### **Return of Private Foundation**

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

OMB No 1545-0052

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

Bank of Nucleon	For	calend	dar year 2018 or tax year beginning $04/01/18$ ,	and ending 03/3	1/19			
Authority of the description of the foundation is not selected to seek adentically   2950 LEGENIDS DR   29	N	ame of fou	undation		A Empl	oyer identification number		
Authority of the description of the foundation is not selected to seek adentically   2950 LEGENIDS DR   29	_			۱ ۵۰	260000			
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C			•	l Ri	oonisuite			)
SCOUNTROM:  G Check all that apply   Initial return   Amended return   Ame				<del></del>				
Check type of organization   Mark Address change   Mark Address		OUT	HPORT NC 28461			C If exe	mption application is pending, o	check here
Address change	G	Check a	all that apply 🔲 Initial return 🔲 Initial retur	rn of a former public ch	arıty	D 1 F	oreign organizations, check her	e ▶ 🗍
H. Check type of organization			Final return Amended	return		2. Fo	oreign organizations meeting th	e
Section 4947(a)(1) nonexempt charitable trust			Address change Name cha	nge		85	5% test, check here and attach	computation
Fair market value of all assets at end of year (from Part I, cot (c).	H	Check t	type of organization X Section 501(c)(3) exempt private	foundation	ΛU	E If priv	ate foundation status was term	inated under
end of year (from Part II, col. (c).   Chart (specify)   Under seation 507(8)(1)(8), these have		Section	n 4947(a)(1) nonexempt charitable trust Other taxable	e private foundation	<u> </u>	sectio	on 507(b)(1)(A), check here	▶ ∐
Part	I F	air mar	ket value of all assets at J Accounting method	Cash X Acc	rual	F If the	foundation is in a 60-month ter	mination
Part I		-				under	section 507(b)(1)(B), check he	ere L
The contraction occurring to (1), and of improral motessarily equal becomes provided by the contraction occurring contraction occurring (1) (a) the foundation is not required to attach Sch B 3. Interest on aswings and temporary cash investments 4. Dividends and interest from securities 5. Gross rents 5. A contraction occurring and temporary cash investments 6. A let gain or (loss) from safe of assets not in the securities 5. A let gain or (loss) from safe of assets not in the securities 5. A let gain or (loss) from safe of assets not in the securities 5. A let gain or (loss) from safe of assets not in the securities 5. A let gain or (loss) from safe of assets not in the securities 5. A let gain or (loss) from safe of assets not in the securities 5. A let short-term capital gain 6. A let gain or (loss) from safe of assets not in the securities 6. A let gain or (loss) from safe of assets not in the securities 6. A let gain or (loss) from safe of assets not in the securities 6. A let gain or (loss) from safe of assets not in the securities 6. A let gain or (loss) from safe of assets not in the securities 6. A let gain or (loss) from safe of assets not in the securities 6. A let gain or (loss) from safe of assets not in the securities 6. A let gain or (loss) from safe of assets not in the securities 6. A let gain or (loss) from safe of assets not in the securities 6. A let gain or (loss) from safe of assets not in the securities 6. A let gain or (loss) from safe of assets not in the securities 6. A let gain or (loss) from safe of assets not in the securities 6. A let gain or let		<u>ne 16) l</u>	▶ \$ 1,876,506 (Part I, column (d) must b	pe on cash basis)				
The amounts in column (a) (see mininciples)  1 Contributions, gifts, grants, et . received (attach schedule)  2 Check	L <sub>P</sub>	art I			(b) Net inv	estment	(c) Adjusted net	
1 Contributions, girts, gaints, etc. received (attach schedule) 2 Check ▶								purposes
2 Check	_	T1	Contributions, gifts, grants, etc., received (attach schedule)	154,100				(CCC) CCC (CCC)
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		1	· -		<del></del>			<u>!</u>
	For							Form 990-PF /2019

Fo	om 990	PF (2018) DOROTHY & KENNETH HEISLER FO	UNDATI	ON 36-367727	<u>'5</u>	Page 2
Γ	Part I	Balance Sheets Attached schedules and amounts in the description columns in	mn	Beginning of year	End of	year
<u>_</u>	rait, i	should be for end-of-year amounts only (See instruction	s)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing		1,764,739	1,876,506	1,876,506
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶			<u> </u>	
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
- 1		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see				
		instructions)				
	7	Other notes and loans receivable (att. schedule)				
ĺ		Less allowance for doubtful accounts ▶	0			
Ø	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments – U.S. and state government obligations (attach schedule)				
	b	Investments – corporate stock (attach schedule)				
1	С	Investments – corporate bonds (attach schedule)				
	11	Investments – land, buildings, and equipment, basis				
		Less accumulated depreciation (attach sch.)				
	12	Investments – mortgage loans				
l	13	Investments – other (attach schedule)				
	14	Land, buildings, and equipment basis				
		Less accumulated depreciation (attach sch.)				
	15	Other assets (describe ▶	)			
	16	Total assets (to be completed by all filers – see the	·			
		instructions Also, see page 1, item I)		1,764,739	1,876,506	1,876,506
Ţ	17	Accounts payable and accrued expenses				
- 1	18	Grants payable				ł
es	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ap	21	Mortgages and other notes payable (attach schedule)				
ᅦ	22	Other liabilities (describe ▶	)			ļ
$\perp$	23	Total liabilities (add lines 17 through 22)		0	0	
		Foundations that follow SFAS 117, check here	▶ 🔲			
S		and complete lines 24 through 26, and lines 30 and 31.				
2	24	Unrestricted				
ala	25	Temporanly restricted				ł
Net Assets or Fund Balances	26	Permanently restricted				İ
Š		Foundations that do not follow SFAS 117, check here	<b>▶</b> 🗓			
		and complete lines 27 through 31.				Ì
S	27	Capital stock, trust principal, or current funds				
Set	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
Aŝ	29 30 31	Retained earnings, accumulated income, endowment, or other funds		1,764,739	1,876,506	
ë	30	Total net assets or fund balances (see instructions)		1,764,739	1,876,506	j
₹	3,1	Total liabilities and net assets/fund balances (see				i
灴	<u> </u>	instructions)		1,764,739	1,876,506	
	Part II	Analysis of Changes in Net Assets or Fund Balar	nces		····	
1	Total	net assets or fund balances at beginning of year – Part II, column (a), line	e 30 (must a	gree with		
		f-year figure reported on prior year's return)			1 1	1,764,739
		amount from Part I, line 27a			2	111,767
		increases not included in line 2 (itemize) ▶			3	<del></del>
		nes 1, 2, and 3			4	1,876,506
		ases 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, o	column (b), I	<u>ine 30</u>	6	1,876,506
						Form 990-PF (2018)

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

47,500

Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

Form	990-PF (2018) DOROTHY & KENNETH HEISLER FOUNDATION	<u>36-36772</u>	<u>75                                    </u>				Р	age <b>4</b>
Pa	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	r 4948 – see ins	tructions)					
1a	Exempt operating foundations described in section 4940(d)(2), check here	r "N/A" on line 1						1
	Date of ruling or determination letter (attach copy of letter if necessa	ıry—see instruc	tions)		l			- 1
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	•	<i>'</i>	1				150
-	here and enter 1% of Part I, line 27b				1			<u> </u>
_	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of		1	ĺ	ĺ			j
С			_					
_	Part I, line 12, col (b)			١ .				^
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others	s, enter -0-)		2	-			0
3	Add lines 1 and 2			_ 3				150
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others	s, enter -0-)		4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			5	<u> </u>			150
6	Credits/Payments .							1
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a							
b	Exempt foreign organizations – tax withheld at source 6b							
С	Tax paid with application for extension of time to file (Form 8868)  6c			]				l
d	Backup withholding erroneously withheld 6d			1	i			ľ
7	Total credits and payments Add lines 6a through 6d	·		7				
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attach	had		8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			9	<del>                                     </del>			150
9				10				100
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	n.6			-			
11_	Enter the amount of line 10 to be Credited to 2019 estimated tax	Reft	ınded 🕨	11				
	irt-VII-A-  Statements Regarding Activities					T		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation	on or did it				<u> </u>	Yes	No
	participate or intervene in any political campaign?					1a	<u> </u>	_X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?	See the						
	instructions for the definition					1b		<u> </u>
	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							
С	c Did the foundation file Form 1120-POL for this year?					1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	r						
	(1) On the foundation > \$ (2) On foundation managers >	\$						]
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure							
	on foundation managers > \$	·						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS3	,				2		X
_	If "Yes," attach a detailed description of the activities							1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instr	riment articles c	of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the					3		$\overline{\mathbf{x}}$
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	changes				4a	$\vdash$	<u>x</u>
4a					N/A	4b	-	
b E	If "Yes," has it filed a tax return on Form 990-T for this year?				-1/ 43		$\vdash \vdash \vdash$	x
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?					5	<del> </del>	<u> </u>
_	If "Yes," attach the statement required by General Instruction T							ļ
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either							
	By language in the governing instrument, or							
	By state legislation that effectively amends the governing instrument so that no mandatory directions are stated in the state of the state of the stated in the state	ections that				<b> </b>	<del></del> -	
	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		and Part X\	/		7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.	•				1 1		- 1
	IL							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attor	ney General						
	(or designate) of each state as required by General Instruction G? If "No," attach explanation				N/A	8b		
9	Is the foundation claiming status as a private operating foundation within the meaning of section	n 4942(j)(3) or						
	4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See instructions for Pa					[		<u> </u>
	complete Part XIV	,				9		$\mathbf{x}$
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedul	e listina their						
- •	names and addresses		STMT	3		10	x	
	L/31 INT 4 FTP	4 TOT			.58	om 99		(2018)
-	-/	4 101		4	.55	Jill JE	, u - r r	(2018)

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

_	n 990-PF (2018) DOROTHY & KENNETH HEISLE				Δ.		Р	age (
	art VII-B   Statements Regarding Activities for W	nich Form 4/20 Way Be R	equirea (con	<u>iinuec</u>	1)			т
5a					₹₽	<u> </u>	Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislar	, ,,,		Yes	X No		·	ł
	(2) Influence the outcome of any specific public election (see secti	on 4955), or to carry on,			₹₽			
	directly or indirectly, any voter registration drive?	_	H	Yes	X No	ļ ļ		
	(3) Provide a grant to an individual for travel, study, or other simila			Yes	X No	•		
	(4) Provide a grant to an organization other than a charitable, etc.,	organization described in						ł
	section 4945(d)(4)(A)? See instructions			Yes	X No			
	(5) Provide for any purpose other than religious, charitable, scienti	fic, literary, or educational						ļ
	purposes, or for the prevention of cruelty to children or animals	32		Yes	X No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail t	to qualify under the exceptions desi	cribed in					
	Regulations section 53 4945 or in a current notice regarding disaste	er assistance? See instructions			N/A	5b		
	Organizations relying on a current notice regarding disaster assista	ince, check here			▶ [_]			
C	If the answer is "Yes" to question 5a(4), does the foundation claim	exemption from the tax						
	because it maintained expenditure responsibility for the grant?		N/A 🗌	Yes	☐ No			ľ
	If "Yes," attach the statement required by Regulations section 53 49	945–5(d)				`		
6a	Did the foundation, during the year, receive any funds, directly or in	directly, to pay premiums						
	on a personal benefit contract?			Yes	X No			
b	Did the foundation, during the year, pay premiums, directly or indire	ectly, on a personal benefit contract	ار ا		_	6b		X
	If "Yes" to 6b, file Form 8870							
7a	At any time during the tax year, was the foundation a party to a prol	hibited tax shelter transaction?		Yes	X No			
b	If "Yes," did the foundation receive any proceeds or have any net in	come attributable to the transaction	n?		_N/A	7b		
8	is the foundation subject to the section 4960 tax on payment(s) of n	nore than \$1,000,000 in			_			
	remuneration or excess parachute payment(s) during the year?			Yes	X No			
LPa	art VIII Information About Officers, Directors, Ti	rustees, Foundation Mana	gers, Highly	Paid	Employe	es,		
	and Contractors							
1 1	List all officers, directors, trustees, and foundation managers a	nd their compensation. See inst	ructions.					
		(b) Title, and average	(c) Compensation		Contributions to			
	(a) Name and address	hours per week	(If not paid,		nployee benefit ns and deferred		pense ad er allowa	
		devoted to position	enter -0-)		ompensation	Out	on anoma	iices
TE	ERRIE HEISLER ALLISON SOUTHPORT	TRUSTEE/MNGR		1				
29	950 LEGENDS DR. NC 28461	0.00		0	0	l		_ (
				1.				
		<b>i</b>				1		
		ĺ						
2	Compensation of five highest-paid employees (other than tho	se included on line 1 – see instr	uctions). If none	, enter	•			
	"NONE."							
		(b) Title, and average			Contributions to			_
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation		ployee benefit and deferred		pense ad er allowa	
		devoted to position	1		ompensation	Oute	allowa	ices
NO	ONE			1	-			
		İ						
				1				
	•	}	1			l		
				1			-	
			]			1		
		···		+-		$\vdash$	<u> </u>	
		}	1	1				
		<del></del>		+-		<del>                                     </del>		-
		1				1		
Tota	I number of other employees paid over \$50,000		<u> </u>	т		$\vdash$		
	r named of other employees paid over 400,000					1		U

Form 990-PF (2018) DOROTHY & KENNETH HEISLER F		
Partiville Information About Officers, Directors, Truster	es, Foundation Managers, Highly Paid E	Employees,
and Contractors (continued)  3 Five highest-paid independent contractors for professional services	Saginstructions If none enter "NONE"	<del></del>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(6) 1360 01 001100	(c) compensation
Total number of others receiving over \$50,000 for professional services		▶ 0
RartiX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistica organizations and other beneficiaries served, conferences convened, research papers produced, etc.	al information such as the number of	Expenses
1 N/A		
2		
3		
4		-
RartilX-B Summary of Program-Related Investments (	(see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on line		Amount
1 N/A		
2		
All other program-related investments. See instructions		
All other program-elated investments. See instructions		
Total. Add lines 1 through 3	•	· I

Form 990-PF (2018)

а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	47,500
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	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	47,500
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	47,500
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	dation	

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

Form **990-P**F (2018)

P	art XIII   Undistributed Income (see instruc	tions)		,		<del>,</del>
	,		(a)	(b)	(c)	(d)
1	Distributable amount for 2018 from Part XI,		Corpus	Years pnor to 2017	2017	2018
	line 7					89,516
2	Undistributed income, if any, as of the end of 2018		1			
а	Enter amount for 2017 only					
b	Total for prior years 20 , 20 , 20		<u></u>			
3	Excess distributions carryover, if any, to 2018					
а	From 2013					
b	From 2014 38	,332			}	}
С	From 201527	,134				
d	From 2016 <b>16</b>	, 620				
е	From 2017 14	,475			1	
f	Total of lines 3a through e		96,561			
4	Qualifying distributions for 2018 from Part XII,					-
	line 4 ▶ \$47,500					)
а	Applied to 2017, but not more than line 2a					
	Applied to undistributed income of prior years					1
	(Election required – see instructions)				<u> </u>	<u> </u>
С	Treated as distributions out of corpus (Election				* 3 \$ 4	
	required – see instructions)					
d	Applied to 2018 distributable amount				Ţ	47,500
е	Remaining amount distributed out of corpus					1
5	Excess distributions carryover applied to 2018		42,016			42,016
	(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:				,	
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5		54,545		<u> </u>	[ {
b	Prior years' undistributed income Subtract			<del></del>		1
	line 4b from line 2b					
С	Enter the amount of prior years' undistributed		[	<del></del> -		
	income for which a notice of deficiency has					
	been issued, or on which the section 4942(a)					
	tax has been previously assessed				<u> </u>	
d	Subtract line 6c from line 6b Taxable					Ī
	amount – see instructions					
е	Undistributed income for 2017 Subtract line				ĺ	
	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)				ļ	
9	Excess distributions carryover to 2019.				1	1
	Subtract lines 7 and 8 from line 6a		54,545		ļ	
0	Analysis of line 9				1	
а	Excess from 2014					
b		,450				
С		,620				
d		,475				į
е	Excess from 2018	1			I i	ļ

RPart XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient or substantial contributor Name and address (home or business) a Paid during the year STRASBURG COMMUNITY PARK FOUNDATION PUBLIC ORG. 151 PRECISION AVE. PROVIDE RECREATIONAL FACILITIES 10,000 STRASBURG PA 17579 BRUNSWICK SHERIFF'S CHARITABLE FOUN PUBLIC ORG. P.O. BOX 10820 SOUTHPORT NC 28461 PROVIDE ASSISTANCE TO THOSE IN NEED 5,000 STRASBURG JAYCEE PARK PUBLIC ORG. P.O. BOX 45 PROVIDE RECREATIONAL FACILITIES STRASBURG PA 17579 5,000 STRASBURG-HEISLER LIBRARY PUBLIC ORG. 143 PRECISION AVE. EDUCATIONAL RESOURSES & LIBRARY SERV 6,000 STRASBURG PA 17579 NATIONAL ALLIANCE ON MENTAL ILLNES 1536 W. CHICAGO AVE. #1 PUBLIC ORG. TO PROVIDE AID TO THE MENTALLY ILL CHICAGO IL 60642 1,500 SACRED HEART CATHOLIC CHURCH PUBLIC ORG. 5269 DOSHER CUT OFF SE ADVANCING RELIGION 5,000 SOUTHPORT NC 28461 BRUNSWICK AQUATIC CLUB PUBLIC ORG. 640 CREEK WAY CIRCLE SE **BOLIVIA NC 28422** SUPPORTING ATHLETES 5,000 STRASBURG FIRE COMPANY 203 FRANKLIN ST PUBLIC ORG. FIRE PROTECTION 5,000 STRASBURG PA 17579 BOYS & GIRL CLUB OF LANCASTER 116 S. WATER ST. PUBLIC ORG SOCIAL DEVELOPMENT OF CHILDREN 5,000 LANCASTER PA 17603 47,500 ▶ 3a Total Approved for future payment N/A ▶ 3b **Total** 

Part XVI-	Analysis of Income-Producing Acti	vities				
	ounts unless otherwise indicated		ed business income	Exclude	d by section 512, 513, or 514	
,		(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	(e) Related or exempt function income
1 Program se	ervice revenue			code	]	(See instructions)
_						
<del></del> -						
f						
g Feesa	nd contracts from government agencies					
2 Membersh	p dues and assessments					
3 Interest on	savings and temporary cash investments			14	7,523	
4 Dividends	and interest from securities					
5 Net rental i	ncome or (loss) from real estate					
a Debt-fi	nanced property					
<b>b</b> Not de	bt-financed property					
6 Net rental i	ncome or (loss) from personal property					
7 Other inves	stment income					
8 Gain or (los	ss) from sales of assets other than inventory					
9 Net income	or (loss) from special events					
10 Gross profi	t or (loss) from sales of inventory					
11 Other rever	nue a					
b						
				ļ		
d						
е						
	dd celumna (b) (d) and (a)	l I	C	) [	7,523	0
12 Subtotal A	dd columns (b), (d), and (e)				. 7555	
13 Total. Add	line 12, columns (b), (d), and (e)	L			13	
13 Total. Add (See workshee	line 12, columns (b), (d), and (e) tin line 13 instructions to venfy calculations )				13	
13 Total. Add (See workshee Part XVI-E	line 12, columns (b), (d), and (e) in line 13 instructions to venfy calculations )  Relationship of Activities to the Activities		ent of Exempt Pu	ırposes	13	
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) tin line 13 instructions to venfy calculations )  Relationship of Activities to the Activities to the Activities to the Activities to the Activities to the Activity for which income is	reported in coli	ent of Exempt Pu	irposes	13s	7,523
13 Total. Add (See workshee: Part XVI-E Line No.	line 12, columns (b), (d), and (e) in line 13 instructions to venfy calculations )  Relationship of Activities to the Activities	reported in coli	ent of Exempt Pu	irposes	13s	7,523
13 Total. Add (See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) tin line 13 instructions to venfy calculations )  Relationship of Activities to the Activities to the Activities to the Activities to the Activities to the Activity for which income is	reported in coli	ent of Exempt Pu	irposes	13s	7,523
13 Total. Add See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) tin line 13 instructions to venfy calculations )  Relationship of Activities to the Activities to the Activities to the Activities to the Activities to the Activity for which income is	reported in coli	ent of Exempt Pu	irposes	13s	7,523
13 Total. Add (See workshee: Part XVI-E Line No.	line 12, columns (b), (d), and (e) tin line 13 instructions to venfy calculations )  Relationship of Activities to the Activities to the Activities to the Activities to the Activities to the Activity for which income is	reported in coli	ent of Exempt Pu	irposes	13s	7,523
13 Total. Add (See workshee: Part XVI-E Line No.	line 12, columns (b), (d), and (e) tin line 13 instructions to venfy calculations )  Relationship of Activities to the Activities to the Activities to the Activities to the Activities to the Activity for which income is	reported in coli	ent of Exempt Pu	irposes	13s	7,523
13 Total. Add See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) tin line 13 instructions to venfy calculations )  Relationship of Activities to the Activities to the Activities to the Activities to the Activities to the Activity for which income is	reported in coli	ent of Exempt Pu	irposes	13s	7,523
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13 Total. Add See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) tin line 13 instructions to venfy calculations )  Relationship of Activities to the Activities to the Activities to the Activities to the Activities to the Activity for which income is	reported in coli	ent of Exempt Pu	irposes	13s	7,523
13 Total. Add See workshee Part XVI-E Line No.	line 12, columns (b), (d), and (e) tin line 13 instructions to venfy calculations )  Relationship of Activities to the Activities to the Activities to the Activities to the Activities to the Activity for which income is	reported in coli	ent of Exempt Pu	irposes	13s	7,523
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13 Total. Add (See workshee: Part XVI-E Line No.	line 12, columns (b), (d), and (e) tin line 13 instructions to venfy calculations )  Relationship of Activities to the Activities to the Activities to the Activities to the Activities to the Activity for which income is	reported in coli	ent of Exempt Pu	irposes	13s	7,523
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13 Total. Add (See workshee: Part XVI-E Line No.	line 12, columns (b), (d), and (e) tin line 13 instructions to venfy calculations )  Relationship of Activities to the Activities to the Activities to the Activities to the Activities to the Activity for which income is	reported in coli	ent of Exempt Pu	irposes	13s	7,523
13 Total. Add (See workshee: Part XVI-E Line No.	line 12, columns (b), (d), and (e) tin line 13 instructions to venfy calculations )  Relationship of Activities to the Activities to the Activities to the Activities to the Activities to the Activity for which income is	reported in coli	ent of Exempt Pu	irposes	13s	7,523
13 Total. Add (See workshee: Part XVI-E Line No.	line 12, columns (b), (d), and (e) tin line 13 instructions to venfy calculations )  Relationship of Activities to the Activities to the Activities to the Activities to the Activities to the Activity for which income is	reported in coli	ent of Exempt Pu	irposes	13s	7,523
13 Total. Add (See workshee: Part XVI-E Line No.	line 12, columns (b), (d), and (e) tin line 13 instructions to venfy calculations )  Relationship of Activities to the Activities to the Activities to the Activities to the Activities to the Activity for which income is	reported in coli	ent of Exempt Pu	irposes	13s	7,523
13 Total. Add (See workshee: Part XVI-E Line No.	line 12, columns (b), (d), and (e) tin line 13 instructions to venfy calculations )  Relationship of Activities to the Activities to the Activities to the Activities to the Activities to the Activity for which income is	reported in coli	ent of Exempt Pu	irposes	13s	7,523
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∙Pa	ırt•XVIII	Information Regardance	arding Tra	ansfers To and	d Transaction	ns and Relations	nips Witl	n Noncharitable	Exem	pt	
1	Did the org	anization directly or indi	rectly engage	in any of the follow	wing with any oth	er organization describe	ed		Y	es	No
		01(c) (other than section		=	-						
_	•		ation to a non	ohantahla ayamat	organization of			ľ	[		
a		om the reporting founda	alion to a non	ichantable exempt	Organization of			;	10(1)	<b></b>	x
	(1) Cash							Г	1a(1)	+	$\frac{\mathbf{\hat{x}}}{\mathbf{x}}$
	(2) Other a							i i	1a(2)	-+	
D	Other trans							}-		-	<del></del>
	• •	of assets to a noncharita	· ·	-				<u> </u>	1b(1)	-4	X
	` '	ses of assets from a no			n			<u> </u>	1b(2)	-4	X
	(3) Rental	of facilities, equipment,	or other asse	ets					lb(3)		X
	(4) Reimbi	rsement arrangements						[1	1b(4)	_	X
	(5) Loans	or loan guarantees						[1	1b(5)		X
	(6) Perform	nance of services or me	mbership or	fundraising solicita	ntions			1	lb(6)	_↓	X
С	Sharing of f	acılıtıes, equipment, ma	ılıng lısts, oth	er assets, or paid	employees			Ĺ	1c		X
d	If the answe	er to any of the above is	"Yes," comp	lete the following s	schedule Column	(b) should always show	w the fair m	narket			
	value of the	goods, other assets, or	r services giv	en by the reporting	foundation If th	e foundation received le	ess than fai	r market			
	value in any	transaction or sharing	arrangement	, show in column (	d) the value of th	e goods, other assets,	or services	received			
	(a) Line no	(b) Amount involved	(c) Nam	e of nonchantable exem	pt organization	(d) Description	of transfers, tra	ansactions, and shanng arran	igements		
N/2	A										
							_				-
	_										
		<u> </u>									
		<u> </u>									
			-		-			·····			
						<del></del>					
	described in If "Yes," cor	ation directly or indirect in section 501(c) (other the inplete the following schi (a) Name of organization	han section 5		tion 527?	empt organizations	(c) Descrip	tion of relationship	Yes	X	No
	Ī/A			(5) 1) po oi c			,5, 2000ip				
	<u>-,</u>		-								
	_										
	_										—
	_				<u> </u>						
	Under pe	naltres of perjury, I declare tha	it I have examine	Led this return, including	accompanying sched	lules and statements, and to the	he best of my	knowledge and belief, it is tr	ue,		
Sign Here		nd complete Declaration of pi	ceparer (other the	an taxpayer) is based o	on all information of when all information of which	nich preparer has any knowled $-23-19$		May the IRS discuss with the preparer sh See instructions		?	No
	Sign	ature of officer or trustee		<del>- • 1</del>	Date		Title				
Paid	ROBE	pe preparer's name	A, MST		Preparer's signatur	Cent a	PA M:	Date 12-19		eck [ f-empl	ıf
Prepa	i Fırm's r			SSOCIATES					3396		
Use C	Firm's a	address > 10 PI	NCKNEY	COLONY F	D. BLDG	300		Firm's EIN ► 36-4	12033	360	)
		BLUFT	ON, SC	29909-4	1148				-624-	-93	350
								For	m 990-	PF	(2018)

Schedule B

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

#### **Schedule of Contributors**

0040

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

Go to www.irs.gov/Form990 for the latest information.

2018

OMB No 1545-0047

Name of the organization

Employer identification number

DOROTHY & KE	NNETH HEISLER FOUNDATION	36-3677275						
Organization type (check one)								
Filers of: Section:								
Form 990 or 990-EZ	501(c)( ) (enter number) organization							
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private	4947(a)(1) nonexempt charitable trust <b>not</b> 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 private foun	ndation						
	501(c)(3) taxable private foundation							
	s covered by the <b>General Rule</b> or a <b>Special Rule</b> . (7), (8), or (10) organization can check boxes for both the General Rule a	and a Special Rule See						
General Rule								
	in filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution property) from any one contributor. Complete Parts I and II. See instructions							
Special Rules								
regulations under so 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 90) did that received from any one contributor, during the year, total contribution of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1	90 or 990-EZ), Part II, line ons of the greater of <b>(1)</b>						
contributor, during t	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I (entering) "N/A" in column (b) instead of the contributor name and address), II, and III							
contributor, during t contributions totaled during the year for a General Rule appli	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contribution, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.							
990-EZ, or 990-PF), but it m	nat isn't covered by the General Rule and/or the Special Rules doesn't file nust answer "No" on Part IV, line 2, of its Form 990, or check the box on I to certify that it doesn't meet the filing requirements of Schedule B (Form	line H of its Form 990-EZ or on its						

Name of organization

DOROTHY & KENNETH HEISLER FOUNDATION

Employer identification number

36-3677275

Part Is: Contributors (see instructions) Use duplicate copies of Part I if additional space is needed.

144.61			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KENNETH M. HEISLER CHARITABLE LEAD ANNUITY TRUST DATED 1/27/16 2950 LEGENDS DR.  SOUTHPORT NC 28461	\$ 154,100	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	-	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli 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)

age 3

Name of organization

DOROTHY & KENNETH HEISLER FOUNDATION

Employer identification number

36-3677275

#Partill	Noncash Property (see instructions) Use duplica	ite copies of Part II if additional spa	ace is needed (N/A)
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Name of organization

### DOROTHY & KENNETH HEISLER FOUNDATION

**Employer identification number** 

36-3677275 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or

	(10) that total more than \$1,000 for the year the following line entry. For organizations co-contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional sections.	mpleting Part III, enter the to (Enter this information onco	otal of exclusively	religious, charitable, etc ,
(a) No from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
Part I	Transferee's name, address, and	(e) Transf	_	ationship of transferor to transferee
	Transièree's frame, address, and		, Nei	adonship of dansieror to dansieree
(a) No from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
,				
-		(e) Transf	er of gift	
	Transferee's name, address, and a			onship 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) Transf	er of gift	
	Transferee's name, address, and a	ZIP + 4	Rela	ationship 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) Transf	er of gift	
-	Transferee's name, address, and 2	ZIP + 4	Rela	ationship of transferor to transferee
	,			

HEISLERFOUN DOROTHY & KENNETH HEISLER FOUNDATION 36-3677275 36-3677275 FYE: 3/31/2019

Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees

Charitable Purpose	\$	\$		Charitable Purpose	<i>&amp;</i>	s			
Adjusted Net	\$	0 \$	xpenses	Adjusted Net	<i>ۍ</i>	\$	ial Contributors	City State Zin	1
Net Investment	\$	\$	art I, Line 23 - Other E	Net Investment	v.	\$	0-PF, Part VII-A, Line 10 - Substantial Contributors		SOUTHPORT NC 28461
Total	\$ 2,250	\$ 2,250	Statement 2 - Form 990-PF, Part I, Line 23 - Other Expenses	Total	\$ 106	\$ 106	Form 990-PF, Part VII	- Address	
Description	INDIRECT ACCOUNTING FEES	TOTAL	Statem	Description	EXPENSES TAXES	TOTAL	Statement 3 - Form 99	Name	KENNETH M. HEISLER CHARITABLE LEAD 2950 LEGENDS

<del>1.</del>3

\*HEISLERFOUN DOROTHY & KENNETH HEISLER FOUNDATION 36-3677275 Federal Statements

FYE: 3/31/2019

## **Taxable Interest on Investments**

Description	 Amount	Unrelated Business	Exclusion Code	Postal Code	US Obs (\$ or %)
INTEREST INCOME WELLS FARGO INTEREST INCOME WELLS FARGO	\$ 6,508 1,015		14 14		
TOTAL	\$ 7,523				

_	990-PF	Underdistribution and Ex	2018			
Form	, <b>330-</b> FF	For calendar year 2018, or tax year beginning	04/01/18	, ending	03/31/19	2010
Name	•					
DOR	OTHY & K	ENNETH HEISLER FOUNDATION			36-367	entification Number 7275

# Undistributed Income Carryovers Form 990-PF, Part XIII

	Pri	or Undistributed In	come		Next Year Carryover		
Tax Year	Nontaxable or Previously Taxed	Taxable in 2018	Total per Year	Current Year Decreases	Nontaxable or Previously Taxed	Taxable in 2019	
Years рлог							
20 14				,			
20 15							
20 16							
2017							
2018			89,516	89,516			
tal Carryove	r to Next Year						

<sup>\*</sup> Carryover amount includes 4942(a) amounts

# Excess Distribution Carryovers Form 990-PF, Part XIII

		1 01111 930-1 1 <sub>3</sub> 1 att XIII	
		Current Year	Next Year
Preceding Tax Year Excess Distributions		Decreases	Carryover
2013			
2014	38,332	38,332	
2015	27,134	3,684	23,450
2016	16,620	-	16,620
2017	14,475		14,475
Current Ye	ear Excess Distribution Generated (20	0	
Total Carn	yover to Next Year		54,545

Form 990-PF

Total failure to pay penalty

### Interest and Penalty Worksheets ,

04/01/18 , and ending

03/31/19



Name

Taxpayer Identification Number

DOROTHY	æ	KENNETH	HEISLER	FOUNDATION
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For calendar year 2018, or tax year beginning

36-3677275

DOROTHI & KENNETH HEISLER	OUNDATION			L30-30	0//2/3		
Interest on Late Payments and Failure to File Worksheet							
			No. of				
Description	Amount	Balance	Days	Rate	Late Interest		
TAX ON RETURN 8/15	150	150					
INTEREST 8/16-9/30		150	46	5.00	1		
INTEREST 10/1-12/31		151	92	5.00	1		
INTEREST 1/1-1/31		153	31	5.00	1		
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Total interest on late payments4							
Total failure to file penalty							

#### Failure to Pay Penalty Worksheet

TAX	FOR	Descrip PENALTY	otion 8/15-1/	31	Amount	Balance 15	No. of Months 0 6	FTP Penalty
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