

Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

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

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

OMB No 1545-0052
2018
Open to Public Inspection

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

Name of foundation SEVEN C FOUNDATION		A Employer identification number 83-0281196	
Number and street (or P O box number if mail is not delivered to street address) 4292 SOUTH FORK ROAD		B Telephone number (see instructions) (307) 587-2051	
Room/suite		C If exemption application is pending, check here <input type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code CODY, WY 82414		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>421,584</u>		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	13,367	13,367		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	10,019			
	b Gross sales price for all assets on line 6a <u>104,370</u>				
	7 Capital gain net income (from Part IV, line 2)		10,019		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	23,386	23,386			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	2,725	2,725		
	c Other professional fees (attach schedule)	2,097	2,097		
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	1,333	450		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	47	47		
	24 Total operating and administrative expenses. Add lines 13 through 23	6,202	5,319		0
	25 Contributions, gifts, grants paid	73,750			73,750
26 Total expenses and disbursements. Add lines 24 and 25	79,952	5,319		73,750	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	-56,566				
b Net investment income (if negative, enter -0-)		18,067			
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	14,027	18,571	18,571
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	357,032	286,349	290,619
	c Investments—corporate bonds (attach schedule)	68,484	83,296	80,089
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	37,983	32,744	32,305
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	477,526	420,960	421,584	
Liabilities	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 (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)		0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> 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			
29 Retained earnings, accumulated income, endowment, or other funds	477,526	420,960		
30 Total net assets or fund balances (see instructions)	477,526	420,960		
31 Total liabilities and net assets/fund balances (see instructions) .	477,526	420,960		

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 (must agree with end-of-year figure reported on prior year's return)	1	477,526
2 Enter amount from Part I, line 27a	2	-56,566
3 Other increases not included in line 2 (itemize) ▶ _____	3	
4 Add lines 1, 2, and 3	4	420,960
5 Decreases not included in line 2 (itemize) ▶ _____	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	420,960

Part IV Capital Gains and Losses for Tax on Investment Income

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

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

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

2 Capital gain net income or (net capital loss)	2	10,019
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	-26

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2017	72,750	514,379	0.141433
2016	71,750	597,553	0.120073
2015	83,558	119,557	0.698897
2014	82,750	727,822	0.113695
2013	82,896	712,866	0.116286

2 Total of line 1, column (d)	2	1.190384
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.238077
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	461,265
5 Multiply line 4 by line 3	5	109,817
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	181
7 Add lines 5 and 6	7	109,998
8 Enter qualifying distributions from Part XII, line 4	8	73,750

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

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

Table with 11 rows for excise tax calculations. Includes items like 'Exempt operating foundations', 'Domestic foundations that meet the section 4940(e) requirements', 'Tax based on investment income', and 'Credits/Payments'. Total amount owed is shown on line 9.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, political expenditures, and state reporting. Columns for 'Yes' and 'No' are provided for each question.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, distributions, public inspection requirements, and books in care.

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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.

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in foreign countries.

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

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

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

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

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

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3 ▶	

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	463,537
b	Average of monthly cash balances.	1b	16,299
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	479,836
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	479,836
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	18,571
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	461,265
6	Minimum investment return. Enter 5% of line 5.	6	23,063

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

1	Minimum investment return from Part X, line 6.	1	23,063
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	361
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	361
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	22,702
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	22,702
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	22,702

Part XII Qualifying Distributions (see instructions)

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	73,750
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
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	73,750
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	73,750

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				22,702
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.				
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2018				
a From 2013.	48,061			
b From 2014.	48,958			
c From 2015.	77,964			
d From 2016.	43,710			
e From 2017.	47,388			
f Total of lines 3a through e.	266,081			
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ <u>73,750</u>				
a Applied to 2017, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2018 distributable amount.				22,702
e Remaining amount distributed out of corpus	51,048			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	317,129			
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				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).				
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).	48,061			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	269,068			
10 Analysis of line 9				
a Excess from 2014.	48,958			
b Excess from 2015.	77,964			
c Excess from 2016.	43,710			
d Excess from 2017.	47,388			
e Excess from 2018.	51,048			

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

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

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

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
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					
(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.					
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 section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))
NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest
NONE

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

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

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

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

c Any submission deadlines

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

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total				▶ 3a
b <i>Approved for future payment</i>				
Total				▶ 3b

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

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1 MFO DFA INVT DIMENSIONS	P	2018-01-01	2018-02-02
1 MFO DFA INVT DIMENSIONS	P	2017-01-01	2018-02-02
MFC FLEXSHAES TR	P	2017-01-01	2018-09-10
MFB NORTHERN FUNDS EMERG MKT	P	2017-01-01	2018-09-10
MFC ISHARES TR MSCI EAFE	P	2017-01-01	2018-12-03
MFB NORTHERN MID CAP INDES	P	2017-01-01	2018-12-03
MFB NORTHERN FUNDS EMERGY MKG	P	2017-01-01	2018-12-03
MFB NORTHERN FDS SMALL CAP	P	2017-01-01	2018-12-03
MFC SPDR TR UNIT SER 1	P	2017-01-01	2018-12-03

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
663		689	-26
4,337		4,550	-213
9,827		10,188	-361
15,000		14,092	908
20,631		20,308	323
5,500		5,291	209
7,000		6,374	626
3,500		3,275	225
34,794		29,584	5,210

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-26
			-213
			-361
			908
			323
			209
			626
			225
			5,210

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ART INSTITUTE OF CHICAGO ART INSTITUTE OF CHICAGO 111 S MICHIGAN AVE 111 S MICHIGAN AVE CHICAGO, IL 60603	NONE	TAX EXEMPT	CIVIC	1,000
BANNER LAKE CLUB BANNER LAKE CLUBPO BOX 1874 PO BOX 1874 HOBE SOUND, FL 33475	NONE	EXEMPT	CIVIC	500
BIG BROTHERS BIG SISTERS OF CHCAGO BIG BROTHERS BIG SISTERS OF CHICAGO 560 W LAKE ST 560 W LAKE ST CHICAGO, IL 60661	NONE	TAX EXEMPT	CIV IC	1,000
Total				73,750

▶ **3a**

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BUFFALO BILL CENTER OF THE WEST BUFFALO BILL CENTER OF THE WEST 720 SHERIDAN AVE 720 SHERIDAN AVE CODY, WY 82414	NONE	TAX EXEMPT	CIVIC	750
CAMP SEA GULL CAMP SEA GULL218 SEA GULL LANDING 218 SEA GULL LANDING ARAPHOE, NC 28510	NONE	TAX EXEMPT	SOCIAL	500
CASA DE AMPARO CASA DE AMPARO 325 BUENA CREEK ROAD 325 BUENA CREEK RD SAN MARCOS, CA 92069	NONE	TAX EXEMPT	SOCIAL	2,000
Total ▶ 3a				73,750

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHARLOTTE COUNTRY DAY CHARLOTTE COUNTRY DAY 1440 CARMEL RD 1440 CARMEL RD CHARLOTTE, NC 28226	NONE	TAX EXEMPT	EDUCATIONAL	1,000
CHICAGO HORTICULTURAL SOCIETY CHICAGO HORTICULTURAL SOCIETY 1000 LAKE COOK ROAD 1000 LAKE COOK ROAD GLENCOE, IL 60062	NONE	TAX EXEMPT	CIVIC	3,000
CHICAGO SYMPHONY ORCHESTRA CHICAGO SYMPHONY ORCHESTRA 212 S MICHIGAN AVE 212 S MICHIGAN AVE CHICAGO, IL 606042508	NONE	TAX EXEMPT	SOCIAL	200
Total			▶ 3a	73,750

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHRIST MEMORIAL CHURCH CHRIST MEMORIAL CHURCHPO BOX 582 PO BOX 582 HOBE SOUND, FL 33475	NONE	TAX EXEMPT	CIVIC	300
CHURCH OF THE HOLY SPIRIT CHURCH OF THE HOLY SPIRIT 400 E WESTMINSTER RD 400 E WESTMINSTER RD LAKE FOREST, IL 60045	NONE	TAX EXEMPT	SOCIAL	1,000
CITY OF HOPE CITY OF HOPE1500 E DUARTE 1500 E DUARTE DUARTE, CA 91010	NONE	TAX EXEMPT	CIVIC	4,000
Total ▶ 3a				73,750

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CODY RECREATION DISTRICT CODY RECREATION DISTRICT PO BOX1531 PO BOX 1531 CODY, WY 82414	NONE	TAX EXEMPT	CIVIC	100
COLORADO SPRINGS FINE ART CENTER COLORADO SPRINGS FINE ART CENTER 30 W DALE ST 30 W DALE ST COLORADO SPRINGS, CO 80903	NONE	TAX EXEMPT	CIVIC	2,000
COLORADO SPRINGS HUMANE SOCIETY COLORADO SPRINGS HUMNE SOCIETY 610 ABBOTT LANE 610 ABBOTT LANE COLORADO SPRINGS, CO 80905	NONE	EXEMPT	CIVIC	1,500
Total ▶ 3a				73,750

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COLORADO SPRINGS THERAPEUTIC CTR COLORADO SPRINGS THERAPEUTIC CTS 3250 PASEO RD 3250 PASEO RD COLORADO SPRINGS, CO 80909	NONE	EXEMTP	CIVIC	1,500
COMM CHUTCH OF LAKE FOREST LAKE BLU COMM CHURCH OF LAKE FOREST LAKE BLUFF PO BOX 26 PO BOX 26 LAKE BLUFF, IL 60044	NONE	TAX EXEMPT	SOCIAL	2,250
EASTOVER PTA EASTOVER PTA500 CHEROKEE RD 500 CHEROKEE RD CHARLOTTE, NC 28207	NONE	EXEMPT	CIVIC	1,000
Total ▶ 3a				73,750

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ETHEL WALKER SCHOOL ETHEL WALKER SCHOOL 230 BUSHY HILL RD 230 BUSHY HILL RD SIMSBURY, CT 06070	NONE	TAX EXEMPT	EDUCATIONAL	1,000
EVANS SCHOLARSHIP FOUNDATION EVANS SCHOLARSHIP FOUNDATION ONE BRIAR RD ONE BRIAR RD GOLF, IL 60029	NONE	TAX EXEMPT	EDUCATIONAL	250
EVERGLADES FOUNDATION EVERGLADES FOUNDATION 18001 OLD CUTLER RD 18001 OLD CUTLER ROAD PALMETTO BAY, FL 33157	NONE	TAX EXEMPT	CIVIC	500
Total			▶ 3a	73,750

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FIELD MUSEUM OF NATURAL HISTORY FIELD MUSEUM OF NATURAL HISTORY 1400 S LAKE SHORE DR 1400 S LAKE SHORE DR CHICAGO, IL 60605	NONE	TAX EXEMPT	SOCIAL	1,000
FOUNTAIN VALLEY SCHOIOL FOUNTAIN VALLEY SCHOOL 6155 FOUNTAIN VALLEY SCH 6155 FOUNTAIN VALLEY SCH SECURITY, CO 80911	NONE	TAX EXEMPT	EDUCATIONAL	2,500
FRIENDS OF CHEYENNE CANYON FRIENDS OF CHEYENNE CANYON PO BOX 60275 PO BOX 60275 COLORADO SPRINGS, CO 80906	NONE	TAX EXEMPT	CIVIC	1,500
Total ▶ 3a				73,750

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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Name and address (home or business)				
a <i>Paid during the year</i>				
FRIENDS OF HISTORIC GENESEE THEATRE FRIENDS OF HISTORIC GENESEE THESTRE 203 N GENESEE 203 N GENESEE WAUKEGAN, IL 60085	NONE	TAX EXEMPT	CIVIC	1,000
FUND FOR BABSON FUND FOR BABSON 231 FOREST ST 231 FOREST ST BABSON PARK, MA 02457	NONE	TAX EXENOT'	EDUCATIONAL	500
HOBE SOUND COMMUNITY CHEST HOBE SOUND COMMUNITY CHEST PO BOX 511 PO BOX 511 HOBE SOUND, FL 33475	NONE	TAX EXEMPT	CIVIC	500
Total ▶ 3a				73,750

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Name and address (home or business)				
a <i>Paid during the year</i>				
HOPE WAY HOPE WAY1717 SHARON ROAD W 1717 SHARON ROAD W CHARLOTTE, NC 28210	NONE	TAX EXEMPT	CIVIC	1,000
HOSPICE & PALLIATIVE CARE HOSPICE & PALLIATIVE CARE 1420 E 7TH ST 1420 E 7TH ST CHARLOTTE, NC 28204	NONE	TAX EXEMPT	MEDICAL	1,000
HOTCHKISS SCHOOL HOTCHKISS SCHOOL 11 INTERLAKEN RD 11 INTERLAKE RD LAKEVILLE, CT 06039	NONE	TAX EXEMPT	EDUCATIONAL	1,000
Total ▶ 3a				73,750

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
INSTITUTE FOR ETHNO MEDICINE INSTITUTE FOR ETHNO MEDICINE 3214 N UNIVERSITY AVE 3214 N UNIVERSITYH AVE PROVO, UT 84604	NONE	TAX EXEMPT	HEALTH	500
INT'L SCHOOL PORJECT INT'L SCHOOL PROJECT 504 GREAT NORTH ROAD 504 GEAT NORTH ROAD COLUMBIA, SC 29223	NONE	EXEMPT	CIVIC	1,000
J FIELD FOUNDATON J FIELD FOUNDATIONPO BOX 5 PO BOX 5 WHITESTONE, VA 225780005	NONE	EXEMPT	CIVIC	300
Total ▶ 3a				73,750

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JUPITER IMEDICAL CENTER FOUNDATION JUPITER MEDICAL CENTER FOUNDATON 1210 SOUTN OLD DIXIE HGWY 1210 SOUTH OLD DIXIE HGWY JUPITER ISLAND, FL 334587299	NONE	TAX EXEMPT	MEDICAL	1,000
JUPITER ISLAND GARDEN CLUB JUPITER ISLAND GARDEN CLUB PO BOX 1410 PO BOX 1410 JUPITER, FL 334751410	NONE	TAX EXEMPT	MEDICAL	200
JUPITER ISLAND HISTORICAL SOCIETY JUPITER ISLAND HISTORICAL SOCIETY PO BOX 938 PO BOX 9389 HOBE SOUND, FL 33475	NONE	TAX EXEMPT	SOCIAL	150
Total ▶ 3a				73,750

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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Name and address (home or business)				
a <i>Paid during the year</i>				
JUPITER ISLAND MEDICAL CLINIC JUPITER ISLAND MEDICAL CLINIC 100 ESTRADA SQUARE 100 ESTRADA SQUARE HOBE SOUND, FL 33455	NONE	PUBLIC	MEICAL	1,000
LAKE COUNTY COMMUNITY FDN LAKE COUNTY COMMUNITY FDN 114 S GENESSEE ST 505 114 S GENESSEE ST 505 WAUKEGAN, IL 60085	NONE	TAX EXEMPT	CIVIC	1,500
LAKE FOREST ACADEMY LAKE FOREST ACADEMY 1500 W KENNEDY RD 1500 W KENNEDY RD LAKE FOREST, IL 60045	NONE	TAX EXEMPT	EDUCATIONAL	1,000
Total ▶ 3a				73,750

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LAKE FOREST GARDEN CLUB LAKE FOREST GARDEN CLUBBOX 868 BOX 868 LAKE FOREST, IL 60045	NONE	TAX EXEMPT	CIVIC	1,000
LAKE FOREST OPEN LANDS LAKE FORESTG OPEN LANDS 350 N WAUKEGAN RD 350 N WAUKEGAN RD LAKE FOREST, IL 60045	NONE	TAX EXEMPT	CIVIC	250
LURIE CHILDRENS HOSPITAL LURIE CHILDRENS HOSPITAL 225 E CHICAGO AVE 225 E CHICAGO AVE CHICAGO, IL 60611	NONE	TAX EXEMPT	HEALTH	1,000
Total			▶ 3a	73,750

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Name and address (home or business)				
a <i>Paid during the year</i>				
MAKE A WISH FOUNDATION MAKE A WISH FOUNDATION 3230 EL CAMINO REAL 3230 EL CAMINIO REAL IRVINE, CA 92602	NONE	TAX EXEMPT	SOCIAL	1,000
MALTZ JUPITER THEATRE DEVELOP OFF MALTZ JUPITER THEATRE DEVELOP OFF 1001 INDIANTOWN RD 1001 INDIANTOWN RD JUPITER, FL 33477	NONE	TAX EXEMPT	SOCIAL	1,100
MIDWEST PALLIATIVE & HOSPICE CTR MIDWEST PALLIATIVE & HOSPITCE CTR 2050 CLAIR CT 2050 CLAIR CT GLENVIEW, IL 60025	NONE	TAX EXEMPT	MEDICAL	500
Total ▶ 3a				73,750

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MYERS PARK UNITED METHODIST CHURCH MYERS PARK UNITED METHODIST CHURCH 1020 PROVIDENCE ROAD 1020 PROVIDENCE ROAD CHARLOTTE, NC 28207	NONE	TAX EXEMPT	SOCIAL	2,000
NORTH CHICAGO COMMUNITY PARTNERS NORTH CHICAGO COMMUNITY PARTNERS 855 SKOKIE HIGHWAY 855 SKOKIE HIGHWAY LAKE BLUFF, IL 60044	NONE	TAX EXEMPT	SOCIAL	1,000
NORTHWESTERN LAKE FOREST HOSPITAL NORTHWESTERN LAKE FOREST HOSPITAL 660 N WESTMORELAND RD 660 N WESTMORELAND RD LAKE FOREST, IL 60045	NONE	TAX EXEMPT	HEALTH	2,000
Total ▶ 3a				73,750

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Name and address (home or business)				
a <i>Paid during the year</i>				
NORTHWESTERN UNIV FEINBERG SCH MEDI NORTHWESTER UNIV FEINBERG SCH MEDI 420 EAST SUPERIOR ST 420 EAST SUPERIOR ST CHICAGO, IL 60611	NONE	TAX EXEMPT	EUDATIONAL	1,000
ORANGE COUNTY RONALD MCDONALD HSE ORANGE COUNTY RONALD MCDONALD HSE 383 S BATAVIA ST 383 S BATAVIA ST ORANGE, CA 92868	NONE	TAX EXEMPT	MEDICAL	1,000
PARK COUNTY LIBRARY PARK COUNTY LIBRARY 1500 HEART MTN RD 1500 HEART MTN RD CODY, WY 82414	NONE	SOCIAL	EDUCATIONAL	500
Total			▶ 3a	73,750

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Name and address (home or business)				
a <i>Paid during the year</i>				
RAVINIA FESTIVAL RAVINIA FESTIVAL 418 SHERIDAN RD 418 SHERIDAN RD HIGHLAND PARK, IL 60035	NONE	TAX EXEMPT	SOCIAL	4,000
SARAH LAWRENCE COLLEGE SARAH LAWRENCE COLLEGE 1 MEAD WAY 1 MEAD WAY BRONXVILLE, NY 10708	NONE	TAX EXEMPT	EDUCATIONAL	1,000
SOUTH COUNTY OUTREACH SOUTH COUNTY OUTREACH 23501 RIDGE ROUTE 23501 RIDGBE ROUTE LAGUNBA HILLS, CA 92653	NONE	TAX EXEMPT	SOCIAL	1,000
Total ▶ 3a				73,750

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Name and address (home or business)				
a <i>Paid during the year</i>				
ST CHRISTOPHER CHURCH ST CHRISTOPHER CHURCHUS 1 US 1 HOBE SOUND, FL 33455	NONE	EXEMPT	CIVIC	500
ST PATRICK'S CHURCH ST PATRICK'S CHURCH 950 W EVERETT ROAD 950 W EVERETT ROAD LAKE FOREST, IL 60045	NONE	TAX EXEMPT	CIVIC	1,000
THE CRADLE THE CRADLE2049 RIDGE RD 2049 RIDGE RD EVANSTON, IL 60201	NONE	TAX EXEMPT	SOCIAL	1,000
Total ▶ 3a				73,750

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Name and address (home or business)				
a <i>Paid during the year</i>				
THE GORTON FOUNDATION THE GORDON FOUNDATION 400 E ILLINOIS ST 400 E ILLINOIS ST LAKE FOREST, IL 60045	NONE	TAX EXEMPT	CIVIC	1,000
VALLEY SCHOOL ASSOC VALLEY SCHOOL ASSOC 3570 S FORK RD 3570 S FORK RD CODY, WY 82424	NONE	TAX EXEMPT	EDUCATIONAL	200
WEST PARK HOSPITAL WEST PARK HOSPITAL 707 SHERIDAN AVE 707 SHERIDAN AVE CODY, WY 82414	NONE	TAX EXEMPT	HEALTH	500
Total	▶ 3a			73,750

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Name and address (home or business)				
a <i>Paid during the year</i>				
WING HAVEN GARDEN & BIRD SANCTUARY WING HAVEN GARDEN & BIRD SANCTUARY 248 RIDGEWOOD 248 RIDGEWOOD CHARLOTTE, NC 28209	NONE	TAX EXEMPT	CIVIC	2,000
WOMAN'S BOARD CATHOLIC CHARITIES WOMANS BOARD CATHOLIC CHARITIES 671 LEWIS AVE 671 LEWIS AVE WAUKEGAN, IL 60085	NONE	TAX EXEMPT	SOCIAL	1,000
WOODLANDS ACAD OF THE SACRED HEART WOODLANDS ACAD OF THE SACRET HEART 763 E WESTLEIGHT RD 763 E WESTLEIGHT RD LAKE FOREST, IL 60045	NONE	TAX EXEMPT	EDUCATIONAL	1,000
Total ▶ 3a				73,750

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Name and address (home or business)				
a <i>Paid during the year</i>				
WOUNDED WARRIOR PROJECT WOUNDED WARRIOR PROJECT 230 W MONROE ST 230 W MONROE ST CHICAGO, IL 60606	NONE	TAX EXEMPT	CIVIC	4,500
WTTW SATELITE COUNCIL WTTW SATELITE COUNCIL 5400 N ST LOUIS 5400 N ST LOUIS CHICAGO, IL 60625	NONE	TAX EXEMPT	SOCIAL	200
YELLOWSTONE ASSOCIATION FDN YELLOWSTONE ASSOCIATION FDN PO BOX 117 PO BOX 117 YELLOWSTONE NATL PARK, WY 82190	NONE	TAX EXEMPT	CIVIC	500
Total ▶ 3a				73,750

TY 2018 Accounting Fees Schedule**Name:** SEVEN C FOUNDATION**EIN:** 83-0281196

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX ACCOUNTING	2,725	2,725		

TY 2018 Investments Corporate Bonds Schedule**Name:** SEVEN C FOUNDATION**EIN:** 83-0281196**Investments Corporate Bonds Schedule**

Name of Bond	End of Year Book Value	End of Year Fair Market Value
FIXED INCOME	83,296	80,089

TY 2018 Investments Corporate Stock Schedule**Name:** SEVEN C FOUNDATION**EIN:** 83-0281196

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
EQUITY INVESTMENTS	286,349	290,619

TY 2018 Investments - Other Schedule**Name:** SEVEN C FOUNDATION**EIN:** 83-0281196**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
REAL ESTATE FUNDS	AT COST	4,342	4,125
COMMODITIES	AT COST	28,402	28,180
FLINT HILLS SELECT MGRS RECEIVABLE	AT COST		

TY 2018 Other Expenses Schedule**Name:** SEVEN C FOUNDATION**EIN:** 83-0281196**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
MISCELLANEOUS	47	47		

TY 2018 Other Professional Fees Schedule**Name:** SEVEN C FOUNDATION**EIN:** 83-0281196

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK AGENCY FEES	2,097	2,097		

TY 2018 Taxes Schedule**Name:** SEVEN C FOUNDATION**EIN:** 83-0281196

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX PORTFOLIO	450	450		
US GOV'T EXCISE TAX PYMTS	883			