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 <a href="https://www.irs.gov/Form990PFfor">www.irs.gov/Form990PFfor</a> instructions and the true transfer of transfer of the true transfer of transfer of the true transfer of transfer

Open to Public Inspection

		lendar year 2018 or tax year beginning		07/	<u>01 ,<b>2018</b>,</u>	and ending			06/30,2019
Na	me of	foundation					A	Employer identific	cation number
KELLER FOUNDATION							38-	2331693	
Ñ	Number and street (or P O box number if mail is not delivered to street address)					Room/suite	В	Telephone numbe	r (see instructions)
	P.0	. BOX 803878						31	2-630-6000
		own, state or province, country, and ZIP or foreign posta	code	-			1		
							C	If exemption applicate pending, check here.	on is
	CHI	CAGO, IL 60680						pending, check here .	•••••
_		ck all that apply: Initial return		Initial return	of a former p	ublic charity	$\Box_{\mathbf{b}}$	1 Foreign organization	ons, check here
		Final return		Amended ret	urn			2 Foreign organization	_ <del></del>
		Address change	_	Name change	е			85% test, check he computation	
H	Che	ck type of organization: X Section 501(	c)(3) e	xempt private for	oundation	<b>1</b> 04	٦_	•	<del></del>
Γ		section 4947(a)(1) nonexempt charitable trust	$\overline{}$	ther taxable pri		on U	=	If private foundation sunder section 507(b)	
ī				method. X Ca			F		a 60-month termination
	end	1,	_	pecify)			1		1)(B), check here . >
		-		(d) must be on ca	sh basis)		-		
P	art	Analysis of Revenue and Expenses (The	(2)	Revenue and					(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in		penses per	(b) Net inve		(c) A	Adjusted net income	for charitable purposes
		column (a) (see instructions) )		books	11100111			lincome	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)		36,715.					
	2	Check If the foundation is not required to attach Sch B							
	3	Interest on savings and temporary cash investments.		3.					STMT 1
	4	Dividends and interest from securities		195,798.	19	5,798.			STMT 2
	5a	Gross rents							
	b	Net rental income or (loss)			-				1
Ð		Net gain or (loss) from sale of assets not on line 10		-11,425.					<u> </u>
'n		Gross sales price for all 527, 270		-					
Revenue	7	Capital gain net income (from Part IV, line 2) .							
Ä	8	Net short-term capital gain						Ī	
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	ь	Less Cost of goods sold .							
	С	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)		48.					STMT 3
	12	Other income (attach schedule)		221,139.	19	5,798.			
	13	Compensation of officers, directors, trustees, etc		31,200.	2	8,080.			3, <u>120</u> .
enses	14	Other employee falafies hidwages				NONE		NONE	
ë	15	Pension plans, employee benefits				NONE		NONE	
×	16a	Legal fees (attach schedule) T							<u> </u>
u	Ь			<u>2,500</u> .		1,250.		NONE	1, <u>2</u> 50.
<u>È</u> ,	16a b c 17 18 19 20 21 22 23 24	Other professional fees (attach scheduler. 5.		18,370.	1	8,370.			<del></del>
tra	17	Interest					-		
ij	18	Taxes (attach schedule) (see instructions). 6.		16,547.		1,398.			<del></del>
盲	19	Depreciation (attach schedule) and depletion.							
P	20	Occupancy							
اع	21	Travel, conferences, and meetings		1,259.		NONE		NONE	1, <u>259</u> .
a	22	Printing and publications				NONE		NONE	<del></del>
티	23	Other expenses (attach schedule) STMT. 7.		2,520.					<u>2,520</u> .
⋾	24	Total operating and administrative expenses.							
ē		Add lines 13 through 23		72,396.	4	9,098.		NONE	8,149.
- 1		Contributions, gifts, grants paid		432,350.					432,350.
_	<u> 26</u>	Total expenses and disbursements Add lines 24 and 25		504,746.	4	9,098.		NONE	<u>440,499</u> .
	27	Subtract line 26 from line 12			NING OPEN HILLIAND OF STREET	on millioner of allow	um II	ensasaniinuness at iminėjais į	monthine a 11 milliothrescommingsoling
		Excess of revenue over expenses and disbursements		-283,607.					
		Net investment income (if negative, enter -0-)			14	6,700.			
┙	_ <u>c</u>	Adjusted net income (If negative, enter -0-)		l	***************************************				5 000 PE (2010)

Part I	Attached schedules and amounts in the	Beginning of year	End o	f year
Part I	Balance Sheets description column should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	111,149.	220,517.	220,517
3	Accounts receivable			
	Less allowance for doubtful accounts ▶			
4	Pledges receivable ▶			
	Less <sup>-</sup> allowance for doubtful accounts ▶			<del></del>
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)		■ The second se	). Шей та шештей менения <u>предерження у че</u> лиционням и под
	Less allowance for doubtful accounts ▶NONE			
8	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges			<del></del>
	Investments - U S and state government obligations (attach schedule).	5,630,719.	5,233,274.	5,986,029
	Investments - corporate stock (attach schedule) . STMT .8.	1,666,371.		
11 <sup>C</sup>	Investments - corporate bonds (attach schedule) . STMT .9 Investments - land, buildings,	1,000,3/1.	1,000,434.	1,771,054
	and equipment basis Less accumulated depreciation		<del></del>	
	(attach schedule)			
12 13	Investments - mortgage loans	-		
14	Land, buildings, and			
	equipment basis Less accumulated depreciation		<del></del>	<u></u>
15	(attach schedule) Other assets (describe		· · · · · · · · · · · · · · · · · · ·	
16	Total assets (to be completed by all filers - see the			
	instructions Also, see page 1, item I)	7.408.239.	7,134,225.	7,977,640
17	Accounts payable and accrued expenses	7,244,7250	. , , = = - , = = = -	1
18	Grants payable			-
	Deferred revenue			
20	Loans from officers, directors, trustees, and other disqualified persons.			1
Liabilities 20 21 22	Mortgages and other notes payable (attach schedule)			
:5 22	Other liabilities (describe	12,750.	8,000.	
23	Total liabilities (add lines 17 through 22)	12,750.	8,000.	<u> </u>
	Foundations that follow SFAS 117, check here	-		
es	and complete lines 24 through 26, and lines 30 and 31.			
salances 24 25	Unrestricted			
	Temporarily restricted			
26	Permanently restricted			
5	Foundations that do not follow SFAS 117, check here			
<u></u>	and complete lines 27 through 31.			
S 27	Capital stock, trust principal, or current funds	7,395,489.	7,126,225.	
28	Paid-in or capital surplus, or land, bldg, and equipment fund			
<u>ن</u> 29	Retained earnings, accumulated income, endowment, or other funds	5 205 400	F 106 00F	*
Net Assets or Fund B 22 23 30 31	Total net assets or fund balances (see instructions)	7,395,489.	7,126,225.	<u> </u>
Ž 31	Total liabilities and net assets/fund balances (see	7 400 000	7 124 225	
	instructions)	7,408,239.	7,134,225.	
	Analysis of Changes in Net Assets or Fund Bala		must agree with	
	al net assets or fund balances at beginning of year - Part			7,395,489.
	l-of-year figure reported on prior year's return)er amount from Part I, line 27a			-283,607.
	er amount from Part I, line 27a		3	14,343.
	I lines 1, 2, and 3			7,126,225.
	reases not included in line 2 (itemize)		5	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
6 Tot	al net assets or fund balances at end of year (line 4 minus l	ine 5) - Part II. column (h		7,126,225.
<del>U</del> 101	arrior decete or raine parameter at one or year time 4 minus	21 . a.z. iii warmiiii (a	<u></u>	Form <b>990-PF</b> (2018)

	ns and Losses for Tax on Inve		( <b>b</b> ) How		
2-story	describe the kind(s) of property sold (for e brick warehouse, or common stock, 200		acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a PUBLICLY TRADE	O SECURITIES				
b					
<u> </u>			<u> </u>		
d			<del> </del>		
<del></del>	T	/-> C	<b>-</b>		· · · · · · · · · · · · · · · · · · ·
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) mini	
<u>a 527,270.</u>		538,695.			-11,425.
<u>b</u>			ļ. <u></u>		
С					
_d					
<u>e</u>			<u> </u>	<del></del>	
Complete only for assets	showing gain in column (h) and owned b	<del>                                     </del>		Gains (Col (h) ga	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ı), ıf any	col	(k), but not less t Losses (from co	
a					-11,425.
b					
c					
d					
e					····
2 Capital gain net incom	ne or (net canital loss)	ain, also enter in Part I, line 7 oss), enter -0- in Part I, line 7	2		-11,425.
3 Net short-term capital	gain or (loss) as defined in sections				11/125
	Part I, line 8, column (c). See ins				
			3		
	Under Section 4940(e) for Red		ncome		
	or the section 4942 tax on the distrib sn't qualify under section 4940(e). Do		ase perio	d?	Yes X No
	amount in each column for each yea		20 001/00	trios	
(a)			ig ally ell	(d)	<del> </del>
Base period years	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
Calendar year (or tax year beginning in 2017	511,261.	7,893,881.		teor (b) divided by	0.064767
2016	413,097.	7,539,772.			0.054789
2015	435,965.	7,212,785.			0.060443
2014	371,386.	7,645,929.			0.048573
2013	335,680.	7,409,400.			0.045305
				-	
2 Total of line 1, column	n (d)		2		0.273877
	atio for the 5-year base period - divid				
	he foundation has been in existence i		3		0.054775
4 Enter the net value of	noncharitable-use assets for 2018 from	om Part X, line 5	4	7,	649,903.
5 Multiply line 4 by line	3		5		419,023.
6 Enter 1% of net invest	ment income (1% of Part I, line 27b)		6		1,467.
7 Add lines 5 and 6			7		420,490.
8 Enter qualifying distrib	outions from Part XII, line 4 r greater than line 7, check the box	ın Part VI, line 1b, and complete	8 that part		440,499. rate. See the

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ctions	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here			- 1
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1,4	67.
	here X and enter 1% of Part I, line 27b			l
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			<u>IONE</u>
3	Add lines 1 and 2			67.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			IONE
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		$\perp$ ,4	67.
6	Credits/Payments			
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 7,800 .			İ
b	Exempt foreign organizations - tax withheld at source			1
C	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld		7 0	
7	Total credits and payments. Add lines 6a through 6d		1,0	<u> 100.</u>
8	Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached			
9	Tax due. If the total of lines 3 and 6 is more than line 7, enter amount over		6 3	33.
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		0,3	· <u> </u>
	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
,,	participate or intervene in any political campaign?	1a		X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
_	instructions for the definition	1b		<u>X</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	Did the foundation file Form 1120-POL for this year?	1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.			
	(1) On the foundation ►\$(2) On foundation managers ►\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers 🕨 \$			<del></del>
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			<u>_</u>
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<u>х</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b		
_	If "Yes," has it filed a tax return on Form 990-T for this year?	5		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-		
_	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or  By language in the governing instrument, or  By save language in the governing instrument in the governing in the			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	<u>X</u>	
,	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
7	Enter the states to which the foundation reports or with which it is registered. See instructions.			$\Box$
88	MI			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			لـــا
-	(or designate) of each state as required by General Instruction G <sup>2</sup> If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
•	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If "Yes,"			
	complete Part XIV	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		X
		0.0	A.DE	

Par	t VII-A Statements Regarding Activities (continued)			
	•		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement See instructions	12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
	Website address  WWW. KELLERFOUNDATION . ORG			
14		<u>-600</u>	0	
	Located at ▶ P.O. BOX 803878, CHICAGO, IL ZIP+4 ▶ 60680			
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			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority	'	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	Bran seem		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)	詳謹		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		E-Testo	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b \$5.€*	# 37 pt	X
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	Sale Santini	ALC: NO.	44
	were not corrected before the first day of the tax year beginning in 2018?	1c	a it iec	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		10 miles	
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 20187			美国
	If "Yes," list the years			
p	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	21		
	all years listed, answer "No" and attach statement - see instructions )	2b	12775	24551
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		[]	
_			是是	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?		<b>原</b>	130
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	2		
	foundation had excess business holdings in 2018.)	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	- 13 TE 1	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		CHOR	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		<u>X</u>

Sa During the year, did the foundation pay or incer any amount to (1) Carry on prospagands or otherwise attempt to mileneze tegislation (section 4945(e))*	Par	VII-B Statements Regarding Activities	s for Which Form	720 May Be Rec	uired (continued)			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an organization other than a charitable, etc. organization described in section 495(di)4(a)75 see instructions  (5) Provide for any purpose other than religious, charitable, scenticic, literary, or aducational purposes, or for the prevention of cruelty to chaldren or animalis?  (5) Provide for any purpose other than religious, charitable, scenticic, literary, or aducational purposes, or for the prevention of cruelty to chaldren or animalis?  (6) Provide for any purpose other than religious, charitable, scenticic, literary, or aducational purposes, or for the prevention of cruelty to chaldren or animalis?  (7) Provide for any purpose other than religious, charitable, scenticic, literary, or aducational purposes, or for the prevention of cruelty to chaldren or animalis?  (8) If any answer is "Yes" to 5a(1)(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945-5(d)  (9) Provide a grant to an organization of the transactions for the section of the condition of the section of the foundation of the section of the foundation of the section of the section of the section of the foundation of the section of the	5a	During the year, did the foundation pay or incur any	amount to				Yes	No
directly or indirectly, any voter registration drive?,  (3) Provide a grant to an individual for travel, study, or other similar purposes?		(1) Carry on propaganda, or otherwise attempt to in	fluence legislation (sectio	n 4945(e))?	. Yes X No	,		
(3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an organization other than a charitable, etc. organization described in section 4945(d)4(a)75 sen instructions  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cusely to chaldren or animals?  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cusely to chaldren or animals?  (6) If any answer is "Yes" to 54(1)4(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions.  (7) Organizations relying on a current notice regarding disaster assistance, check here  (8) If the answer is "Yes" to question 54(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  (9) If the statement required by Regulations section 53 4945-5(d)  (9) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  (9) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums  (1) If "Yes" to 80, file form 887.  (1) If "Yes" to 80, file form 887, any premiums, directly or indirectly, on a personal benefit contract?  (1) If "Yes" to 80, file form 887, any premiums, directly or indirectly,		(2) Influence the outcome of any specific public	election (see section	4955); or to carry o	n,			
(4) Provide a grant to an organization other than a charitable, etc. organization described in section 4945(44)(A)F See instructions.  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  If any answer is "Yes 'D No by 14 yes and any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance, 8ee instructions.  Organizations relying on a current notice regarding disaster assistance, 8ee instructions.  If the answer is "Yes 'D outent notice regarding disaster assistance, 8ee instructions.  If 'Yes, 'Estach the statement required by Regulations section 53 4945-5(d)  6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b) Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  A any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Tyes X No  b) If "Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction?  Tyes X No  T		directly or indirectly, any voter registration drive	2		. Yes X No	, [ '		
section 4945(d)4(A)/A See instructions		(3) Provide a grant to an individual for travel, study,	or other similar purposes	?	. Yes X No	,		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		(4) Provide a grant to an organization other tha	n a charitable, etc., orç	ganization described	ın			
(a) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		section 4945(d)(4)(A)? See instructions			. Yes X No	,		
b (f any answer is "Yes" to 5a(1)(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance, Neck 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?						ĺ		
Regulations section 53 4945 or in a current notice regarding dissater assistance? See instructions.  Organizations relying on a current notice regarding dissater assistance, check here  Organizations relying on a current notice regarding dissater assistance, check here  Organizations relying on a current notice regarding dissater assistance, check here  Organizations relying on a current notice regarding dissater assistance, check here  Organizations relying on a current notice regarding dissater assistance, check here  Organizations relying on a current notice regarding dissater assistance, check here  Organizations relying on a current notice regarding dissater assistance, check here  Organizations relying on a current notice regarding dissater assistance, check here  Organizations relying on a current notice regarding dissater assistance, check here  Organizations relying on a current notice regarding dissater assistance, check here  Organization of the two dispatch of the gentlement of the transaction on proceeds on the process of the search of the formation on pacess part purposes on a personal benefit contract?  The standant of the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract?  The standant proceeds or have any net income attributable to the transaction?  The standant proceeds or have any net income attributable to the transaction?  The standant proceeds or have any net income attributable to the transaction?  The standant proceeds or have any net income attributable to the transaction?  The standant proceeds or have any net income attributable to the transaction?  The standant proceeds or have any net income attributable to the transaction?  The standant proceeds or have any net income attributable to the transaction?  The standant proceeds or have any net income attributable to the transaction?  The standant proceeds or have any net income attributable to the transaction?  The standant proceeds or have any net income attributable to the transaction?  T		purposes, or for the prevention of cruelty to child	ren or animals?		. Yes X No	)		
Organizations relying on a current notice regarding disaster assistance, check here  c If the answer is "Yes" to question 5al4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	b	If any answer is "Yes" to 5a(1)-(5), did any of	the transactions fail to	qualify under the e	exceptions described in	،   <u> </u>		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax		Regulations section 53 4945 or in a current notice re	egarding disaster assistar	ice? See instructions.		5b_		
because it maintained expenditure responsibility for the grant?		Organizations relying on a current notice regarding of	lisaster assistance, check	here				
If "Yes," attach the statement required by Regulations section 53 4945-5(d)  6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  c Bb, file form 8870.  7b If "Yes," did the foundation receive any proceeds or have any not income attributable to the transaction?  b If "Yes," did the foundation receive any proceeds or have any not income attributable to the transaction?  7b If "Yes," did the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachule payment(s) during the year?  7b If ormation About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  (a) Name and address  (b) Title, and average hours per week devoted to position  2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position (e) Compensation (e) Expense account, other allowances of except and deferred compensation of the plane and deferred compensation (e) Expense account, other allowances of except and deferred compensation of the plane and deferred compen	C	If the answer is "Yes" to question 5a(4), does	the foundation claim e	xemption from the t	ax — —			
Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		because it maintained expenditure responsibility for	the grant?		Yes No	•		
on a personal benefit contract?    Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?   Yes   X No   7b		If "Yes," attach the statement required by Regulation	s section 53 4945-5(d)			ŀ		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6a	Did the foundation, during the year, receive any	funds, directly or indir	ectly, to pay premiui	ms			
If "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?					· — —	·		
Total number of other employees paid over \$50,000	b		irectly or indirectly, on a	personal benefit contra	act <sup>7</sup>	6b		X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	_							
See   State								J
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation.  (a) Name and address  2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."  (b) Trile, and average hours per week devoted to position  (c) Compensation (e) Compensation (e) Compensation (e) Expense account, other allowances  (d) Contributions to employee benefit plans and deferred compensation.  (e) Expense account, other allowances  (e) Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Trile, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation.  (e) Expense account, other allowances  (e) Expense account, other allowances  (e) Expense account, other allowances  (file) Trile, and average hours per week devoted to position  (e) Compensation  (file) Contributions to enter employee benefit plans and deferred compensation.  (e) Expense account, other allowances  (file) Compensation  (file) Compensation  (file) Contributions to enter employee benefit plans and deferred compensation.  (file) Compensation  (file) Compen		• • • • • • • • • • • • • • • • • • • •	•		ion'	/b		_
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  (a) Name and address  (b) Title, and average devoted to position devoted to position devoted to position of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (explority to position). If none, enter plans and deferred compensation of the plans and deferred compensation. See instructions (explority to position). If none, enter "NONE."  (b) Title, and average hours per week devoted to position. NONE  NONE  NONE  NONE  NONE  NONE  NONE	8				Vac V			
and Contractors  1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  (a) Name and address  (b) Title, and average hours per week devoted to position  2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deterred compensation  (e) Compensation  (f) Compensation  (h) Title, and average hours per week devoted to position  NONE  NONE  NONE  NONE  NONE  NONE  NONE  NONE  NONE	Pari							!
(a) Name and address  (b) Title, and average hours per week devoted to position  2 Compensation of five highest-paid employees "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation (f) through deferred compensation (a) Contributions to other allowances  (d) Contributions to other employee paid more than \$50,000  (e) Expense account, other allowances  (e) Expense account, other allowances  (e) Compensation (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances  (e) Expense account, oth		and Contractors						
(a) Name and address hours per week devoted to position enter -0-1 and deterred compensation of the allowances  2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation plans and deferred compensation other allowances  (b) Title, and average hours per week devoted to position (c) Compensation Plans and deferred compensation other allowances  (c) Compensation NONE NONE NONE  NONE NONE  Total number of other employees paid over \$50,000		List all officers, directors, trustees, and founda						
2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (e) Expense account, other allowances of the result of the position (c) NONE (e) Expense account, other allowances (e) Expense acco		(a) Name and address	hours per week	(if not paid,	employee benefit plans			
2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000 (b) Trile, and average hours per week devoted to position (c) Compensation (e) Expense account, other allowances compensation (none) NONE NONE NONE  NONE NONE NONE NONE	SEE	STATEMENT 11	devoted to position	<u> </u>	Sine deterror dempensation			
2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  NONE  NONE  NONE  NONE  NONE  NONE  NONE  NONE  NONE				31,200.				
"NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  NONE								
"NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  NONE			_					
"NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  NONE  NONE  NONE  NONE  NONE  NONE  NONE  NONE  NONE								
"NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  NONE								
"NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  NONE								
"NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  NONE								
(a) Name and address of each employee paid more than \$50,000  NONE			es (other than thos	e included on lin	e 1 - see instructio	ns). If no	one, (	enter
NONE		NOINE.	(h) Tele and average	· <b></b> -	(d) Contributions to			
NONE NONE NONE  NONE NONE  Total number of other employees paid over \$50,000	(a)	Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation				
Total number of other employees paid over \$50,000 NONE			devoted to position		compensation			
Total number of other employees paid over \$50,000 NONE	NONT		<u> </u>	MONTE	27027	37	0.1T	
	NONE	<u> </u>		NONE	NONE	N	ONE	
		<del></del>						
				<del></del>				
			<del>-</del>					
		<del></del>						
	Total	number of other employees paid over \$50 000			·	N	ONE	
		2. 2. 2. 2						(2018)

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Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employand Contractors (continued)	
3 Five h	ighest-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		NONE
NONE		
·		
<del></del>		
	er of others receiving over \$50,000 for professional services	NONE
Part IX-A	Summary of Direct Charitable Activities	
List the four organization	ndation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of sand other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE		
<del></del>		
2		
3		
<b>*</b>		
D- 4 IV D	Common of Program Polated Investments (see instructions)	
Part IX-B	Summary of Program-Related Investments (see instructions) two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
2		
All other pro	gram-related investments. See instructions	
3 NONE		
Total. Add li	nes 1 through 3	

Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign foundations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
_			,713,952.
	Average monthly fair market value of securities	1b	52,447.
	Average of monthly cash balances	1c	NONE
	Fair market value of all other assets (see instructions)		,766,399.
	Total (add lines 1a, b, and c)	<u>'</u>	, 100, 377.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation)	2	NONE
2	Acquisition indebtedness applicable to line 1 assets		,766,399.
3	Subtract line 2 from line 1d	3 /	, 100, 399.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		116 406
	instructions)	4	116,496.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4		,649,903.
_6_	Minimum investment return. Enter 5% of line 5	6	<u>382,495.</u>
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part )	ndations	
1	Minimum investment return from Part X, line 6	1	382,495.
2a	Tax on investment income for 2018 from Part VI, line 5 2a 1,467		
	Income tax for 2018. (This does not include the tax from Part VI.)	1	
	Add lines 2a and 2b	2c	1,467.
C	Distributable amount before adjustments Subtract line 2c from line 1	<del></del>	381,028.
3 4	Recoveries of amounts treated as qualifying distributions	<u> </u>	NONE
	· · ·	5	381,028.
5	Add lines 3 and 4	6	NONE
6	Deduction from distributable amount (see instructions)	<del>                                     </del>	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	7	381,028.
	line 1	1. / 1	361,020.
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.	nin www	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	440,499.
b	Program-related investments - total from Part IX-B		
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
Ь	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	440,499.
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	1,467.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	<del></del>	439,032.
J	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	qualifies for the section 4940(e) reduction of tax in those years.		

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Part XIII Undistributed Income (see instruc	ctions)			
1 Distributable amount for 2018 from Part XI,	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
line 7				381,028.
2 Undistributed income, if any, as of the end of 2018				<b>1</b>
a Enter amount for 2017 only		270375	NONE	
<b>b</b> Total for prior years 20,20		NONE		
3 Excess distributions carryover, if any, to 2018				†
a From 2013 NONE				1
b From 2014 NONE		j	j	,
c From 2015 NONE				ſ
d From 2016				į
e From 2017 130, 745.	141,820.			
f Total of lines 3a through e	141,020,			
4 Qualifying distributions for 2018 from Part XII, line 4: ▶ \$ 440,499.				
			NONE	
a Applied to 2017, but not more than line 2a			NONE	
b Applied to undistributed income of prior years (Election required - see instructions)		NONE		
c Treated as distributions out of corpus (Election	NONE			i
required - see instructions)	NONB			381,028.
d Applied to 2018 distributable amount	59,471.			301,020.
e Remaining amount distributed out of corpus  5 Excess distributions carryover applied to 2018				<del></del>
(If an amount appears in column (d), the same amount must be shown in column (a))	NONB			NONE
6 Enter the net total of each column as indicated below:				,
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	201,291.			
b Prior years' undistributed income Subtract				
line 4b from line 2b.		NONE		I
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)		NONE		<u> </u>
tax has been previously assessed		NONE		
d Subtract line 6c from line 6b Taxable		NONE		
e Undistributed income for 2017 Subtract line		NONE		
4a from line 2a. Taxable amount - see			NONE	4
instructions			NONE	<u></u>
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				NONE
7 Amounts treated as distributions out of corpus	Ĭ		1	i
to satisfy requirements imposed by section				
170(b)(1)(F) or 4942(g)(3) (Election may be				1
required - see instructions)	NONE			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions)	NONE			<u></u>
9 Excess distributions carryover to 2019.	1			1
Subtract lines 7 and 8 from line 6a	201,291.			
10 Analysis of line 9				ļ.
a Excess from 2014 NONE	ļ			
b Excess from 2015 NONE				}
c Excess from 2016 11,075.				ı
d Excess from 2017 130, 745.	ļ			1
e Excess from 2018 59, 471.				orm <b>990-PF</b> (2018)

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Pai	t XIV Private Op	erating Foundations	(see instructions a	nd Part VII-A, questio	on 9)	NOT APPLICABLE
	If the foundation has					
	foundation, and the ruling	g is effective for 2018, en	ter the date of the ruling		▶	
ь	Check box to indicate	whether the foundation	is a private operating	foundation described in	section 4942(j	)(3) or 4942(j)(5)
	Enter the lesser of the ad-	Tax year		Prior 3 years		
	justed net income from Part	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	I or the minimum investment		(6) 2017	(0) 2010	(4) 2010	/
	return from Part X for each					
	year listed					· · · · · · · · · · · · · · · · · · ·
þ	85% of line 2a	<u> </u>				
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					
е	Qualifying distributions made					
	directly for active conduct of					
	exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
9	"Assets" alternative test - enter					
_	(1) Value of all assets					
	(2) Value of assets qualifying	<i>A</i>				
	under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test-					
_	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed .	· <del>-</del>				
С	"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 sup-					
	port from an exempt organization					
	(4) Gross investment income .					
Par	t XV Supplemer	ntary Information (	Complete this part	only if the founda	tion had \$5,000 o	r more in assets at
	any time d	uring the year - see	instructions.)	-		
1	Information Regarding	Foundation Manager	rs:	·		
а	List any managers of	the foundation who h	nave contributed mor	e than 2% of the tota	I contributions receiv	ved by the foundation
	before the close of any	tax year (but only if th	ey have contributed r	nore than \$5,000) (Se	ee section 507(d)(2))	
	NONE					
	List any managers of	the foundation who	own 10% or more o	f the stock of a corpo	oration (or an equal)	v large portion of the
_	ownership of a partner					, , ,
	NONE			•		
	NONE					
-	Information Regarding	Contribution Grant	Gift Loan Scholarshi	n etc Programs:		
2	<u> </u>					
	Check here ▶ if 1	the foundation only	makes contributions	to preselected chari	table organizations	and does not accept
	unsolicited requests f			ints, etc., to individua	is or organizations u	nder other conditions,
	complete items 2a, b,	·				
а	The name, address, an	d telephone number o	r email address of the	person to whom appli	ications should be add	ressea:
	SEE STATEMENT					
b	The form in which app	lications should be sub	omitted and information	on and materials they s	should include:	
	SEE ATTACHED S'	TATEMENT FOR LI	NE 2			
C	Any submission deadli	nes:				-
	SEE ATTACHED S'	TATEMENT FOR LI	NE 2			
			-			
d	Any restrictions or li	mitations on awards	such as by geogra	aphical areas, charita	ble fields, kınds of	institutions, or other
_	factors.		, 5 - 5 -			•
	SEE ATTACHED C	TATEMENT FOR LI	NE 2			
JSA	OND WITHCHEN D	TITUIDIAT LOK III				Form <b>990-PF</b> (2018)

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Part XV Supplementary Information	continued)			
3 Grants and Contributions Paid Duri	ng the Year or App	roved for	Future Payment	<del></del>
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	show any relationship to	status of	Purpose of grant or contribution	Amount
Name and address (home or business)  a Paid during the year	or substantial contributor	recipient	0011110111011	
a raid during the year				
SEE ATTACHED LISTING				
	NONE	PUBLIC	GENERAL	432,350.
	Ì			
	1			
		1	▶ 3a	432,350.
b Approved for future payment	T	<del></del>		
2				
		ł		
		,		
			}	
	1			
Total			▶ 3b	

Part XVI-A Analysis of Income-Prod	ucing Acti	ivities			
Enter gross amounts unless otherwise indicated	Unrela	ated business income	Excluded by	y section 512, 513, or 514	(e)
	(a)	(b)	(c)	(d)	Related or exempt function income
1 Program service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a					<del></del>
b			+		
c			<u> </u>		<del></del>
d					<del></del>
e	-		<del></del>		<del> </del>
g Fees and contracts from government agencies					
			<del> </del>		· · · · · · · · · · · · · · · · · · ·
2 Membership dues and assessments	1		14	3.	
4 Dividends and interest from securities			14	195,798.	
5 Net rental income or (loss) from real estate					l
a Debt-financed property					
<b>b</b> Not debt-financed property · · · · · ·					
6 Net rental income or (loss) from personal property					
7 Other investment income	1		<u> </u>		
8 Gain or (loss) from sales of assets other than inventory	<b></b>		18	-11,425.	
9 Net income or (loss) from special events · · ·			<u> </u>		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a			1.4	252	<del>.</del>
b REIMBURSEMENT FROM			14	252. -204.	
c DEFFERED INCOME			14	-204.	
d					
e			+	184,424.	
13 Total Add line 12, columns (b), (d), and (e)					184,424.
(See worksheet in line 13 instructions to verify calci					
Explain below how each activit accomplishment of the foundation					
		NOT APPLICABL	ıΕ		
		-			
				<del> </del>	
	***				
	-	<del> </del>		<del></del>	
				· · · · · · · · · · · · · · · · · ·	<del></del>

orm 990-P	F (2018)				3	8-2331	.693			Pa	ge <b>1</b>
Part XV	Information R Exempt Organ		nsfers to and T	ransactio	ns and	Relatio	nships	With No	ncharit	able	
in s	the organization direct section 501(c) (other	ly or indirectly e	·							Yes	No
-	anizations?				a!£.						
	nsfers from the reporting Cash								10/11		<u> </u>
	Other assets								1a(1)		X
• •	er transactions								10(2)		
	Sales of assets to a non-	charitable exemi	nt organization						1b(1)		X
	Purchases of assets from		•								Х
	Rental of facilities, equip										X
	Reimbursement arrange										Х
	Loans or loan guarantee										Х
	Performance of services										Х
	ring of facilities, equipm										Х
	e answer to any of th									fair m	arke
	e of the goods, other										
valu	e in any transaction or	sharing arrange	ement, show in co	lumn (d) th	e value o	f the goo	ds, other	r assets, o	r service	s rece	ivec
(a) Line no	(b) Amount involved	(c) Name of no	oncharitable exempt orga	inization	(d) Descr	iption of tra	nsfers, trans	sactions, and s	sharing arra	ngeme	nts
							<del></del>				
	ļ	l									
	ļ										
<del>-</del>	<del></del>										
			····								
	<del> </del>		<del></del>								
	···		<del></del>								
	ne foundation directly oribed in section 501(c)	•						nizations	Y	es 📝	 ] Nc
<b>b</b> If "Y	es," complete the follow	ving schedule.									
	(a) Name of organization	n	(b) Type of o	ganization			(c) Descr	iption of relat	ionship		
<del>-</del>	·- <del></del>			<u></u>							
						<del></del>	<del></del>				
<del>-</del>							<del></del>				
	nder penalties of perjury, I decla	ro that I have ave	ad this seture includes a		adulas and a	tatements	d to the ba	et of my bac	lodge and b	aliaf :	10.15
	rrect, and complete Declaration of						. 10 the De	a of my know	yo and C	ener, il	15 170

- 1				
	Print/Type preparer's name	Preparer's signature	Date Check	ıf PTIN
Paid	ROBERT P. JONES	Prolow none	- 11/04/2019 self-em	ployed P01791647
repare	Firm's name THE NORTHERN	TRUST COMPANY	Firm's EIN	> 36-1561860
Jse Or	Firm's address ► P.O. BOX 803	878		<del> </del>
	CHICAGO, IL	60680	Phone no	<u>312-63</u> 0-6000

Form 990-PF (2018)

Signature of officer or trustee

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

Go to www.irs.gov/Form990for the latest information.

OMB No 1545-0047

2018

**Employer identification number** 

38-2331693 KELLER FOUNDATION Organization type (check one): Section: Filers of: 501(c)( ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1 Complete Parts I and II 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, charitable, 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. 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, 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 Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

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

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

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
KELLER FOUNDATION

Employer identification number 38-2331693

Part I	Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1_	PARAGON DIE & ENGINEERING  5225 33RD ST.SE  GRAND RAPIDS, MI 49512	\$ 35,795.	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 Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
			Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			

23-48833

SECURITIES	
FROM	1
INTEREST	
AND	
DIVIDENDS	
1	١
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PART	
990PF,	
FORM	

NET INVESTMENT INCOME	1 1 1 1	195,798.	195,798.
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1 1	195,798.	195,798.
			TOTAL
DESCRIPTION	* 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	DIVIDENDS AND INTEREST	

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STATEMENT

FORM 990PF, PART I - OTHER INCOME

REVENUE
AND
EXPENSES
DESCRIPTION
PER BOOKS
----DEFFERED INCOME
REIMBURSEMENT FROM CONTINGENCY ACCT
TOTALS

REVENUE
AND
EXPENSES
PER BOOKS
----TOTALS
48.

FEES
ACCOUNTING
i
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PART I

CHARITABLE PURPOSES	1,250.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	1,250.
REVENUE AND EXPENSES PER BOOKS	2,500.
	TOTALS
DESCRIPTION	TAX PREP FEES

STATEMENT

23-48833

	$egin{array}{c} egin{array}{c} \egin{array}{c} \egin{array}{c} \egin{array}{c} \egin{array}{c} \egin{array}{c} \egin{array}$	INCOME	; ; ; ;	18,370.	18,370.	
REVENUE	AND EXPENSES	PER BOOKS	1 1 1 1 1 1 1		18,370.	
		DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NORTHERN TRUST ADVISORY FEES	TOTALS	

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STATEMENT

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38-2331693

23-48833

TAXES	11 11 11 11 11
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NET INVESTMENT INCOME	1,398.	1,398.
REVENUE AND EXPENSES PER BOOKS	7,256. 7,800. 1,398.	16,547.
DESCRIPTION	2017 BALANCE DUE TAX 2018 ESTIMATED TAXES FOREIGN TAXES ADDITIONAL TAX PAYMENTS	TOTALS

FOUNDATION	
KELLER	

38-2331693

- OTHER EXPENSES FORM 990PF, PART I

REVENUE AND DESCRIPTION

PER BOOKS EXPENSES

20.

MICHIGAN ANNUAL REPORT FILING COUNSIL OF MICHIGAN FOUNDATION WORD PRESS HOSTING

2,000.

2,520.

TOTALS

2,520.

2,000.

20.

CHARITABLE PURPOSES

7

STATEMENT

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23-48833

25

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STATEMENT

38-2331693

FORM 990PF, PART II - CORPORATE STOCK 

KELLER FOUNDATION

DESCRIPTION 

SEE ATTACHED SCHEDULE

ENDING BOOK VALUE

ENDING FMV 1 1

5,986,029. 5,233,274.

5,986,029.

5,233,274.

TOTALS

26

ARP474 549D 11/04/2019 09:08:24

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38-2331693

FORM 990PF, PART II - CORPORATE BONDS

KELLER FOUNDATION

DESCRIPTION

SEE ATTACHED SCHEDULE

ENDING BOOK VALUE

ENDING FMV

1,680,434.

1,771,094. -------1,771,094.

1,680,434.

TOTALS

27

ARP474 549D 11/04/2019 09:08:24

38-2331693

FORM 990PF, PART II - OTHER INVESTMENTS

KELLER FOUNDATION

DESCRIPTION

SEE ATTACHED SCHEDULE

COST/ FMV CORF

U

TOTALS

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

KATHLEEN MUIR LAIDLAW

ADDRESS:

2764 PIONEER CLUB DRIVE SE GRAND RAPIDS, MI 49506

TITLE:

CHAIRPERSON

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

OFFICER NAME:

LORISSA K MACALLISTER

ADDRESS:

7291 KILMER STREET

GRAND RAPIDS, MI 49512

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

OFFICER NAME:

WESLEY MACALLISTER

ADDRESS:

7291 KILMER STREET

GRAND RAPIDS, MI 49512

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

OFFICER NAME:

LEAH ANN MUIR

ADDRESS:

151 LAFAYETTE NE

GRAND RAPIDS, MI 49503

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

CATHERINE MUIR

ADDRESS:

2018 SAN LU RAE SE

GRAND RAPIDS, MI 49506

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

OFFICER NAME:

DAVID F MUIR

ADDRESS:

151 LAFAYETTE NE

GRAND RAPIDS, MI 49503

TITLE:

TREASURER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

OFFICER NAME:

ELIZABETH M MUIR

ADDRESS:

22 SPRING GROVE AVENUE

SAN RAFAEL, CA 04901

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

OFFICER NAME:

SUSAN T.K. WHITMAN

ADDRESS:

1450 JOHNNIE BROOK RD

RICHMOND, VT 05477

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

LARS WHITMAN

ADDRESS:

1450 JOHNNIE BROOK RD.

RICHMOND, VT 05477

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

OFFICER NAME:

CHRISTINA KELLER

ADDRESS:

8560 VERGENNES ST. SE

ADA, MI 49301

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

OFFICER NAME:

ZELENE WILKINS

ADDRESS:

806 BARDEEN CT

OTSEGO, MI 49078

TITLE:

EXECUTIVE DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 20

COMPENSATION ..... 31,200.

OFFICER NAME:

WILLIAM M. MUIR

ADDRESS:

2018 SAN LU RAE SE

GRAND RAPIDS, MI 49506

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

ANDREW J. KELLER

ADDRESS:

8560 VERGENNES ST. SE

ADA, MI 49301

TITLE:

VICE CHAIR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

OFFICER NAME:

FREDERICK P. KELLER

ADDRESS:

5505 BANCROFT

ALTO, MI 49302

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

OFFICER NAME:

JIM MUIR

ADDRESS:

2018 SAN LU RAE SE

GRAND RAPIDS, MI 49506

TITLE:

JUNIOR TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

OFFICER NAME:

RACHAEL MUIR

ADDRESS:

2018 SAN LU RAE SE

GRAND RAPIDS, MI 49506

TITLE:

JUNIOR TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

TOTAL COMPENSATION:

31,200.

KELLER FOUNDATION FORM 990PF, PART XV - LINES 2a - 2d 

RECIPIENT NAME:

ZELENE WILKINS

ADDRESS:

5225 33RD ST SE.

GRAND RAPIDS, MI 49512

FORM, INFORMATION AND MATERIALS:

GRAND APPLICATION AVAILABLE ON FOUNDATION

WEBSITE AT WWW.KELLERFOUNDATION.ORG.

APPLICANTS FILL OUT FORM ONLINE AND SUBMIT 501(C) 3, LIST OF TRUSTEE,

SUBMISSION DEADLINES:

BY MAY 15TH

RESTRICTIONS OR LIMITATIONS ON AWARDS:

NONE