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OMB No 1545-0052

2018

# **Return of Private Foundation**

Form 990-PF

Department of the Treasury

Internal Revenue Service

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2018, or tax year beginning 07-01-20	)18 , aı	nd ending 06-30-	2019	
		indation UNDATION		A Employer id	entification numbe	er
710	71111101			20-8060816		
		d street (or P O box number if mail is not delivered to street address) COTTSDALE RD NO 4800	Room/suite	<b>B</b> Telephone nu	mber (see instructio	ons)
7.	700 N 3	ACCUTS DALLE NO 1000		(480) 922-5700	)	
		n, state or province, country, and ZIP or foreign postal code .E, AZ 85251	1	C If exemption	application is pendir	ng, check here
						▶ ⊔
G Ch	ieck al	I that apply □ Initial return □ Initial return of a □ Final return □ Amended return	former public charity		ganızatıons, check h	▶ ⊔
		✓ Address change ☐ Name change			ganizations meeting k here and attach co	
<b>u</b> c	ock tv	rpe of organization ✓ Section 501(c)(3) exempt private	foundation		undation status was	
_			e private foundation	under sectio	n 507(b)(1)(A), che	ck here
			☑ Cash ☐ Accru	F If the founda	ation is in a 60-mont	th termination $\qquad \Box$
of '	year (f	from Part II, col (c),  ▶\$ 3,827,090  CPart I, column (d) must			n 507(b)(1)(B), che	
Da	rt I	Analysis of Revenue and Expenses (The total	, 	<u> </u>		(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b) Net investment	(c) Adjusted net	for charitable purposes
		equal the amounts in column (a) (see instructions) )	books	income	income	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	2,245,982			
	2	Check ► ☐ If the foundation is <b>not</b> required to attach	2,243,362			
	2	Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	47,796	47,796		
	5a	Gross rents				
	Ь	Net rental income or (loss)	140 724			
JE G	6a	Net gain or (loss) from sale of assets not on line 10	140,724	•		
Reverkie	ь	Gross sales price for all assets on line 6a 1,327,655				
Re	7	Capital gain net income (from Part IV, line 2)		140,724		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	Ь	Less Cost of goods sold				
	C	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	2 424 503	199 530		
	12	Total. Add lines 1 through 11	2,434,502			
	13 14	Other employee salaries and wages		0		
s	15	Pension plans, employee benefits				
156	16a	Legal fees (attach schedule)				
Expenses	ь	Accounting fees (attach schedule)				
	С	Other professional fees (attach schedule)	1,243	1,243		C
Operating and Administrative	17	Interest				
tra	18	Taxes (attach schedule) (see instructions)	<b>9</b> 400	0		C
<u>=</u>	19	Depreciation (attach schedule) and depletion				
Ē	20	Occupancy				
ΨĐ	21	Travel, conferences, and meetings				
ä	22	Printing and publications				
Бü	23	Other expenses (attach schedule)				
rat	24	Total operating and administrative expenses.				
<u>5</u>		Add lines 13 through 23	1,643	·		0
J	25	Contributions, gifts, grants paid	122,250	)		122,250
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	123,893	1,243		122,250
	27	Subtract line 26 from line 12	,	,		
	а	Excess of revenue over expenses and	2,310,609			
	ь	disbursements Net investment income (if negative, enter -0-)	2,310,009	187,277		
	С	Adjusted net income (If negative, enter -0-)		10.,277		
For	Daner	work Reduction Act Notice, see instructions.	l	Cat No. 11289)	/ 50	rm 000-DE (2018)

903,539

488,538

47,907

1,450,955

1,450,955

1,450,955

1,450,955

2,559,758

1,152,317

123,693

3,827,090

3,827,090

3,827,090 3,827,090

2

3

4

5

6

1,450,955

2,310,609

3,827,090

3,827,090

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65,526

2,559,758

1,152,317

123,693

3,827,090

Assets

7

8

9

10a

b

C

11

12

13

14

15

16

17

18

19

20 21

22

23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ō

Assets 27

Net 30

2

3

Other notes and loans receivable (attach schedule)

Prepaid expenses and deferred charges . . . . . .

Investments—land, buildings, and equipment basis ▶ \_

Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

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

Analysis of Changes in Net Assets or Fund Balances

Investments—U S and state government obligations (attach schedule)

Investments—corporate stock (attach schedule) . . . . . . . . .

Investments—corporate bonds (attach schedule) . . . . . . . . .

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . .

Loans from officers, directors, trustees, and other disqualified persons

Less allowance for doubtful accounts

Land, buildings, and equipment basis ▶

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe -\_

Unrestricted . . . . . .

Permanently restricted . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Temporarily restricted

Grants payable

	the kınd(s) of property sold (e g , ehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a GOLDMAN SACHS - PUBL	CLY TRADED SECURITIES				2019-06-30
<b>b</b> GOLDMAN SACHS - PUBL	CLY TRADED SECURITIES				2019-06-30
c GOLDMAN SACHS - REGU	LATED FUTURES				
d CAPITAL GAINS DIVIDEN	DS .		Р		
e					
<b>(e)</b> Gross sales price	(f) Depreciation allowed (or allowable)	Cost or d	(g) other basis ense of sale	Gain d	h) or (loss) i) minus (g)
a 1,070	` '	<u> </u>	938,00		132,278
<b>b</b> 248	3,672		244,76	54	3,908
<b>c</b> 7	7,020 4,1			53	2,857
<b>d</b> 1	1,681				1,681
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation of	on 12/31/69	,	(I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	( <b>k)</b> of col (ı) (¡), ıf any	Gains (Col ( col (k), but not	h) gain minus less than -0-) <b>or</b> om col (h))
a			(377 ** ****)		132,278
b					3,908
С					2,857
d					1,681
e					
If gain, also enter in Par in Part I, line 8	ain or (loss) as defined in sections in the sections in the section (c) (see instruction of the section 4940(e) for Research	ons) If (loss), enter -0	}	2 3	140,724
	ivate foundations subject to the sec				
if section 4940(d)(2) applies, lea Was the foundation liable for the	•	ble amount of any year		, 	es 🗹 No
1 Enter the appropriate am	ount in each column for each year,	see instructions before	making any entr	ies	
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitabl	e-use assets	<b>(d)</b> Distribution rat (col (b) divided by c	
2017	76,250		1,365,170		0 055854
2016	41,500		1,084,983		0 038249
2015	27,834		923,580		0 030137
2014	13,663		807,784		0 016914
2013	97,326		578,443		0 168255
2 Total of line 1, column (d	,		2		0 309409
number of years the found	for the 5-year base period—divide b dation has been in existence if less charitable-use assets for 2018 fron	than 5 years	0, or by the 3		0 061882 2,419,327
		•	5		149,713
	nt income (1% of Part I, line 27b)		<u>6</u>		1,873
			<del>  7</del>		151,586
	ns from Part XII, line 4 ,			<b>-</b>	122,250
	ater than line 7, check the box in Pa			sing a 1% tax rate Se	

	990-F1 (2010)									age
Pai			Activities for Which	Form 4720 May Be	Required (continu	ued)				
5a	During the year did the foundation	•	•						Yes	No
	(1) Carry on propaganda, or otherw				☐ Ye	s 🗸	No			
	(2) Influence the outcome of any s			• • • • • • • • • • • • • • • • • • • •						
	on, directly or indirectly, any vo		-		· ·	s 🗸	No			
	(3) Provide a grant to an individual	for t	ravel, study, or other sım	ılar purposes?	☐ Ye	s 🗸	No			
	(4) Provide a grant to an organizat	on ot	her than a charitable, etc	: , organization described	I					
	ın section 4945(d)(4)(A)? See ii	nstru	ctions		· · ·   Ye:	s 🗸	No			
	(5) Provide for any purpose other t	han r	eligious, charitable, scien	tıfıc, lıterary, or						
	educational purposes, or for the	prev	ention of cruelty to childr	en or animals?	· · 🔲 Ye:	. <b>.</b>	No			
b	If any answer is "Yes" to $5a(1)-(5)$ ,	dıd a	any of the transactions fa	ıl to qualıfy under the ex		_				
	Regulations section 53 4945 or in a	curre	ent notice regarding disas	ter assistance? See instr	uctions			5b		
	Organizations relying on a current r	otice	regarding disaster assist	ance check here						
C	If the answer is "Yes" to question 5	a(4),	does the foundation clain	n exemption from the		_				
	tax because it maintained expenditi	ire re	sponsibility for the grant?		· · □ Ye	. $\square$	No			
	If "Yes," attach the statement requi	red b	y Regulations section 53	4945-5(d)						
6a	Did the foundation, during the year	, rece	ive any funds, directly or	indirectly, to pay premit	ıms on					
	a personal benefit contract?				· 🗆 🗆 🗸	s 🗸				
b	Did the foundation, during the year	, pay	premiums, directly or ind	lirectly, on a personal be	nefit contract?	s <u>\</u>	No	6b		No
	If "Yes" to 6b, file Form 8870									
7a	At any time during the tax year, wa	s the	foundation a party to a p	rohibited tax shelter trai	nsaction?					
b	If yes, did the foundation receive ar				<b>⊤</b> e:	s <u>▼</u>	No	7b		
8	Is the foundation subject to the sec	tion 4	1960 tax on payment(s) o	of more than \$1,000,000	in remuneration or		F			
	excess parachute payment during t					. 2				
							No L			
Pai	it VIII Information About (	JIIIC	ers, Directors, Trust	ees, roundation Ma	inagers, nigniy P	aiu Eii	ibio	ees,		
1	List all officers, directors, truste									
	(a) Name and address	١ '	<b>b)</b> Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions employee benefit pla				se acc	
	(4, 1,4,1,6,4,1,4,4,1,4,1,4,1,4,1,4,1,4,1,4,		devoted to position	-0-)	deferred compensa		ot	her al	lowand	es
AMES	S QUAYLE		CTOR	0		0				(
	N SCOTTSDALE RD STE 4800	1 00								
	TSDALE, AZ 85251	DIDE	CTOR							
	LYN QUAYLE	1 00	CTOR	0		0				,
	N SCOTTSDALE RD STE 4800 TSDALE, AZ 85251									
ORI	NNE BERGER	DIRE	CTOR	0		0				
1900	N SCOTTSDALE RD STE 4800	1 00		-						
COT	TSDALE, AZ 85251									
	ER QUAYLE	DIRE 1 00	CTOR	0		0				(
	N SCOTTSDALE RD STE 4800 TSDALE, AZ 85251	1 00								
2	Compensation of five highest-pa	id en	nployees (other than th	l hose included on line 1	l—see instructions).	. If nor	le. er	ter "l	NONE.	71
_	tempendanen er me mgmest pa				(d) Contributions		,			
(a)	Name and address of each employee	paid	(b) Title, and average	(a) Componention	employee benef		(e) E	xpens	se acco	unt,
	more than \$50,000		hours per week devoted to position	(c) Compensation	plans and deferr		oth	ner all	owance	es
			'		compensation					
INON	=									
Гota	I number of other employees paid ov	er \$5	0,000			•				
						<u> </u>	Form	n <b>99</b> 0	)-PF (	2018

Form 990-PF (2018)	Page <b>7</b>
Part VIII  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Enand Contractors (continued)	mployees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	NE".
(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	0
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 THE ACAIR FOUNDATION MAKES NO PROGRAM RELATED INVESTMENTS NO DIRECT CHARITABLE ACTIVITIES ARE CARRIED ON BY THE FOUNDATION ALL ADMINISTRATIVE EXPENSES INCURRED IN	0
2 CONNECTION WITH THE TAX EXEMPT PURPOSE WERE ALLOCATED TO GRANT MAKING ACTIVITIES ALL OTHER EXPENSES OF THE FOUNDATION WERE PROPERLY ALLOCABLE TO THE INVESTMENT	0
3 ACTIVITIES OF THE FOUNDATION	0
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	
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	0 Form <b>990-PF</b> (2018)

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

2

3a 3h

4

5

122,250

122.250

Form 990-PF (2018)

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

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

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

117,220

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0

Page 9

From 2013. . . . .

**b** From 2014. . . . c From 2015. . . d From 2016. . . .

e From 2017. . . . .

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e. . . . . . . .

**d** Applied to 2018 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a) )

5 Excess distributions carryover applied to 2018

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . . . .

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . . **b** Excess from 2015. . c Excess from 2016. . . .

d Excess from 2017. . .

e Excess from 2018. . .

(If an amount appears in column (d), the

6 Enter the net total of each column as

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 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 . . . . . 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

indicated below:

4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 122,250 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 

Form 990-PF (20	018)
Part XIII	Un

- (a) (b) (c) (d) Years prior to 2017 2017 2018 Corpus

distributed Income (see instructions)

69,400

8,507

8.507

5.030

- 1 Distributable amount for 2018 from Part XI, line 7 117,220 2 Undistributed income, if any, as of the end of 2018
- a Enter amount for 2017 only. . . . . .
- **b** Total for prior years

77.907

5.030

82,937

69.400

13,537

0



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Part XVI-A Analysis of Income-Producing	Activities				T
Enter gross amounts unless otherwise indicated	Unrelated bu	isiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	( <b>d)</b> Amount	function income (See instructions )
a b					
c d					
e					
f g Fees and contracts from government agencies					
2 Membership dues and assessments					
4 Dividends and interest from securities			14	47,796	
5 Net rental income or (loss) from real estate a Debt-financed property					
<ul><li>b Not debt-financed property.</li><li>6 Net rental income or (loss) from personal property</li></ul>					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	140,724	
<ul><li>9 Net income or (loss) from special events</li><li>10 Gross profit or (loss) from sales of inventory</li></ul>					
11 Other revenue a b					
c					
d e					
<ul><li>12 Subtotal Add columns (b), (d), and (e).</li><li>13 Total. Add line 12, columns (b), (d), and (e).</li></ul>		0		188,520	0 188,520
(See worksheet in line 13 instructions to verify calcu	lations )			3	188,320
Part XVI-B Relationship of Activities to the					
Line No. Explain below how each activity for which the accomplishment of the foundation's expression instructions )					
				Fo	rm <b>990-PF</b> (2018)

. ,	,
П	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

<b>.</b>	r VATT	Exempt Organi	zations							
		ganization directly or in than section 501(c)(3)	directly engage					on 501	Yes	No
a Ti	ansfers i	from the reporting foun	dation to a noi	ncharitable ex	empt organization	of				
(:	<b>L)</b> Cash.							. 1a(1)		No
(:	2) Other	rassets						. 1a(2)		No
	ther tran									
		of assets to a nonchar		_				. 1b(1)		No
	-	nases of assets from a r						1b(2)		No
•	-	al of facilities, equipmer	•					1b(3)		No
		bursement arrangemen						. 1b(4)		No
•	•	s or loan guarantees.						. 1b(5)		No
•	-	mance of services or m		<del>-</del>				. 1b(6)		No
	_	facilities, equipment, r wer to any of the above	-	•				. Ltc		No
of In	the goo	ds, other assets, or ser nsaction or sharing arra (b) Amount involved	vices given by ngement, show	the reporting w in column (c	foundation If the	foundation receive goods, other asse	ed less than fair mark	ket value ved	ngemen	ts
<b>2a</b> Is	the four	ndation directly or indire	ectly affiliated	with, or relate	d to, one or more	tax-exempt organ	ızatıons			
d	escribed	ın section 501(c) (other	r than section !	501(c)(3)) or	ın section 527? .		□Ye	s 🔽 No		
<b>b</b> If	"Yes," co	omplete the following s	chedule							
		(a) Name of organization	on	(1	<b>b)</b> Type of organization	n	(c) Description	of relationship		
	of m whic	er penalties of perjury, iy knowledge and belief th preparer has any kno	, it is true, cor							
Sig Her		*****			2019-11-07	*****		May the IRS di return with the prepa		
	<u> </u>	Signature of officer or t	rustee		Date	Title		below (see instr )?	✓ Yes [	□No
		Print/Type preparer's	s name F	Preparer's Sigi	nature	Date	Check if self-	PTIN	255	
Pai		JESSICA A DUFF			20		2019-11-05 employed ▶ ☐		P00179255	
	parer		DITTE TAX LLP				F	rm's EIN ▶86	10657	72
J36	Only		01 N CENTRAL	_ AVENUE SUT	TE 1200					
			OENIX, AZ 85		1200		P	Phone no (602	234-5	5100
		- Î					J			

Form 990PF Part XV Line 1a - 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).

JAMES QUAYLE

MARILYN QUAYLE

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

	or substantial contributor			
a Paid during the year				
CHRIST CHURCH SCHOOL INC		PC	GENERAL PURPOSE	5,000

PARADISE VALLEY, AZ 85253			
ARIZONA SCIENCE CENTER 600 E WASHINGTON	PC	GENERAL PURPOSE	15,000

ARIZONA SCIENCE CENTER 600 E WASHINGTON PHOENIX, AZ 85004	PC	GENERAL PURPOSE	15,000
CURE INTERNATIONAL INC 404 ST JOHNS CHURCH ROAD NO 106	PC	GENERAL PURPOSE	18,500

600 E WASHINGTON PHOENIX, AZ 85004		GENERAL FOR OSE	13,000
CURE INTERNATIONAL INC 404 ST JOHNS CHURCH ROAD NO 106 CAMP HILL, PA 17011	PC	GENERAL PURPOSE	18,500

PHOENIX, AZ 85004			
CURE INTERNATIONAL INC 404 ST JOHNS CHURCH ROAD NO 106 CAMP HILL, PA 17011	PC	GENERAL PURPOSE	18,500
Total	 	▶ 3a	122,250

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Foundation status of recipient

recipient

Amount

PHOENIX CHILDREN'S HOSPITAL FOUNDATION 1919 E THOMAS ROAD PHOENIX, AZ 85016	PC	GENERAL PURPOSE	10,000
JEFFERSON SCHOLARS FOUNDATION PO BOX 400891	PC	GENERAL PURPOSE	10,000

PHOENIX COUNTRY DAY SCHOOL 3901 EAST STANFORD DRIVE PARADISE VALLEY, AZ 85253  PC GENERAL PURPOSE 5,00	JEFFERSON SCHOLARS FOUNDATION PO BOX 400891 CHARLOTTESVILLE, VA 229044891	PC	GENERAL PURPOSE	10,000
	3901 EAST STANFORD DRIVE	PC	GENERAL PURPOSE	5,000

Total .

122,250

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year TRANSLATION GENOMICS RESEARCH PC **GENERAL PURPOSE** 18,500 INSTITUTE FOUNDATION

445 N 5TH ST STE 120

PHOENIX, AZ 85034

Total .

250

4801 E WASHINGTON STREET SUITE

PHOENIX, AZ 85004			
PHOENIX SEMINARY 7901 EAST SHEA BOULEBARD SCOTTSDALE, AZ 85260	PC	GENERAL PURPOSE	20,000
VERITAS PREPARATORY ACADEMY	PC	GENERAL PURPOSE	5,000

3a

122,250

Recipient

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient

Foundation status of recipient

recipient

Purpose of grant or contribution

a Paid during the year

ARCHWAY CLASSICAL ACADEMY-

Total .

VERITAS 4801 E WASHINGTON STREET SUITE 250 PHOENIX, AZ 85034			3,000
HOPE WOMEN'S CENTERPO BOX 3447	PC	GENERAL PURPOSE	5,000

PC

GENERAL PURPOSE

5.000

122,250

HOPE WOMEN'S CENTERPO BOX 3447 APACHE JUNCTION, AZ 85117	PC	GENERAL PURPOSE	5,000
GONZAGA COLLEGE HIGH SCHOOL 19 EYE ST NW WASHINGTON, DC 20001	PC	GENERAL PURPOSE	5,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
CRU100 LAKE HART DR		PC	GENERAL PURPOSE	250

CRU100 LAKE HART DR	PC	GENERAL PURPOSE	
ORLANDO, FL 32832			

any foundation manager

ORLANDO, FL 32832	PC	GENERAL FORFOSE	230
Total	 	▶ 3a	122,250

Name of Bond	End of Year Book Value	End of Year Fair Market Value
nvestments Corporate Bonds Schedule		
<b>EIN:</b> 20-8060816		
Name: ACAIR FOUNDATION		
TY 2018 Investments Corporate Bonds Schedule	1	
TV 2010 Tourneton outs Company to Bounda Cabadada		
efile GRAPHIC print - DO NOT PROCESS   As Filed Data -	D	LN: 93491315007509

GOLDMAN SACHS

1,152,317

1,152,317

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	LN: 93491315007509
TY 2018 Investments Corpora	te Stock Schedule	
Name:	ACAIR FOUNDATION	
EIN:	20-8060816	
Investments Corporation Stock Schedule		 1

## Name of Stock End of Year Book Value

GOLDMAN SACHS

**End of Year Fair** 

2,559,758

Market Value

2,559,758

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491315007509
TY 2018 Investments - Other	Schodulo	
11 2010 investments - Other	Scriedule	
Name:	ACAIR FOUNDATI	ON
EIN:	20-8060816	
Turne atura uta Othani Cabadula 3		

Investments Other Schedule 2					
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value		
GOLDMAN SACHS	AT COST	123,693	123,693		

efile GRAPHIC print - DO NOT PROCESS	DLN: 93491315007509					
TY 2018 Other Increases Schedule						
Name: ACAIR FOUNDATION						
<b>EIN:</b> 20-8060816						
Description	Amount					
UNREALIZED GAIN ADJUSTMENT	65,526					

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	- DLN: 93491315007509					
TY 2018 Other Professional Fees Schedule							
Name: ACAIR FOUNDATION							
<b>EIN:</b> 20-8060816							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable			

1,243

1,243

Purposes

INVESTMENT ADVISORY FEES

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	ed Data - DLN: 93491315007509				
TY 2018 Taxes Schedule						
Name: ACAIR FOUNDATION						
E	<b>EIN:</b> 20-8060816					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
2018 Q1 ES PAYMENT	400	0		0		

efile GRAPHIC print - DO	NOT PROCESS As Filed Da	ta -		DLN: 93491315007509		
Schedule B	Scho	edule of Contributors		OMB No 1545-0047		
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		ach to Form 990, 990-EZ, or 990-PF  ours gov/Form990 for the latest information  2018		2018		
Name of the organizatio ACAIR FOUNDATION	1		Employer i	dentification number		
Organization type (chec	(one)		20-8060816	)		
	,					
Filers of:	Section:					
Form 990 or 990-EZ	☐ 501(c)( ) (enter number	er) organization				
	☐ 4947(a)(1) nonexempt	charitable trust <b>not</b> treated as a	private foundation			
	☐ 527 political organization	on				
Form 990-PF	☑ 501(c)(3) exempt private	te foundation				
	☐ 4947(a)(1) nonexempt	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	☐ 501(c)(3) taxable privat	te foundation				
		90-PF that received, during the yor Complete Parts I and II See i				
Special Rules						
under sections 50 received from any	9(a)(1) and 170(b)(1)(A)(vi), that	filing Form 990 or 990-EZ that m checked Schedule A (Form 990 , total contributions of the greate Complete Parts I and II	or 990-EZ), Part II, line 13,	, 16a, or 16b, and that		
during the year, to	tal contributions of more than \$1	, (8), or (10) filing Form 990 or 99 ,000 <i>exclusively</i> for religious, ch en or animals Complete Parts I, I	aritable, scientific, literary, o			
during the year, co If this box is check purpose Don't co	ontributions exclusively for religioned, enter here the total contributions the any of the parts unless the	, (8), or (10) filing Form 990 or 99 ous, charitable, etc., purposes, but tions that were received during the General Rule applies to this of 000 or more during the year	ut no such contributions tota ne year for an <i>exclusively</i> re rganization because it rece	aled more than \$1,000 eligious, charitable, etc, eved <i>nonexclusively</i>		
990-EZ, or 990-PF), but i	must answer "No" on Part IV, III	al Rule and/or the Special Rules on the second results and the second results and the second results and the second results are second results and the second results are second results and the second results are second results and results are second results and results are second results and results are second resul	ne box on line H of its			
For Paperwork Reduction Action Form 990, 990-EZ, or 990-	t Notice, see the Instructions PF	Cat No 30613X	Schedule B (Form 990	0, 990-EZ, or 990-PF) (2018)		

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Page 2 Name of organization **Employer identification number** ACAIR FOUNDATION 20-8060816 Part I Contributors (See Instructions) Use duplicate copies of Part I if additional space is needed (d) (a) (c) (b) Type of No. Name, address, and ZIP + 4 **Total contributions** contribution Person See Additional Data Table **Payroll** Noncash \$ (Complete Part II for noncash contribution) (d) (a) (c) Type of No. Name, address, and ZIP + 4 Total contributions contribution Person **Payroll** Noncash \$ (Complete Part II for noncash contribution) (d) (a) (b) (c) Type of No. Name, address, and ZIP + 4 **Total contributions** contribution Person **Payroll** Noncash \$ (Complete Part II for noncash contribution) (d) (a) (b) (c) Type of Name, address, and ZIP + 4 **Total contributions** No. contribution Person **Payroll** Noncash \$ (Complete Part II for noncash contribution) (d) (a) (b) (c) Type of Name, address, and ZIP + 4 **Total contributions** No. contribution Person **Payroll** Noncash \$ (Complete Part II for noncash contribution) (d) (a) (b) (c) Type of No. Name, address, and ZIP + 4 Total contributions contribution Person **Payroll** Noncash \$ (Complete Part II

for noncash contribution)

Part I

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Page 3 Name of organization **Employer identification** ACAIR FOUNDATION number 20-8060816 Part II Noncash Property (See Instructions) Use duplicate copies of Part II if additional space is needed (a) (c) (b) (d) FMV (or estimate) No. from Description of noncash property given Date received Part I (See instructions) See Additional Data Table \$ (c) (a) (b) (d) FMV (or estimate) No. from Description of noncash property given Date received Part I (See instructions) (a) (c) (b) (d) No. from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) \$ (a) (c) (b) (d) No. from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) (a) (c) (d) (b) No. from FMV (or estimate) Date received Description of noncash property given Part I (See instructions) \$ (c) (a) (b) (d) FMV (or estimate) No. from Description of noncash property given Date received

(See instructions)

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

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

### **Additional Data**

### Software ID:

**Software Version:** 

**EIN:** 20-8060816

Name: ACAIR FOUNDATION

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

Form 990 Schedule	B, 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 contrib	oution
	JAMES D & MARILYN T QUAYLE		Person	✓
1	4900 N SCOTTSDALE RD STE 4800	_	Payroll	
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$ 100,000	Noncash	
	SCOTTSDALE, AZ 85251		(Complete Part II contributio	for noncash
	C & J FOUNDATION		Person	
2	8552 E SWEETWATER AVE	_	Payroll	
	6552 E SWEETWATER AVE	\$ 48,664	Noncash	
	SCOTTSDALE, AZ 85260			
			(Complete Part II) contributio	
	C & J FOUNDATION		Person	
3	8552 E SWEETWATER AVE	_	Payroll	$ \Box$ $\Box$
	OSSE E SWEETWATERANE	\$ 139,380	Noncash	
	SCOTTSDALE, AZ 85260			_
			(Complete Part II contributio	
	C & J FOUNDATION		Person	
4	8552 E SWEETWATER AVE	$\dashv$	Payroll	
		\$ 101,800	Noncash	$\overline{\mathbf{Z}}$
	SCOTTSDALE, AZ 85260		(Carralata Dant II	
			(Complete Part II contributio	
_	C & J FOUNDATION		Person	
<u>5</u>	8552 E SWEETWATER AVE	$\dashv$	Payroll	
		\$ 65,520	Noncash	
	SCOTTSDALE, AZ 85260		(6 )	_
			(Complete Part II contributio	
	C & J FOUNDATION		Person	
<u>6</u>	8552 E SWEETWATER AVE	$\dashv$	Payroll	
		\$ 63,315	Noncash	<u>_</u>
	SCOTTSDALE, AZ 85260			_
			(Complete Part II contributio	

(a)	(b)	(c)	(d)	
Ño.	Name, address, and ZIP + 4	Total contributions	Type of contribu	ition
	C & J FOUNDATION		Person	
7	8552 E SWEETWATER AVE		Payroll	
	6552 E SWEETWATER AVE	\$ 100,802	Noncash	
l <del></del>	SCOTTSDALE, AZ 85260			5
	300 1135/NE, NE 03200		(Complete Part II fo contribution	
	C & J FOUNDATION		Person	
8	8552 E SWEETWATER AVE		Payroll	Г
	6332 E SWEETWATER AVE	\$ 169,050	Noncash	
	SCOTTSDALE, AZ 85260			•
	555 557.121, 7.12 65255		(Complete Part II fo contribution	
	C & J FOUNDATION		Person	
9	8552 E SWEETWATER AVE		Payroll	Г
	6332 E SWEETWATER AVE	\$ 65,870	Noncash	
l <del></del>	SCOTTSDALE, AZ 85260			•
			(Complete Part II fo	
	C 0 1 FOLINDATION		contribution Person	s)
10	C & J FOUNDATION			L
_	8552 E SWEETWATER AVE		Payroll	
		\$ 59,787	Noncash	[
	SCOTTSDALE, AZ 85260		(C. )	
			(Complete Part II fo contribution	
	C & J FOUNDATION		Person	Г
11			Payroll	
	8552 E SWEETWATER AVE	\$ 59,700	Noncash	L
	CCOTTCDALE AZ 05260	35,700	Noncasii	•
	SCOTTSDALE, AZ 85260		(Complete Part II fo	or nonc
			contribution	
	C & J FOUNDATION		Person	
12	8552 E SWEETWATER AVE		Payroll	Г
	0332 L SWELTWATER AVE	\$ 77,897	Noncash	
	SCOTTSDALE, AZ 85260			5
	333, 135, 122, 112 33233		(Complete Part II fo	or nonc
			(Complete Part II fo contribution	

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribu	ition
140.		Total Contributions	Person	
<u>13</u>	C & J FOUNDATION		Payroll	
-	8552 E SWEETWATER AVE	. ==	-	
-		\$ 77,126	Noncash	<b>✓</b>
	SCOTTSDALE, AZ 85260		(Complete Part II fo	r noncash
			contribution Person	s )
14	C & J FOUNDATION			
<u></u>	8552 E SWEETWATER AVE		Payroll	
		\$ 160,234	Noncash	<b>✓</b>
	SCOTTSDALE, AZ 85260		(Complete Part II fo	
			contribution	
	C & J FOUNDATION		Person	
<u>15</u> -	8552 E SWEETWATER AVE		Payroll	
	osse e sweet with the control of the	\$ 206,815	Noncash	<u> </u>
-	SCOTTSDALE, AZ 85260			· · · · · · · · · · · · · · · · · · ·
			(Complete Part II fo contribution	
	C & J FOUNDATION		Person	<del>-,</del>
<u>16</u>	OFFI F OWEFTWATER AVE		Payroll	
	8552 E SWEETWATER AVE	\$ 71,633	Noncash	
-	SCOTTSDALE, AZ 85260			<b>✓</b>
			(Complete Part II fo contribution	
	C & J FOUNDATION		Person	<del>"</del>
<u>17</u>			Payroll	
	8552 E SWEETWATER AVE	\$ 201,360	Noncash	
-	SCOTTSDALE, AZ 85260			<b>✓</b>
	555 H. 557 H. 2 55 2 55		(Complete Part II fo	
	C 0 1 FOLINDATION		contribution Person	s)
18	C & J FOUNDATION		Payroll	ᆜ
-	8552 E SWEETWATER AVE	A E4 004	•	
-	CCOTTCDALE AT 05250	\$ 51,094	Noncash	✓
	SCOTTSDALE, AZ 85260		(Complete Part II fo	r noncash
			contribution	

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) Name, address, and ZIP + 4 Total contributions Type of contribution Νo. Person C & J FOUNDATION <u>19</u> Payroll 8552 E SWEETWATER AVE \$ 90,370 Noncash **~** SCOTTSDALE, AZ 85260 (Complete Part II for noncash contributions ) Person C & J FOUNDATION 20 Payroll 8552 E SWEETWATER AVE \$ 217,160 Noncash **~** SCOTTSDALE, AZ 85260 (Complete Part II for noncash contributions ) Person C & 1 FOUNDATION <u>21</u> Payroll 8552 E SWEETWATER AVE \$ 70,725 Noncash **~** SCOTTSDALE, AZ 85260 (Complete Part II for noncash contributions ) Person C & J FOUNDATION 22 Payroll 8552 E SWEETWATER AVE \$ 47,680 Noncash ~ SCOTTSDALE, AZ 85260 (Complete Part II for noncash contributions )

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed (c) FMV (or estimate) (a) (b) (d) No. from Part I Description of noncash property given Date received (See instructions) 2 2,479 051 SHARES OF GS SMALL/MID CAP GROWTH FUND CLASS P, TICKER SYMBOL GSWPX \$ 48,664 2019-02-01 3 150,000 SHARES OF MORGAN STANLEY FINANCE LLC LINKED TO BASKET OF INDICES UPSIDE LEVERED \$ 139,380 2019-02-01 CAPPED STRUC

4	100,000 SHARES OF CITIGROUP INC LNKD TO NASDAQ 100 STOCK INDX CNTNGNT CPN W BUFFER STRUCTURED NOTE	\$ 101,800	2019-02-01
<u>5</u>	75,000 SHARES OF JPMORGAN CHASE & CO LINKED TO A BASKET OF INDICES GREATER OF CNTNGNT CPN STRUCTURE	\$ 65,520	2019-02-01
<u>6</u>	75,000 SHARES OF BNP PARIBAS LINKED TO EURO STOXX 50 PR BETTER OF CNTNGNT CPN	. 62 245	2010 02 01

<u>6</u>	75,000 SHARES OF BNP PARIBAS LINKED TO EURO STOXX 50 PR BETTER OF CNTNGNT CPN STRUCTURED NOTE DUE 07	\$ 63,315	2019-02-01
7	100,000 SHARES OF NATIONAL BANK OF CANADA- NEW YO LINKED TO S&P 500 INDEX CNTNGNT CPN W BUFFER STRUCT	\$ 100,802	2019-02-01
8	175,000 SHARES OF NATIONAL BANK OF CANADA- NEW YO LINKED TO S&P 500 INDEX CNTNGNT CPN W BUFFER STRUCT	\$ 169,050	2019-02-01

8	175,000 SHARES OF NATIONAL BANK OF CANADA- NEW YO LINKED TO S&P 500 INDEX CNTNGNT CPN W BUFFER STRUCT	\$ 169,050	2019-02-01
7	100,000 SHARES OF NATIONAL BANK OF CANADA- NEW YO LINKED TO S&P 500 INDEX CNTNGNT CPN W BUFFER STRUCT	\$ 100,802	2019-02-01
	STRUCTURED NOTE DUE 07	\$ 63,315	2019-02-01

<u> </u>	NEW YO LINKED TO S&P 500 INDEX CNTNGNT CPN W BUFFER STRUCT	\$ 100,802	2019-02-01
8	175,000 SHARES OF NATIONAL BANK OF CANADA- NEW YO LINKED TO S&P 500 INDEX CNTNGNT CPN W BUFFER STRUCT	<u>\$ 169,050</u>	2019-02-01
q	75 000 SHARES OF GS FINANCE CORP. LINKED TO		

	BUFFER STRUCT		
<u>8</u>	175,000 SHARES OF NATIONAL BANK OF CANADA- NEW YO LINKED TO S&P 500 INDEX CNTNGNT CPN W BUFFER STRUCT	\$ 169,050	2019-02-01
<u>9</u>	75,000 SHARES OF GS FINANCE CORP LINKED TO BASKET OF INDICES UPSIDE LEVERED CAPPED STRUCTURED NOTE	\$ 65,870	2019-02-01

<u>9</u>	75,000 SHARES OF GS FINANCE CORP LINKED TO BASKET OF INDICES UPSIDE LEVERED CAPPED STRUCTURED NOTE	\$ 65,870	2019-02-01
<u>10</u>	60,000 SHARES OF THE BANK OF NOVA SCOTIA 0 0% 08/05/2020 SR LIEN STRUCTURED NOTE DUE 08/05/2020, TIC	<u> </u>	2019-02-01

	STRUCTURED NOTE	\$ 65,870	2019-02-01
<u>10</u>	60,000 SHARES OF THE BANK OF NOVA SCOTIA 0 0% 08/05/2020 SR LIEN STRUCTURED NOTE DUE 08/05/2020, TIC	\$ 59,787	2019-02-01
11	60,000 SHARES OF THE BANK OF CITIGROUP INC		

<u>10</u>	0 0% 08/05/2020 SR LIEN STRUCTURED NOTE DUE 08/05/2020, TIC	\$ 59,787	2019-02-01
<u>11</u>	60,000 SHARES OF THE BANK OF CITIGROUP INC LINKED TO S&P 500 INDEX ABSOLUTE RETURN STRUCTURED NOTE	\$ 59,700	2019-02-01

Form 990 Schedule B, Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<u>12</u>	75,000 SHARES OF GS FINANCE CORP LINKED TO S&P 500 INDEX CNTNGNT CPN W BUFFER STRUCTURED NOTE DUE 0	\$ 77,897	2019-02-01
<u>13</u>	75,000 SHARES OF GS FINANCE CORP LINKED TO RUSSELL 2000 INDEX CNTNGNT CPN W BUFFER STRUCTURED NOTE	\$ 77,126	2019-02-01
<u>14</u>	175,000 SHARES OF GS FINANCE CORP LINKED TO S&P 500 INDEX UPSIDE LEVERED CAPPED STRUCTURED NOTE DUE	\$ 160,234	2019-02-01
<u>15</u>	175,000 SHARES OF MORGAN STANLEY FINANCE LLC LINKED TO S&P 500 INDEX UPSIDE LEVERED CAPPED STRUCTURE	\$ 206,815	2019-02-01
<u>16</u>	75,000 SHARES OF ROYAL BANK OF CANADA LINKED TO EURO STOXX 50 PR CNTNGNT CPN W BUFFER STRUCTURED NOT	\$ 71,633	2019-02-01
<u>17</u>	200,000 SHARES OF UBS AG LINKED TO EURO STOXX 50 PR CNTNGNT CPN W BUFFER STRUCTURED NOTE DUE 08/07/2	\$ 201,360	2019-02-01
<u>18</u>	50,000 SHARES OF CANADIAN IMPERIAL BANK OF COMM LINKED TO RUSSELL 2000 INDEX CNTNGNT CPN W BUFFER ST	\$ 51,094	2019-02-01
<u>19</u>	100,000 SHARES OF UBS AG LINKED TO BASKET OF INDICES UPSIDE LEVERED CAPPED STRUCTURED NOTE DUE 08/05	\$ 90,370	2019-02-01
<u>20</u>	200,000 SHARES OF UBS AG LINKED TO S&P 500 INDEX UPSIDE LEVERED CAPPED STRUCTURED NOTE DUE 08/07/201	<u>\$ 217,160</u>	2019-02-01
<u>21</u>	75,000 SHARES OF SOCIETE GENERALE LINKED TO BASKET OF INDICES UPSIDE LEVERED CAPPED STRUCTURED NOTE	\$ 70,725	2019-02-01

Form 990 Schedule B. Part II - Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed (a) FMV (or estimate) No. from Part I Description of noncash property given Date received (See instructions) 50,000 SHARES OF SOCIETE GENERALE LINKED TO RUSSELL 2000 INDEX UPSIDE LEVERED CAPPED \$ 47,680 2019-02-01 STRUCTURED NOTE