours per week hour	(c) Compensation (if not paid, enter -0-) 0 .	e 1 - see (d) Contribu	instructio	other al	one,	enter

•	STABLE ROAD FOUNDATION	82-53	L53380 '
m 990-PF (2018)			Page 7
Information Ab and Contractor	out Officers, Directors, Trustees, Foundation is (continued)	Managers, Highly Paid Employ	rees,
Five highest-paid indep	endent contractors for professional services. Se	e instructions. If none, enter "NONE	
(a) Name and a	address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
		_	
		— [
	ng over \$50,000 for professional services	<u> </u>	0.
	Direct Charitable Activities		
	rect charitable activities during the tax year. Include relevant sta s served, conferences convened, research papers produced, etc.	itistical information such as the number of	Expenses
N/A	· · · · · · · · · · · · · · · · · · ·		
14/11			
			•
		•	
			,
			
art IX-B Summary of	Program-Related Investments (see instruction	ns)	
		nes 1 and 2	Amount

Part IX-B	Summary of Program-Related Investments (see instructions)	
Describe the	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
		-
All other pro	ogram-related investments. See instructions	
3		
NONE		
Total Add I	ines 1 through 3	
		Form 990-PF (201

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Page 8

Pai	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign foi	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.		
_	purposes Assessment to the constant of a secretary	4.	149,815.
	Average monthly fair market value of securities	1a 1b	2,666.
	Average of monthly cash balances		2,000.
	Fair market value of all other assets (see instructions)	1c	152,481.
	Total (add lines 1a, b, and c)	1d	132,401.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation)	1 .	
2	Acquisition indebtedness applicable to line 1 assets	2	152 401
3	Subtract line 2 from line 1d	3	152,481.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	1.1	2 207
	instructions)	4	2,287.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	150,194.
6	Minimum investment return. Enter 5% of line 5	6	5,555.
Pai	Tt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part)	ndation	S
1	Minimum investment return from Part X, line 6	1	5,555.
	Tax on investment income for 2018 from Part VI, line 5 2a 35		
h	Income tax for 2018 (This does not include the tax from Part VI).	1	
	Add lines 2a and 2b	2c	35.
3	Distributable amount before adjustments Subtract line 2c from line 1	$\overline{}$	5,520.
4	Recoveries of amounts treated as qualifying distributions		· · · · · · · · · · · · · · · · · · ·
5	Add lines 3 and 4	5	5,520.
6	Deduction from distributable amount (see instructions)	-	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
<u> </u>	line 1	7	5,520.
Pai	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	T	
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1.	123,804.
	Program-related investments - total from Part IX-B	-	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	10	
-	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
-	Suitability test (prior IRS approval required)	3a	
h	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	123,804.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	-	220,001.
•	Enter 1% of Part I, line 27b See instructions.	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		123,804.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when co		
	qualifies for the section 4940(e) reduction of tax in those years	uicuiali	ing whether the loundation

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⊳_{age} 9

Part XIII Undistributed Income (see instr	uctions)			- ¢,
	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,		ر الله الله الله الله الله الله الله الل	120 12 13 14 15 15 15 15 15 15 15 15 15 15 15 15 15	5,520.
line 7				
a Enter amount for 2017 only	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
b Total for prior years 20 16 20 15 20 14			$= \frac{1}{\mu_{\frac{1}{2},\frac{1}{2},\frac{1}{2},\frac{1}{2},\frac{1}{2}} = \frac{1}{\mu_{\frac{1}{2},\frac{1}{2},\frac{1}{2},\frac{1}{2},\frac{1}{2},\frac{1}{2}} = \frac{1}{\mu_{\frac{1}{2},\frac{1}{2},\frac{1}{2},\frac{1}{2},\frac{1}{2}} = \frac{1}{\mu_{\frac{1}{2},\frac{1}{2},\frac{1}{2},\frac{1}{2}} = \frac{1}{\mu_{\frac{1}{2},\frac{1}{2},\frac{1}{2}} = \frac{1}{\mu_{\frac{1}$	The state of the s
3 Excess distributions carryover, if any, to 2018	The state of the s		3 - 4 - 1 - 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a From 2013	1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1			
h From 2014				
c From 2015				
d From-2016	10 -1 2 1 1 2 1 2 1 2 1 1 1 1 1 1 1 1 1 1			
e From 2017	THE PROPERTY AND ASSESSMENT		h	Table to the second of the sec
f Total of lines 3a through e	7 g 7			- ''
4. Qualifying distributions for 2018 from Part XII,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		01	
line 4 > \$123,804.				
a Applied to 2017, but not more than line 2a	and the second of the second o	The same of the sa	The state of the s	problem of the second of the s
b Applied to 'undistributed income of prior years				
(Election required - see instructions)	a programme and the	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The state of the s	
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2018 distributable amount.	11 may 1 mg 1 m	10 A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The state of the s	5,520.
e Remaining amount distributed out of corpus	118,284.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
5 Excess distributions carryover applied to 2018	1 17	and the state of t		* *
(If an amount appears in column (d), the same amount must be shown in column (a))	b'		Contract to the second	
6 Enter the net total of each column as				
indicated below:	W 13			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	118,284.	[1] (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	Light of the second of the sec	grand the street of the street
b Prior years' undistributed income Subtract				
line 4b from line 2b.			A DET TERM TO THE SET OF THE SET	to the state of th
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	The property of the state of th		Was Alexander with the state of	
d Subtract line, 6c from line, 6b Taxable amount - see instructions				
e Undistributed income for 2017 Subtract line	The state of the s	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		The state of the s
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	- 18 - 14 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	1		1 00 1 0 4 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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	4 , 1.0			
required - see instructions)	· · · · ·		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
8 Excess distributions carryover from 2013 not				
applied on line 5 or line 7 (see instructions)	t v _e to	The second of th		The second of th
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a.	118,284			
10 Analysis of line 9	7 1 1 7 7 7 1 1 7 7 7 1 1 1 1 1 1 1 1 1		1-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a Excess from 2014	「「「「」」「「」」「「」」「「」」「「」「」「」「」「」「」「」「」「」「	$ \left\{ \begin{array}{ll} \int_{\mathbb{R}^{N}} \frac{1}{2\pi} \frac{dx}{dx} & -\frac{1}{2\pi} \int_{\mathbb{R}^{N}} \frac{1}{2\pi} \frac{dx}{dx} & -\frac{1}{2\pi} \int_{\mathbb{R}^{N}} \frac{1}{2\pi} \frac{dx}{dx} & -\frac{1}{2\pi} \int_{\mathbb{R}^{N}} \frac{dx}{dx} & -\frac{1}{2\pi} \frac{1}{2\pi} \frac{dx}{dx} & -\frac{1}{2\pi} \frac{dx}{dx} & -\frac{1}{2$	· · · · · · · · · · · · · · · · · · ·	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
b Excess from 2015				
c Excess from 2016			الله المالية ا المالية المالية المالي	
d Excess from 2017		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
e Excess from 2018	The state of the s		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	

Pa	rt XIV Private Op	erating Foundations	(see instructions ar	nd Part VII-A, questi	on 9) N	OT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter that	it is a private opera	ating	
	foundation, and the ruling	g is effective for 2018, ei	nter the date of the ruling ,		▶	
b	Check box to indicate v	whether the foundation	is a private operating f	oundation described in	section 4942(j)	(3) or 4942(J)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) rotar
	or the minimum investment					
	return from Part X for each year listed					
h	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					
3	2d from line 2c					
•	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets					<u> </u>
	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)		/			
D	"Endowment" alternative test- enter 2/3 of minimum invest-	_				
	ment return shown in Part X,					
	line 6 for each year listed	//_				
С	"Support" alternative test - enter				İ	
	(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 section 4942					
	(j)(3)(B)(III)	<u> </u>		 _		
	(3) Largest amount of sup- port from an exempt		18			
	organization					
	(4) Gross investment income.	1.5	2	- I the family	4: h \$5.000	
۲a		ntary information (Guring the year - see		only if the founda	ation nag \$5,000 o	r more in assets at
4	Information Regardin			· 	" 	
	List any managers of			e than 2% of the tota	al contributions receiv	ed by the foundation
_	before the close of any					ou by the realitation
	EDWARD FREE		•	, ,	(/ / / /	
h	List any managers of		own 10% or more of	the stock of a corn	oration (or an equally	large portion of the
	ownership of a partner					large portion of the
	, , , , , , , , , , , , , , , , , , ,	,				
	N/A					
2	Information Regardin	g Contribution, Grant	Gift, Loan, Scholarsh	ip. etc Programs:		
_	Check here ► X if t	•		-	itable organizations s	and door not accont
	unsolicited requests for	or funds If the found:	ation makes offs ara	nts etc to individua	ilable organizations un	ind does not accept ider other conditions
	complete items 2a, b,			into, oto, to marriada	io or organizations ar	ider officer containents,
	The name, address, a			e nerson to whom and	olications should be add	ressed
u	The hame, address, a	na telephone namber	or cinali address or ar	c person to whom app	modulo il oriodia de ada	103504
b	The form in which app	lications should be sul	omitted and information	n and materials they	should include	<u></u>
_	это тоги и и и и и и и и и и и и и и и и и и					
С	Any submission deadli	nes				
	-					
d	Any restrictions or li	mitations on awards	, such as by geogra	phical areas, charita	able fields, kinds of	institutions, or other
	factors					

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Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid Dur	ing the Year or App	roved for	II	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Control	
a Paid during the year				
ATCH 7				
•				
]			
				118,500.
b Approved for future payment				120,0001
b Approved for future payment				
				1
		Ì		
*				
		<u> </u>		
Total			<u></u> ▶ <u>3b</u>	

ter gross	amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
•	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
-		-				
C						
d						
f						
g Fees	and contracts from government agencies					
Members	ship dues and assessments					
	n savings and temporary cash investments -					
	s and interest from securities			14	1,761.	
	al income or (loss) from real estate		*			
a Debt	financed property					
h Not d	lebt-financed property					
Net renta	I income or (loss) from personal property					
Other in	vestment income					
Gain or (I	oss) from sales of assets other than inventory					
Net inco	me or (loss) from special events					
	rofit or (loss) from sales of inventory			-		
Other re	venue a					
b						
c						
d						
<u> </u>		1				
е					1 761	
e Subtotal	Add columns (b), (d), and (e)				1,761.	<u> </u>
e Subtotal Total. Ad	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calci	ulations)		· · · · · · · ·	13	
e Subtotal Total. Ace ee worksh art XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calc	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ac ee worksh art XVI- ine No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ac ee worksh art XVI- ine No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ac ee worksh art XVI- ine No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ac ee worksh art XVI- ine No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ac ee worksh art XVI- ine No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ac ee worksh art XVI- ine No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ad e worksh art XVI- ne No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ac ee worksh art XVI- ine No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ad e worksh art XVI- ne No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
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e Subtotal Total. Ad e worksh art XVI- ne No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
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e Subtotal Total. Ac e worksh art XVI- ne No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ad e worksh art XVI- ne No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ad e worksh art XVI- ne No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ac ee worksh art XVI- ine No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ace worksh art XVI- ine No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ad ee worksh art XVI- ine No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ac ee worksh art XVI- ine No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ace worksh art XVI- ine No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ace worksh art XVI- ine No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ad ee worksh art XVI- ine No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,76
e Subtotal Total. Ad e worksh Irt XVI- ne No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calciber Relationship of Activitie Explain below how each activitie	ulations) s to the A	ccomplishment of	Exempt Pur	poses e) of Part XVI-A contrib	1,

Form **990-PF** (2018)

Part	XVII	Exempt Org		ansters to and it	ansactions	s and r	eiations	nips vv	ith Nonc	IIanı	abie	
1	Did the			engage in any of the	following wi	th any c	ther organ	nization o	lescribed		Yes	No
		•	•	501(c)(3) organizat	_	-	-					
		zations?	ici (ilali scotion	00 .(0)(0) 01gu20.		00000	02.,	g 10	poou.		ł	
			rting foundation to	a noncharitable exer	mnt organizati	on of						
		·	-							10(1)	İ	Х
			· · · · · · · · · · · · · · · · · · ·							1a(2)		
		transactions										Х
				mpt organization								<u> </u>
				able exempt organizati								- <u>^</u>
				assets								
												<u> X</u>
												<u>X</u> _
				nip or fundraising solic								<u> X</u>
				ts, other assets, or pa								X
				es," complete the fol								
				ices given by the rep								
	value	in any transaction	or sharing arrang	gement, show in coli	ımn (d) the v	value of	the goods	, other a	ssets, or se	rvices	rece	eived
(a) Li	ne no	(b) Amount involved	(c) Name of r	noncharitable exempt organ		<u>` </u>	tion of transf	ers, transact	ions, and shan	ng arrai	ngeme	nts
		N/A			N	1/A						
				<u> </u>								
	1											
							-					
				·								
					ı							
2a	Is the	foundation direc	tly or indirectly af	filiated with, or relat	ed to, one or	r more t	ax-exempt	organiza	ations			
	descri	bed in section 50°	1(c) (other than se	ction 501(c)(3)) or in	section 527?				[Ye	s X	No
		s," complete the fo										
		(a) Name of organia		(b) Type of org	janization		(c) Descript	on of relations	hip		
		·		· · · · · · · · · · · · · · · · · · ·								
			<u> </u>									
	Unde	er penalties of penury, I	declare that I have exam	ined this return, including act	companying schedu	les and sta	tements, and t	o the best o	f my knowledg	e and b	elief, it	is true,
o:		ct, and complete declarat	or or preparer (other than t	taxpayer) is based on all informa	ation of which prepa	arer nas any i	knowledge		[<u>.</u>			
Sigr				_ X 11/13/1	9 X	PRES	IDENT		May the IRS with the pre			
Her	e Sig	nature of officer of trus	stee	Date	Title	9			See instructions	<u>X</u>	Yes [No
								_				
		Print/Type preparer	's name	Preparer's signature	1. 11		Date	Che	ckif F	TIN		
Paid	I	STEPHANIE	WILKINSON	Stope	, was		11/06/20	019 self	employed 1	012	3161	7
Prep	oarer	Firm's name	HOLTHOUSE CA	RLIN & VAN TRI	GT LLP	·		Firm's EIN	▶95-43	4552	26	
Use	Only			TE ROAD, SUITE	400					_		
			WESTLAKE VIL			9136	1	Phone no	805-37	4-85	555	
		·								. 000	DE	/0040

Schedule B

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

Department of the Treasury 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

2018

Employer identification number

STABLE ROAD FOUNDA	·	82-5153380
Organization type (check o	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	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a pe	rivate foundation
	501(c)(3) taxable private foundation	
	30 1(0)(0) taxable private foundation	
_	ion filing Form 990, 990-EZ, or 990-PF that received, during the yey or property) from any one contributor. Complete Parts I and II. Sel contributions	
Special Rules		
regulations unde 13, 16a, or 16b,	ion described in section 501(c)(3) filing Form 990 or 990-EZ that it sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule and that received from any one contributor, during the year, total % of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990	A (Form 990 or 990-EZ), Part II, line contributions of the greater of (1)
contributor, durii literary, or educa	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 9 ing the year, total contributions of more than \$1,000 exclusively for ational purposes, or for the prevention of cruelty to children or anim (b) instead of the contributor name and address), II, and III	r religious, charitable, scientific,
contributor, during contributions total during the year for the general Rule appartment of the contribution of the contributio	ion described in section 501(c)(7), (8), or (10) filing Form 990 or some the year, contributions exclusively for religious, charitable, etc., aled more than \$1,000. If this box is checked, enter here the total or an exclusively religious, charitable, etc., purpose. Don't complete plies to this organization because it received nonexclusively religious or more during the year	purposes, but no such contributions that were received te any of the parts unless the us, charitable, etc, contributions
Caution: An organization the	hat isn't covered by the General Rule and/or the Special Rules do	esn'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)

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

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

Employer identification number 82-5153380

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	EDWARD FREEDMAN		Person X			
	1345 ABBOTT KINNEY BOULEVARD	\$135,000.	Payroli Noncash			
	VENICE, CA 90291		(Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2	EDWARD FREEDMAN		Person			
	1345 ABBOTT KINNEY BOULEVARD	\$ \$.	Payroll X			
	VENICE, CA 90291		(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)			

Name of organization STABLE ROAD FOUNDATION

Employer identification number

82-5153380 Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed Part II (c) (a) No. (d) FMV (or estimate) from Date received Description of noncash property given (See instructions) Part I 1,204 SHS APPLE INC. SECURITIES 2 250,589. 08/07/2018 (a) No. (c) (d) FMV (or estimate) from Date received Description of noncash property given (See instructions) Part I 6,373 SHS APPLE INC. SECURITIES 2 997,597. 12/28/2018 (c) (a) No. (d) (b) FMV (or estimate) from **Date received** Description of noncash property given (See instructions) Part I (c) (a) No. (d) (b) from FMV (or estimate) **Date received** Description of noncash property given Part I (See instructions) (c) (a) No. (d) (b) FMV (or estimate) from Date received Description of noncash property given (See instructions) Part I (c) (a) No. (d) (b) FMV (or estimate) from Date received

(See instructions)

Part I

Description of noncash property given

Name of organization STABLE ROAD FOUNDATION

Employer identification number 82-5153380

Part III	(10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) a the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, e contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ Use duplicate copies of Part III if additional space is needed.							
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
Part I								
		(e) Transf	er of gift	<u> </u>				
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee				
(a) No.								
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
								
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
(a) No								
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, a	• •	Relationship of transferor to transferee					

ATTACHMENT 1		
ATTACHMENT		

FEES
LEGAL
1
H
PART
990PF,
FORM

CHARITABLE	PURPOSES	4,604.	4,604.
ADJUSTED NET	INCOME		
NET INVESTMENT	INCOME		
REVENUE AND EXPENSES	PER BOOKS	4,604.	4,604.
			TOTALS
	DESCRIPTION	LEGAL FEES	

82-5153380

ATTACHMENT

PFNSFS
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OTHER
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DA RT
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000
NAC.

REVENUE AND EXPENSES PER BOOKS

2,500.

CHARITABLE PURPOSES 700.

700.

DESCRIPTION SPECIAL EVENTS OTHER EXPENSE

TOTALS

3,200.

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PART II - CORPORATE STOCK FORM 990PF,

	ШΙ
BEGINNING	BOOK VALUE
	DESCRIPTION

ENDING <u>FMV</u>	1,195,196.	1,195,196.
ENDING BOOK VALUE	1,195,196.	1,195,196.
BOOK VALUE		
		TOTALS
DESCRIPTION	7,577 SHS APPLE INC.	

ATTACHMENT 4

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

DESCRIPTION

AMOUNT

UNREALIZED LOSS ON INVESTMENT

52,990.

TOTAL

52,990.

STABLE ROAD FOUNDATION

FORM 990PF, PART VII-A, LINE 10 - SUBSTANTIAL CONTRIBUTORS

ATTACHMENT 5

NAME AND ADDRESS

EDWARD FREEDMAN 1345 ABBOTT KINNEY BOULEVARD VENICE, CA 90291

FOUNDATION	
ROAD	
STABLE	

2018 FORM 990-PF

82-5153380

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

			ATTACHMENT 7
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
	LA CAST	movenis Symmetric Indian	9
YOUTH TECHNOLOGY CORPS INC	NONE	GENERAL OFERALING SUPPORT	000 0
1055 W BRYN MAWR AVE	PC		
CHICAGO, IL 60660			
WAUKEGAN TO COLLEGE	NONE	GENERAL OPERATING SUPPORT	4,000.
410 GRAND AVENUE	PC		
WAUKEGAN, IL 60085			
CREATE CURES FOUNDATION	GNON	GENERAL OPERATING SUPPORT	15,000
8240 ZITOLA TERRACE	PC		
PLAYA DEL REY, CA 90293	,		
THE BUDDY PROGRAM	, NONE	GENERAL OPERATING SUPPORT	10,000
110 EAST HALLAM STREET, SUITE 125			
ASPEN, CO 81611	,		
MARSHALL DIRECT FUND	NONE	GENERAL OPERATING SUPPORT	5,000
P O BOX 4477	PC		
ASPEN, CO 81612			
	!!		
HABITAT FOR HUMANITY ROARING FORK VALLEY	NONE	GENERAL OPERATING SUPPORT	5, 000
53 CALAWAY COURT	PC		
GLENWOOD SPRINGS, CO 81601			

NOI	
FOUNDAT	
ROAD	
STABLE	

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

2018 FORM 990-PF

82-5153380

1

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

ASPEN YOUTH CENTER

P O BOX 8266

ASPEN, CO 81612

NONE

5 35 57 PM 11/2/2019

293900 U575

V 18-7 5F

NONE

ASPEN HOMELESS SHELTER

ASPEN, CO 81612

P O BOX 1686

NONE

DAVID LYNCH FOUNDATION

1550 LARIMER STREET, SUITE 770

SUMMIT 54

DENVER, CO 80202

NONE

NONE

GIVEPOWER FOUNDATION

SAN MATEO, CA 94402 3055 CLEARVIEW WAY

FAIRFIELD, IA 52557

1000 N 4TH STREET

NONE

THE ASPEN INSTITUTE SOCIETY OF FELLOWS

2300 N STREET N W , #700

WASHINGTON, DC 20037

ATTACHMENT 7 (CONT'D)

AMOUNT PURPOSE OF GRANT OR CONTRIBUTION GENERAL OPERATING SUPPORT

2,500

GENERAL OPERATING SUPPORT

1,000.

GENERAL OPERATING SUPPORT

1,500

1,000

GENERAL OPERATING SUPPORT

50,000

GENERAL OPERATING SUPPORT

3,500

GENERAL OPERATING SUPPORT

ATTACHMENT 7

O FOUNDATION	OUNDATION		
FOUNDA	E ROAD FOUNDA	Ó	
	E ROP	FOUNDAT	

2018 FORM 990-PF

82-5153380

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

11/2/2019

293900 U575

1,500.

2,500

1,000.

1,500

PHILADELPHIA, PA 19146 1501 CHRISTIAN STREET MIGHTY WRITERS

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR	
	AND	
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION
NATIONAL CONSTITUTION CENTER	NONE	GENERAL OPERATING SUPPORT
525 ARCH STREET	PC	
PHILADELPHIA, PA 19106		
TOUNT ATMINANT ATMINANT MANAGEMENT	Livon	nacadus Curneadae tecanas
FILEADELFILA KONALD PLOUMALD HOUSE	NOINE	GENERAL CERMITING SOFFORT
3925 CHESTNUT STREET	PC	
PHILADELPHIA, PA 19104		
WORLD AFFAIRS COUNCIL	NONE	GENERAL OPERATING SUPPORT
2200 ALASKAN WAY, SUITE 450	. Dd	
SEATTLE, WA 98121		
NATIONAL MUSEUM OF AMERICAN JEWISH HISTORY	NONE	GENERAL OPERATING SUPPORT
101 SOUTH INDEPENDENCE MALL EAST	PC	
PHILADELPHIA, PA 19106		
FREE LIBRARY OF PHILADELPHIA FOUNDATION '	NONE	GENERAL OPERATING SUPPORT
1901 VINE STREET	PC	
PHILADELPHIA, PA 19103		
MIGHTY WRITERS	NONE	GENERAL OPERATING SUPPORT
1501 CHRISTIAN STREET	PC	

2,500.

AMOUNT

ATTACHMENT 7 (CONT'D)

2,500

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NO
FOUNDATIC
ROAD
STABLE

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

2018 FORM 990-PF

82-5153380

11/2/2019 293900 U575

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

2,500

AMOUNT

ATTACHMENT 7 (CONT'D)

6501 E. GREENWAY PKWY, STE 103 PMB SCOTTSDALE, AZ 85254

GREATER PHOENIX JEWISH FILM FESTIVAL INC

RECIPIENT NAME AND ADDRESS

NONE

GENERAL OPERATING SUPPORT

TOTAL CONTRIBUTIONS PAID

118,500

ATTACHMENT 7

V 18-7 5F

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