C Adjusted net income (if negative, enter -0-)

823501 12-11-18

LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-PF

Return of Private Foundation

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

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

OCT 25. 2018 For calendar year 2018 or tax year beginning and ending Name of foundation A Employer identification number 83-2318716 AINSWORTH FOUNDATION Number and street (or P O box number if mail is not delivered to street address) B Telephone number 814-459-2800 16045 CRAIG ROAD City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here SAEGERTOWN, PA 16433 X Initial return Initial return of a former public charity D 1. Foreign organizations, check here G Check all that apply: Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here Other (specify) 20, 477, 001. (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (c) Adjusted net (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes expenses per books income (cash basis only) 光谱医疗 细 经增加 TO THE WAY TO SHOW THE 20,000,000. 种种的证明的 Contributions, gifts, grants, etc., received いいに発える。 Check I if the foundation is not required to attach Sch. B **可以可以表现的** STATEMENT 14 149,261. 149,261 Dividends and interest from securities 的研究是他们的一种 5a Gross rents PART TO YEAR WELL 是是是一种的 AND THE PROPERTY OF THE PARTY O b Net rental income or (toss) 1,186. 本学 地名于李林 证的现在分词形式 SEASON CONTRACTOR 68 Net gain or (loss) from sale of assets not on line 10 **常规则是否的规则 1483/4817个人医数规** b Gross sales price for all assets on line 6a 826,000. REMITS BUILD Y ,是是我们的特别的 民学可以完全国政治的政 1,186. Capital gain net income (from Part IV, line 2) . 公司是中国的政策的政策的 产的人工发生18.4965 WHEN THE WORLD N/A Net short-term capital gain STORE OF THE STORE 可能的证明的 ACTOR TO THE PROPERTY AND THE PROPERTY A Income modifications 10a and allowances CONTRACTOR OF THE PROPERTY OF THE CONTRACT OF MASC MANAGEMENT "平面部"的 有证的 SERVICE SAFETHER 中人类的大型人类的人种 1.对现在为4480年1925年 b Less Cost of goods sold THE REPORT OF THE PARTY. nasys, katyrkij c Gross profit or (loss) 证明的知识的知识 11 Other income TO SECURE TO THE SECOND 20,150,447 150.447. 0. Total. Add lines 1 through 11 Ō. o. 0. 0. Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 794 1,794 0. 0. STMT 2 16a Legal fees b Accounting fees 7,359 7,359 0. 0. STMT 3 c Other professional fees 17 Interest 18 Taxes PROPERTY OF THE PARTY Depreciation and depletion Occupancy
Travel, conferences, and meeting 20 P 21 Printing-and publications 22 23 Other experises Total operating and administrate 0. 9,153 9,153 expenses. Add ines 13 torough 23 NAMES ASSOCIATION ASSOCIATION 0. ributions, gifts, grants paid Total expenses and disbursements. 9,153. 9,153 0 0. Subtract hoe 28 from line 12: 20,141,294 8 Excess of revenue over expenses and disbursements 141,294. M. P. MICHELLE MAN b Net investment income (if negative, enter -0-) HILPERING TANKE BENEFALLER O. THE PERSON PROPERTY

Form 990-PF (2018)

P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	┢	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	4.		-+	(a) book value	(b) book value	(0) / 2.11 // 1.12
		Cash - non-interest-bearing	┢			
		Savings and temporary cash investments	ŀ			1
		Accounts receivable				
		Less allowance for doubtful accounts	\rightarrow			
	4	Pledges receivable -				
		Less: allowance for doubtful accounts				<u> </u>
		Grants receivable	-			
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons	-			
	7	Other notes and loans receivable				
		Less allowance for doubtful accounts				
ţ	8	Inventories for sale or use	-			
Assets		Prepaid expenses and deferred charges	.		45 040 544	15 500 405
ä	10a	Investments - U S and state government obligations STMT	4	0.	15,318,511.	15,528,407.
	b	Investments - corporate stock	_			- 100 011
	C	Investments - corporate bonds STMT	5	0.	3,384,358.	3,488,311.
	11	Investments - land, buildings, and equipment basis		<u></u> .		
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other STMT	6	0.	1,438,425.	1,460,283.
	14	Land, buildings, and equipment, basis ▶		·		
		Less accumulated depreciation				
	15	Other assets (describe	\			
	16	Total assets (to be completed by all filers - see the		ļ		
		instructions. Also, see page 1, item I)		0.	20,141,294.	20,477,001.
	17	Accounts payable and accrued expenses				
	18	Grants payable	Į			
v	19	Deferred revenue	Ĺ			
iabilıties	20	Loans from officers, directors, trustees, and other disqualified persons	[
abi	21	Mortgages and other notes payable				
ڌ	22	Other liabilities (describe)[
		·				
	23	Total liabilities (add lines 17 through 22)		0.	0.	
		Foundations that follow SFAS 117, check here				
		and complete lines 24 through 26, and lines 30 and 31	ļ			
es	24	Unrestricted				
SE.	25	Temporarily restricted				
Balances	26	Permanently restricted	Ī			
ğ		Foundations that do not follow SFAS 117, check here	$\overline{\mathbf{x}}$			
Ē		and complete lines 27 through 31.	_			
þ	27	Capital stock, trust principal, or current funds		0.	0.	1
Net Assets or Fund	28	Paid-in or capital surplus, or land, bldg., and equipment fund		0.	0.	
Ass	30	Rotained parnings, accumulated income, endowment, or other fun	do l	0.	20,141,294.	
13	30	Total net assets or fund balances		0.	20,141,294.	
P	17		1			
	3	Total liabilities and net assets/fund balances		0.	20,141,294.	
\equiv	-		nd Ba	longos		
LP	art	Analysis of Changes in Net Assets of Ful	iiu Da	liances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		it agree with end-of-year figure reported on prior year's return)	•		1	0.
2	•	amount from Part I, line 27a			2	20,141,294.
		r increases not included in line 2 (itemize)			3	0.
		lines 1, 2, and 3			4	20,141,294.
		eases not included in line 2 (itemize)			5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - P	art II, co	olumn (b), line 30	6	20,141,294.
_						Form 990-PF (2018)

_		WORTH FOUNDATIO		Ta · ·			83	<u>3-231</u>	8716	Page 3
<u> </u> F	·	nd Losses for Tax on In			<u> </u>	low acquired	(a) Data =	ngurad	(d) Do	ta cold
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.) (b) How acquired P - Purchase D - Donation						(c) Date a (mo., da		(d) Dai (mo, d		
1a	SHORT TERM CAPIT	TAL GAIN				P	10/25	/18	06/3	0/19
b)									
_					-					
			-		-		<u> </u>			
e		(f) Depreciation allowed	(a) Co	st or other basis	┷┪		(h) Ga	ın or (loss	:)	
	(e) Gross sales price	(or allowable)		expense of sale				(f) minus		
_8	826,000.			824,81	4.				1	,186.
b			ļ							
_			ļ							
_0		-	1	-			.		 -	
_6	Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69.			(I) Gains (Co	ol. (h) gair	minus	
_		(j) Adjusted basis	Τ'	xcess of col. (i)		(còl (k), but n	ot less tha from col.	n -0-) or	
_	(i) FMV as of 12/31/69	as of 12/31/69	over	col (j), if any			LUSSES (ii biii cui.	. ,,	
8	1								1	,186.
								_		
			 			<u>_</u>				
-5										
		∫ If gain, also ente	er in Part I, line	7	٦					
2	Capital gain net income or (net capi	tal loss) { If gain, also enter-	D- ın Part İ, line	7	<i>]</i> [2			1	<u>,186.</u>
3	Not short-term capital gain or (loss)		nd (6) [.]							
	If gain, also enter in Part I, line 8, co	olumn (c).			<u>}</u>	,			1	,186.
П	If (loss), enter -0- in Part I, line 8 Part Va Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	Inve	stment In	come			, 1001
_	or optional use by domestic private f								N/Λ	
16	section 4940(d)(2) applies, leave this	anart blank								
									—	<u> </u>
	as the foundation liable for the section				lods				Yos	∟ No
<u>"</u>	"Yos," the foundation deesn't qualify Enter the appropriate amount in ea				ntries.					
÷	(a) Base period years	(b)			(c)			Dietri	(d)	•
	Base period years Calendar year (or tax year beginning		stributions	Net value of no			ets ,		bùtión ratio vided by col	. (c))
	2017									
	2016									
_	2015	.		 			-			
-	2014 2013			 			_		-	
_				J						
2	Total of line 1, column (d)						2			
3	Average distribution ratio for the 5-		on line 2 by 5	0, or by the numb	er of y	/ears				
	the foundation has been in existence	e if less than 5 years					3			
	Enter the net value of noncharitable	upp access for 2019 from Part V	line 5				4			
4	enter the net value of nonchantable	-use assets for 20 to from Fart A,	, IIII S							
5	Multiply line 4 by line 3						5			
	,, ,									-
6	Enter 1% of net investment income	(1% of Part I, line 27b)					6			
7	Add lines 5 and 6						7			
•	. 105 IIII00 O WIIG O							-		
8	Enter qualifying distributions from	•					8			
	If line 8 is equal to or greater than I See the Part VI instructions.	ine 7, check the box in Part VI, lin	e 1b, and com	plete that part usir	ng a 19	% tax rate				

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Form **990-PF** (2018)

	990-PF (2018) AINSWORTH FOUNDATION TVI Excise Tax Based on Investment Income (Section 4940(a)	1 4940(b), 494()(e), or 49	83-231 48 - see	8716		age 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter) 1				,
			,			72 ,	·
	Date of ruling or determination letter: (attach copy of letter if necess Domestic foundations that meet the section 4940(e) requirements in Part V, check here		' \	1		2,82	26.
		and enter 170					
	of Part I, line 27b All other domostic foundations entor 2% of lino 27b. Exempt foreign organizations, enter 1% of	Part Lline 12 col /h	, J		<i>.</i>	.,	
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others		'''	2			0.
	Add lines 1 and 2	5, 01107 0)		3		2,82	26.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, other	s enter -0-)		4			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5, 51167 5 7		5		2,82	26.
	Credits/Payments			,	7		1
	· 1	6a	0.	- 1			ł
	· ·	6b	0.	Ì			}
	· · · · · · · · · · · · · · · · · · ·	6c	0.				Ì
	Backup withholding erroneously withheld	6d	0.				
	Total credits and payments. Add lines 6a through 6d			7			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	ed		8			92.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		•	9		2,91	L8.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		•	10			
11	Enter the amount of line 10 to be Credited to 2019 estimated tax	R	efunded 🕨	11			
Pa	rt VII-A Statements Regarding Activities					1	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation	on or did it participat	e or intervene	ın		Yes	No
	any political campaign?				1a	 -∤	<u>X</u>
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes			tion	1b		<u>x</u>
	If the answer is "Yes" to ${f 1a}$ or ${f 1b}$, attach a detailed description of the activities and copies of a	iny materials publishe	d or			l	1
	distributed by the foundation in connection with the activities					—	
	Did the foundation file Form 1120-POL for this year?				1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		^			į	
	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright		0.				1
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure	e tax imposed on fou	ndation				J
	managers. ▶ \$						X
2	Has the foundation engaged in any activities that have not previously been reported to the INS?	,			2		 -
	If "Yes," attach a detailed description of the activities.	rumant artiales of in	nornaration a			^	j
3	Has the foundation made any changes, not previously reported to the IRS, in its governing inst	rument, articles of in-	corporation, or		3		X
4-	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				4a		<u>x</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year?			N/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
3	If "Yes," attach the statement required by General Instruction T				1 1	× .	·]
R	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eithe	ır.			1	165	-d
Ū	By language in the governing instrument, or	•			18 4	3	
	 By state legislation that effectively amends the governing instrument so that no mandatory d 	rections that conflict	with the state	law	54	1.	<u> </u>
	remain in the governing instrument?				6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete	e Part II, col. (c), and	Part XV		7	Х	
•		. , , ,				27.37	W . 1
8a	Enter the states to which the foundation reports or with which it is registered. See instructions	•					
	PA						
Ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attor	rney General (or desi	gnate)	-			\$ 10 m
	of each state as required by General Instruction G? If "No," attach explanation				8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section	on 4942(j)(3) or 4942	2(j)(5) for cale	ndar	3 %35 7 % 2 % 2 %	***	7 لسنت
	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete	ete Part XIV			9		X Z
10	Did any porcons become substantial contributors during the tax year? History attach a schedule to	sung then names and ad	uresses (<u>стмт 7</u>		X	
					Form 990)-PF	(2018)

Pa	art 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> X</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>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► THE FOUNDATION Telephone no ► 814-45	$\frac{9-28}{4000}$	300	
	Located at ▶ 16045 CRAIG ROAD, SAEGERTOWN, PA ZIP+4 ▶16	433		$\overline{}$
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		, ▶	Ш
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	NI.
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	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			1
D	foreign country ► art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
Pè			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		163	140
18	a 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			1
				ĺ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disgualified person? Yes X No			1
	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 componention to, or pay or roimburse the expenses of, a disqualified person? Yes X No		,	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	if the 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.) If any answer is "Yos" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	•		"
•	before the first day of the tax year beginning in 2018?	10		X
9	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))	1		'
,	a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6c, Part XIII) for tax year(s) beginning			,
	before 2018? Yes X No			
	If "Yes," list the years ,,,,,			} }
1	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			4
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			<u> </u>
	statement - see instructions.) N/A	2b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>		1	1
34	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		'	
	during the year?			
ı	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	1		1
	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 foundation had excess business holdings in 2018.) N/A	3b		<u> </u>
41	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
_	had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b	<u>L</u>	X
	Fo	rm 99)-PF	(2018)

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	(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances
_					
S	SEE STATEMENT 8		0.	0.	0.
		4			
_					
_		-			
_		+			
2	Compensation of five highest-paid employees (other than those inc	luded on line 1). 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	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
_	NONE				
_			 	 	
_		_			
_					
_					-
		_			
_					
		I	1	1	Į.

Total number of other employees paid over \$50,000

Part VIII : Information About Officers, Directors, Trustees, Foundation		2318/16 Page /
Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(2) 1) po 0.000	(4,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	1	
		}
		
	╡	
		<u> </u>
_]	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	· · · · · · · · · · · · · · · · · · ·	<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist		Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produ	iccd, ctc.	LADEIISES
1N/A		
2		·
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on I	unes 1 and 2	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
	- -	
Total, Add lines 1 through 3	>	0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or hold for use) directly in carrying out charitable, etc., purposes: 15,895,124. 1a a Average monthly fair market value of securities 1b b Average of monthly cash balances 0. c Fair market value of all other assets 1c 15,895, 124. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 895. 3 Subtract line 2 from line 1d 238,427. Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 15,656,697. Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD 534,050. 6 [Part/XIII Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here 🕨 🦳 and do not complete this part) 534,050. Minimum investment return from Part X, line 6 2,826. 2a Tax on investment income for 2018 from Part VI, line 5 2a b Income tax for 2018 (This does not include the tax from Part VI) 2с c Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 224 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 224. Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1. [Part:XII] Qualifying Distributions (see instructions) 1 Amounto paid (including administrative expenses) to accomplish charitable, etc., purposes: 0. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 0. 1b b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or hold for use) directly in carrying out charitable, etc., purposes 2 3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3a 3Ь b Cash distribution test (attach the required schedule) 0. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 0. income Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form 990-PF (2018)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				531,224.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2018.				
a From 2013				
b From 2014				ĺ
c From 2015				
d From 2016				
e From 2017				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from				
Part XII, line 4: ► \$ 0 .				
a Applied to 2017, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				1
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (e))	0.			0.
6 Enter the net total of each column as indicated below:				
8 Corpus Add lines 3f, 4c and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract	•			
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2017 Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				531,224.
7 Amounts treated as distributions out of				İ
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				į
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013	•			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019.	^			
Subtract lines 7 and 8 from line 6a	0.	· · · · · · · · · · · · · · · · · · ·		
Analysis of line 9		`	, ,	
a Excess from 2014			,	
b Excess from 2015			,	1
c Excess from 2016				
d Excess from 2017				
e Excess from 2018			<u> </u>	5 000 DE :

Form 990-PF (2018) AINSWOR Part XIV Private Operating F	TH FOUNDATI		10		18716 Page 10
<u> </u>			I-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for			.n. ocetica	4942(j)(3) or4	942(J)(5)
b Check box to indicate whether the found		ig roundation described	Prior 3 years	4942(I)(3) 01 [1	θ4 <u>Σ(J)(3)</u> /
2 a Enter the lesser of the adjusted net	Tax year (a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
income from Part I or the minimum	(4) 2010	(0) 2017	(0) 2010	(4) 2010	(c) rotar
investment return from Part X for			1		
each year listed					
b 85% of line 2a					
 Qualifying distributions from Part XII, line 4 for each year listed 					
d Amounts included in line 2c not					
used directly for active conduct of			_		
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.		ĺ			
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter. (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				,	
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed	<u> </u>	./			
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)			1		
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					İ
(4) Gross investment income					
Rart-XV Supplementary Info			if the foundation h	nad \$5,000 or mo	re in assets
1 Information Regarding Foundation					
List any managers of the foundation where year (but only if they have contributed in the state of the foundation where the state of t	no havo contributed more		ributions received by the f	oundation before the clos	e of any tax
NONE					
b List any managers of the foundation who other entity) of which the foundation ha			(or an equally large portion	of the ownership of a p	artnership or
NONE		-			
		0.1.1	 		
2 Information Regarding Contribut Check here ► X if the foundation of the foundation makes gifts, grants, etc	only makes contributions	to preselected charitable	organizations and does no		ests for funds. If
a The name, address, and telephone num					· · · · · · · · · · · · · · · · · · ·
b The form in which applications should t	pe submitted and informa	tion and materials they s	hould include		
c Any submission deadlines;		····	···		
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	, kınds of institutions, or o	ther factors:	•

Part XVI-A	Analysis of Income-Producing Activities
Fail Avia	Alialysis of illcollig-Floudchig Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)		
•	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt		
1 Program service revenue:	code	Amount	code	Amount	function income		
a							
b			<u> </u>				
С							
d							
е							
f							
g Fees and contracts from government agencies							
2 Membership dues and assessments							
3 Interest on savings and temporary cash							
investments	L						
4 Dividends and interest from securities			14	149,261.			
5 Net rental income or (loss) from real estate							
a Debt-financed property							
b Not debt-financed property							
6 Net rental income or (loss) from personal							
property							
7 Other investment income							
8 Gain or (loss) from sales of assets other			1				
than inventory			18	1,186.			
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue							
a			1				
b			1		, w.		
С							
d			1				
e			1				
12 Subtotal. Add columns (b), (d), and (e)		0.		150,447.	0.		
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		_		150,447.		
(See worksheet in line 13 instructions to verify calculations.)				_			
Part XVI-B Relationship of Activities to	o the Acco	molichment of Ev	emnt	Purnoses			
relationship of Activities to	o lile Acci	implishment of Ex	стірі	Turposes			
Line No. Explain below how each activity for which inco	me is reported	in column (e) of Part XVI-	A contri	buted importantly to the accom	plishment of		
▼ the foundation's exempt purposes (other than	by providing fu	nds for such purposes).					
	•						
				<u> </u>			
T							

ERIE, PA 16505-4935

Рап	XVII	Information Re Exempt Organi	•	sters to an	nd Ira	ansactions an	nd Kela	ationsnip	S WITH NO	ncnaritable		
1 D	d the ord	anization directly or indir		of the following	n with a	ov other organization	n describ	ed in section	n 501(c)		Yes	No
	_	section 501(c)(3) organ					,,, do 301,6		00 1(0)			
•		rom the reporting founds	•	-		-						
) Cash	rom the reporting rounds	Thom to a nonchartar	olo exempt or g	umeano					1a(1)		X
•) Other	25925								1a(2)		X
•	her trans										1	
_		of assets to a noncharital	ble exempt organizat	ION						1b(1)		Х
•	•	ases of assets from a nor	· =							1b(2)		Х
	•	of facilities, equipment,		Ü						1b(3)		X
•	•	ursement arrangements								1b(4)		X
•	•	or loan guarantees								1b(5)		Х
(6) Perfor	mance of services or me	mbership or fundrais	sing solicitation	ns					1b(6)		X
c SI	naring of	facilities, equipment, ma	uling lists, other asse	ts, or paid emp	ployees					1c		Х
d If	the answ	er to any of the above is	"Yes," complete the f	following sched	dule. Co	liumn (b) should alv	ways sho	w the fair ma	arket value of th	ie goods, other ass	sets,	
or	services	given by the reporting fo	oundation. If the four	ndation receive	d less t	han fair market valu	ie in any t	ransaction o	r sharing arrani	gement, show in		
cc	lumn (d	the value of the goods,							-			
(a) Line	no	(b) Amount involved	(c) Name of	noncharitable	exemp	t organization	(d)	Description o	of transfers, transac	ctions, and sharing arr	angemer	nts
				N/A								
							_					
	_		ļ									
_	_						<u> </u>					
	_		<u> </u>						·			
			 									
	+											
							+					
	+		 				+					
	+		 					~				
			+									
							1					
			†									
2a Is	the four	dation directly or indirec	tly affiliated with, or	related to, one	or mor	e tax-exempt organi	izations d	escribed				
ın	section	501(c) (other than sectio	on 501(c)(3)) or in se	ction 527?						Yes	X	. No
b lf	"Yes," co	mplete the following sch	iedule.									
		(a) Name of org	ganization		(b) Ty	pe of organization			c) Description o	f relationship		
		N/A					ļ					
							ļ					
					ļ	_	 					
	1.11-4		M - 4 (b		<u></u>		totomonto :	and to the best	t of my knowledge			
Sian		penalties of perjury, I declare t lief, it is true, correct, and com								May the IRS return with the		
Sign		05h.	•		1	1/18/22	, T	חדמקת	EXIO	shown below	/? See in:	str
	 	ature of officer or trustee	•			1/18/2) Date -	_ Z _ <u>F</u>	RESID	PMI	X Ye:	ـــا S	_ No
	Jugit	Print/Type preparer's na		Preparer's si			Date		Check I	ıf I PTIN		
		ε τχρο μιομαιοί ο Πα	u0	, reputer a at	.gu.ui (•	""		self- employed	""		
Paid		JEFFREY E	BEACH							P00354	019	
	arer	Firm's name ► MCG		R. BELL	L &	ASSOCIATI	ES 1	LLP	Firm's FIN ▶	25-10314		
•	Only	Thin Stiding F 1200	,,	, 2001	_ ~		,					
Firm's address ► 2402 W. 8TH STREET												

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/Form990 for the latest information.

OMB No 1545-0047

2018

Name of the organization	i i	Employer identification number
	AINSWORTH FOUNDATION	83-2318716
Organization type (chec		
Filers of:	Section:	٠.
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
, -	on is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special	I Rule See instructions
General Rule		
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totally one contributor. Complete Parts I and II. See instructions for determining a contribution of the contribution of	
Special Rules		
sections 509(a) any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supp (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 1 outor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the a EZ, line 1 Complete Parts I and II	16a, or 16b, and that received from
year, total conti	ution described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from the fibritions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or exclusively to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the	educational purposes, or for the
year, contributi is checked, ent purpose Don't	ntion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sections exclusively for religious, charitable, etc., purposes, but no such contributions totale er here the total contributions that were received during the year for an exclusively religionship exclusively religionship and the parts unless the General Rule applies to this organization because able, etc., contributions totaling \$5,000 or more during the year	ed more than \$1,000 If this box gious, charitable, etc ,
	n that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on	

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Employer identification number

AINSWORTH FOUNDATION

83-2318716

(Partill)	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	G. THOMAS LANG 358 WEST RIVERSIDE DRIVE TEQUESTA, FL 33469	\$ 5,000,000.	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
2	SEAN AND BETH LANG 7920 FLAGLER COURT WEST PALM BEACH, FL 33405	\$5,000,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	JAMES D LANG 2016 IRR FAMILY TRUST 330 SOUTH POPLAR AVENUE PIERRE, SD 57501	\$5,000,000.	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
4	RICHARD A LANG JR. IRR FAMILY TRUST 330 SOUTH POPLAR AVENUE PIERRE, SD 57501	\$ <u>5,000,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)

Employer identification number

AINSWORTH FOUNDATION

83-2318716

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			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			
		\$				

Name of organization

Employer identification number

OWENI	RTH FOUNDATION		83-2318716					
Part III	from any one contributor. Complete columns (a)	through (e) and the following line en	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the yeatry. For organizations					
	completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional s	haritable, etc., contributions of \$1,000 or	less for the year (Enter this info once)					
(a) No.	Ose duplicate copies of Fart III II additionals	pace is needed						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
_								
		(e) Transfer of gif	ft					
	T	.J.710 . A						
-	Transferee's name, address, ar	10 ZIP + 4	Relationship of transferor to transferee					
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
(a) No. from	(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held					
Part I	(5) 1 41 5000 0. 9.11	(0) 000 01 9	(0,000,000,000,000,000					
								
		(e) Transfer of gif	ft					
		.,						
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee					
			-					
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
-								
	(e) Transfer of gift							
	Transferee's name, address, ar	nd 7IP + 4	Relationship of transferor to transferee					
	Transferee 3 hame, address, and an 4-4							
1								
(a) Na			<u> </u>					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I								
	(e) Transfer of gift							
L	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee					
Γ			· · · · · · · · · · · · · · · · · · ·					
			·					
			·					

FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

lame(s)				Identifying N	umber
AINSWORTH	FOUNDATION			83-23	18716
(A)	(B)	(C)	(D)	(E)	(F)
*Date	Amount	Adjusted Balance Due	Number Days Balance Due	Daily Penalty Rate	Penalty
		-0-	W. S. S. S. S. S. S. S. S. S. S. S. S. S.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 Ag
02/15/19	942.	942.	28	.000164384	
03/15/19	942.	1,884.	92	.000164384	2
06/15/19	942.	2,826.	15	.000164384	
06/30/19	0.	2,826.	138	.000136986	5
				-	
			7		
					- , .,, .,
		,			
nalty Due (Sum of Co	olumn F).				9

^{*} Date of estimated tax payment, withholding credit date or installment due date.

FORM 990-PF D	IVIDENDS	AND INTER	EST	FROM SECUR	ITIES ST	PATEMENT 1
	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
HAWTHORN INTEREST	149,261.	,	0.	149,261.	149,261.	0.
TO PART I, LINE 4	149,261.		0.	149,261.	149,261.	0.
FORM 990-PF		LEGAL	FEE	is	Sī	гатемент 2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) ! INVEST- IT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL EXPENSES	_	1,794.	-	1,794.	0.	0.
TO FM 990-PF, PG 1, LN	16A	1,794.		1,794.	0.	0.
FORM 990-PF	PO	THER PROFES	SION	NAL FEES	S	TATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) TINVEST- NTINCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT EXPENSES		7,359.		7,359.	0.	0.
TO FORM 990-PF, PG 1,	LN 16C	7,359.		7,359.	0.	0.

FORM 990-PF U.S. AND STATE/O	CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT 4
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
US TREASURY BONDS AGENCY BONDS MUNICIPAL OBLIGATIONS	X X	x	3,239,568. 950,572. 11,128,371.	3,303,080. 964,520. 11,260,807.
TOTAL U.S. GOVERNMENT OBLIGATIONS		-	4,190,140.	4,267,600.
TOTAL STATE AND MUNICIPAL GOVERNMEN	NT OBLIG	SATIONS	11,128,371.	11,260,807.
TOTAL TO FORM 990-PF, PART II, LINE	E 10A	:	15,318,511.	15,528,407.
FORM 990-PF COR	RPORAȚE	BONDS		STATEMENT 5
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
CORPORATE BONDS		•	3,384,358.	3,488,311.
TOTAL TO FORM 990-PF, PART II, LINI	3,384,358.	3,488,311.		
FORM 990-PF OTHE	ER INVES	STMENTS		STATEMENT 6
DESCRIPTION		JATION THOD	BOOK VALUE	FAIR MARKET VALUE
OTHER INVESTMENTS	FM	īv	1,438,425.	1,460,283
TOTAL TO FORM 990-PF, PART II, LINI			1,438,425.	1,460,283.
		IV		

	ANTIAL CONTRIBUTORS I-A, LINE 10	STATEMENT 7
NAME OF CONTRIBUTOR	ADDRESS	
G. THOMAS LANG	358 WEST RIVERSIDE DRIVE TEQUESTA, FL 33469	
SEAN AND BETH LANG	7920 FLAGLER COURT WEST PALM BEACH, FL 33405	
JAMES D. LANG 2016 IRR FAMILY TRUST	330 SOUTH POPLAR AVENUE PIERRER, SD 57501	
RICHARD A LANG JR. 2016 IRR FAMILY TRUST	330 SOUTH POPLAR AVENUE PIERRER, SD 57501	

	IST OF OFFICERS, D ND FOUNDATION MANA		STAT	EMENT 8
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
JAMES D. LANG 16045 CRAIG ROAD SAEGERTOWN, PA 16433	PRESIDENT 1.00	0.	0.	0.
SEAN P. LANG 16045 CRAIG ROAD SAEGERTOWN, PA 16433	VICE PRESIDENT 1.00	0.	0.	0.
RICHARD D. MOYER 16045 CRAIG ROAD SAEGERTOWN, PA 16433	SECRETARY/TREA	0.	0.	0.
G. THOMAS LANG 16045 CRAIG ROAD SAEGERTOWN, PA 16433	DIRECTOR 1.00		0.	0.
RICHARD A. LANG 16045 CRAIG ROAD SAEGERTOWN, PA 16433	DIRECTOR 1.00	0.	0.	0.
. TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.