Form **990-PF** 

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

Department of the Treasury	► Do not enter social
Internal Revenue Service	► Go to www.irs.gov/

security numbers on this form as it may be made public. // //

OMB No 1545-0047 ' 🗪

For	caler	ndar year 2019 or tax year beginning	, 2019; a	nd endin	g		, 20 · I		
Name of foundation A Employer identification number									
THE	E HU	RLBERT FAMILY FOUNDATION			20-0134216				
		nd street (or PO box number if mail is not delivered to street address)	Roo	om/suite	B Telephone	number (see instruction	ns)		
240	) BE	RRY GLEN COURT		3 <b>-7</b> 758					
City	or tow	n, state or province, country, and ZIP or foreign postal code			C If exempt	tion application is pendir	o check here		
Alp	har	etta, GA 30022-1675				arrappinositori to portui	, g, 611661 11616		
G	Check	all that apply	n of a former public c	harity	D 1. Foreig	n organizations, check l	nere · · · ▶ 🗌		
		☐ Final return ☐ Amended r	eturn		2 Foreig	n organizations meeting	the 85% test		
		Address change Name char	nge	7 4		here and attach compu			
Н	Check	type of organization Section 501(c)(3) exempt private	foundation		E If provate	foundation status was te			
	Sectio		able private foundation	on I		07(b)(1)(A), check here			
I F	air m	arket value of all assets at J Accounting method	X Cash A	ccrual	F If the four	ndation is in a 60-month	termination		
e	end of	year (from Part II, col (c), Other (specify)			1	ction 507(b)(1)(B), checl			
li	ine 16	i) ▶ \$ 3,090,752 (Part I, column (d) must b	e on cash basis )				_		
Pa	art I						(d) Disbursements		
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		t investment	(c) Adjusted net	for charitable-		
		the amounts in column (a) (see instructions))	books	"	ncome	ıncome	purposes (cash basis only)		
	1	Contributions, gifts, grants, etc., received (attach schedule)					<del></del>		
•	2	Check ▶ 🗓 If the foundation is not required to attach Sch B							
	3	Interest on savings and temporary cash investments	27		27	,	1		
	4	Dividends and interest from securities	67,033		67,033				
	5a	Gross rents · · · · · · · · · · · · · · · · · · ·		1					
	ь	Net rental income or (loss)	1. 4	Canada - par	<u> </u>	THE PERSON	まったれ muse ままが		
a)	6a	Net gain or (loss) from sale of assets not on line 10 · · · ·			·····	<del></del>			
Ž	b	Gross sales price for all assets on line 6a	<del></del>	<del> </del>			<u></u>		
Revenue	7	Capital gain net income (from Part IV, line 2)							
Re	8	Net short-term capital gain							
	9	Income modifications							
	10a	Gross sales less returns and allowances				±			
	b	Less. Cost of goods sold · · · · · · ·	g, ac cg cap a			, ag all			
	С	Gross profit or (loss) (attach schedule)			´-, ,		Tar 1 2 24 3 4		
	11	Other income (attach schedule)		1					
	12	Total. Add lines 1 through 11	67,060	1	67,060	RECE	IVER		
	13	Compensation of officers, directors, trustees, etc · · · · ·			<u> </u>		VED		
penses	14	Other employee salaries and wages				ES JUL 0 1	08		
ü	15	Pension plans, employee benefits				101 201 01	2020 0		
ğ	16a	Legal fees (attach schedule)					38		
Ш	b	Accounting fees (attach schedule) · · · STM108 · · · ·	500			OGDEN	117		
ا کے:	С	Other professional fees (attach schedule)					, 01		
Ta	17	Interest							
įį	18	Taxes (attach schedule) (see instructions)							
늘	19	Depreciation (attach schedule) and depletion		1	-				
اق	20	Occupancy							
g	21	Travel, conferences, and meetings							
a	22	Printing and publications · · · · · · · · · · · · · · · · · · ·							
Operating and Administrative Ex	23	Other expenses (attach schedule)							
ati	24	Total operating and administrative expenses.							
je.		Add lines 13 through 23 · · · · · · · · · · · · · · · · · ·	500		o		0		
ō	25	Contributions, gifts, grants paid	154,000				154,000		
	26	Total expenses and disbursements. Add lines 24 and 25	154,500		0		154,000		
	27	Subtract line 26 from line 12		* * .	44.4	an of a 1 min 1 min			
	а	Excess of revenue over expenses and disbursements	(87,440)	<u> </u>			<u> </u>		
	b	Net investment income (if negative, enter -0-)			67,060	∂ <sub>++</sub> ≠-			
_	С	Adjusted net income (if negative, enter -0-)		1 5 7 2		0	اله به سر <sub>و س</sub> عه د		
For.I	Paper	work Reduction Act Notice, see instructions	· · · · · · · · · · · · · · · · · · ·				rm <b>990-P.F.</b> (2019).		

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with 1 1,519,684 2 (87,440)3 Other increases not included in line 2 (itemize) ▶STM115 3 10,840 4 1,443,084 5 5 Decreases not included in line 2 (itemize) ▶STM116 1,797 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 · · · · · · · · · · 1,441,287

Assets

Liabilities

Balances

Fund

5

Assets

Net/

PartiVI Capital Gains and (a) List and describe th 2-story brick ware	(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				
1a.					
b		· · · · · · · · · · · · · · · · · · ·			
С					
d					
ее					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis ense of sale		(h) Gain or (loss) ((e) plus (f) minus (g))
а					
b.					
_ C					
_ d					
<u>e</u>					
Complete only for assets sho	wing gain in column (h) and owned by	the foundation o	n 12/31/69	(I) G	Gains (Col. (h) gain minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col (		∞l (k	(), but not less than -0-) or cosses (from col. (h))
а					
b· ·					
C					
d		· • · · · · · · · · · · · · · · · · · ·			
е				<del></del>	
2 Capital gain net income or (net	Capital loss)	ain, also enter in F oss), enter -0- in F	· · · · · · · · · · · · · · · · · · ·	2	
3 Net short-term capital gain or (le	oss) as defined in sections 1222(5) ar	id (6)	,		
If gain, also enter in Part I, line	8, column (c) See instructions If (loss	s), enter -0- in	٦		
Part'l; line 8' · · · · · · · ·				3.	
Part V Qualification Und	er Section 4940(e) for Reduc	ed Tax on N	et Investment l	ncome	·
	on 4942 tax on the distributable amou	• •	the base period?		Yes X No
1 Enter the appropriate amount in	each column for each year, see the	nstructions before	making any entries	<b>.</b>	
(a) · Base penod years Calendar year (or tax year beginning in	(b) Adjusted qualifying distributions	Net value o	(c) of nonchantable-use as	sets	(d) Distribution ratio (col (b) divided by col (c))
2018	152,3	394	2,997,	857	0.050834
2017	140,0		2,881,		0.048585
2016	137,!	552	2,791,		0.049269
2015	140,	519	2,849,	203	0.049319
2014	142,0	528	2,824,	465	0.050497
2 Total of line 1, column (d) · · ·					0.248504
	5-year base period - divide the total of				
the number of years the foundar	tion has been in existence if less than	5 years · · · ·		. 3	0.049701
4 Enter the net value of noncharit	able-use assets for 2019 from Part X,	line 5 · · · · ·		. 4	2,997,698
5 Multiply line 4 by line 3 · · · ·				. 5	148,989
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)			. 6	671
7 Add lines 5 and 6				. 7	149,660
8 Enter qualifying distributions from	m Part XII, line 4			. 8	154,000
If line 8 is equal to or greater that Part VI instructions	an line 7, check the box in Part VI, line	1b, and complete	e that part using a 1	% tax rate S	See the

orm 9	90-PF (2019) THE HURLBERT FAMILY FOUNDATION		20-01	34216		1	Page
Part		940(e), or 4948			ons)		
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter		٠ ٦				
	Date of ruling or determination letter (attach copy of letter if necessary-see						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check.	·	<b>•</b>	1			671
	here ▶ 🗓 and enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · ·						
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4%						
	Part I, line 12, col (b)		]				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, other			2			0
3	Add lines 1 and 2			3			671
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, other			4			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5			671
6.	Credits/Payments-			l. – †			
a	2019 estimated tax payments and 2018 overpayment credited to 2019 · · · · · · · ·	6a	619		-	٠.	
b	Exempt foreign organizations - tax withheld at source	6b	013	1 }			
c	Tax paid with application for extension of time to file (Form 8868)	6c		1			
d	Backup withholding erroneously withheld	6d		1			
7 7	Total credits and payments Add lines 6a through 6d · · · · · · · · · · · · · · · · · ·			7			619
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attache			8			019
9				9			52
0	Overpayment: If line 7 is more than the total of lines 5 and 8; enter the amount overpaid			10			52
1	Enter the amount of line 10 to be Credited to 2020 estimated tax	Refur		11			
	VII-A   Statements Regarding Activities	- INGIGI	iueu -				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisla	tion or did it				Yes	No
ıa	participate or intervene in any political campaign?				1a	1.00	+
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes			• • •			X
U	instructions for the definition				1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of			· · · ·	10		X
		any materials				}	
	published or distributed by the foundation in connection with the activities  Did the foundation file Form 1120-POL for this year?				1c	1	١,,
C C	•			•		-	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.					1	
_	(1) On the foundation  \$ (2) On foundation managers   The the country to prove the provided by the foundation during the post for polytical except the country to provide the provided by the foundation of the provided by the provided by the provided by the foundation of the provided by	· <del></del>				İ	ł
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditu	re tax imposeu					
_	on foundation managers > \$	00					
2	Has the foundation engaged in any activities that have not previously been reported to the IR	5/			2		X
^	If "Yes," attach a detailed description of the activities					1	ļ
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in				•	]	İ
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of				3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
ь -	If "Yes," has it filed a tax return on Form 990-T for this year?				4b		1
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
_	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	er					
	By language in the governing instrument, or			İ			-
	By state legislation that effectively amends the governing instrument so that no mandatory					-	_
	conflict with the state law remain in the governing instrument?				6	Х	ļ
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete		, and Parl	:XV	7	X	ļ
Ва	Enter the states to which the foundation reports or with which it is registered. See instructions	•		ļ			'
	PA	· · · · · · · · · · · · · · · · · · ·					
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atte	-		- 1			
	(or designate) of each state as required by $\it General Instruction G^2$ If "No," attach explanation			· · ·	8b	х	L
9	Is the foundation claiming status as a private operating foundation within the meaning of sect			Ī			
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See instructions for Part						
	complete Part XIV				9		х
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a sched	lule listing their		- 1			
	names and addresses				10	l	×

Pan	VII-A Statements Regarding Activities (continued)			
		-mal	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.	ļ	· <b>X</b> -
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
	Website address ► N/A			
14	The books are in care of ► MARY JEAN VOLPE  Telephone no ► 770-998-	7758		
	Located at ▶ 240 BERRY GLEN COURT, ALPHARETTA, GA ZIP+4 ▶ 30022			
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 2019, 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		х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			
Part	VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	<u>.                                    </u>		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	إعلاقه	Yes	No
1a	During the year, did the foundation (either directly or indirectly)	161.70	Carried States	74.7
	(1) Engage-in the-sale-or exchange, or leasing of property with a-disqualified person?	-	400	7
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	i benige	जन्मकः	1922 T
	disqualified person? · · · · · · · · · · · · · · · · · · ·	` -	-,	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	- تيسند	******	
	(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	3	**************************************	
	foundation agreed to make a grant to or to employ the official for a period after	-	Therefore	
	termination of government service, if terminating within 90 days )	nere		याम्
b	If any answer is "Yes" 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	1b		1
	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			
	were not corrected before the first day of the tax year beginning in 2019?	1c	-	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))		and and and	1
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	بثبتين	æ- <b>₹</b> *	22.25
	6d and 6el) for tax year(s) beginning before 2019? 🔲 Yes 🕱 No		و، ع	
	If "Yes," list the years		-	
b	Are there any years listed in 2a for which the foundation is not 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	دستو- د	. was erk	- a-
	all years listed, answer "No" and attach statement - see instructions )	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	XX CO		<b>=</b>
	<b>•</b>	,	120	. ~ .
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	व्य उन्हों	التروية	ولتجز
	at any time during the year?	. ``	2	
b	If "Yes," did it have excess business holdings in 2019 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	اء مسجد	اعضعا	7/
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the	#0#		-32
	foundation had excess business holdings in 2019)	3b	e Mari	ilin dist
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	`4a		×
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	70	, saken	<del></del>
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	«	ж Х
				~

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Part	VII-B   Statements Regarding Activities for	or Wh	ich Form 4	720 M	ay Be Rec	uired	(continue	<i>∋d)</i>			
、5a	During the year, did the foundation pay or incur any ame	ount to					_	_	_	Ye	s No
	(1) Carry on propaganda, or otherwise attempt to influe	_	-			• • • •	Yes	X N	lo	_   .	. 4 -
	(2). Influence the outcome of any specific public election								.	١.	
	directly or indirectly, any voter registration drive?						∐ Yes		lo	'	
	(3) Provide a grant to an individual for travel, study, or						∐ Yes	X N	lo		
	(4) Provide a grant to an organization other than a char						П.,	<b>.</b>			
						• • • •	∐ Yes	X N	lo   ¯ `		
	(5) Provide for any purpose other than religious, charita							<b>.</b>	.		
	purposes, or for the prevention of cruelty to children						∐ Yes	X N	10		
b	If any answer is "Yes" to 5a(1)-(5), did any of the transa									. <del></del>	_ -≟
	in Regulations section 53 4945 or in a current notice-rec								: ⊢:ً	b	<del>                                     </del>
	Organizations relying on a current notice regarding disa							. • [	<b>┙</b> ┃		-1 - 1
С	If the answer is "Yes" to question 5a(4), does the foundation						Пи	п.	.	ŀ	
	because it maintained expenditure responsibility for the						∐ Yes	∐ N	10		
6-	If "Yes," attach the statement required by Regulations so		` '								
6a	Did the foundation, during the year, receive any funds, on a personal benefit contract?						☐ Yes	X N			
b	Did the foundation, during the year, pay premiums, direct						∐ ies	₩ I			ئــــا
	If "Yes" to 6b; file Form 8870	chy or in	unectly, on a pi	EISUIIAI	Denem Com	act,		• • • •	·  -	טיי	<u> </u>
7a	At any time during the tax year, was the foundation a pa	rtu to a i	prohibited tay s	haltar tr	ancaction?		□ Voe	₩ .	اما	.   .	-
b	If "Yes," did the foundation receive any proceeds or hav								- 1	'b	~
8	Is the foundation subject to the section 4960 tax on pay	-				10117 -		• • • •	<u>'</u>	<u> </u>	+
•	remuneration or excess parachute payment(s) during th						☐ Ves	FZ N	io	_	
Part										/ees	:
	and Contractors	, , , , ,	,		0.1	,0.0,	gy . c		p.o.	,000,	
1	List all officers, directors, trustees, and foundation r	nanage	rs and their co	mpens	ation. See ir	structio	 ns.				
		(b) ·Titl	e- and average-	(c) C	ompensation	(d)	Contribution		(e) F	žnense .	account,
	(a) Name and address		irs per week ed to position		not paid, nter -0-)		oyee benefit ferred compe		) oth	er allow	ances
MARY	JEAN VOLPE	PRESI	•	STM	·····						
	BERRY GLEN COURT, GA 30022		0.00		0			0			0
	G HURLBERT	TREAS		STMA	102						<del></del>
	WINDWARD MEADOW, TX 77365		0.00		0			0			0
								<u>_</u>			•
		Ì									
									<u> </u>		
2	Compensation of five highest-paid employees (other	than th	nose included	on line	1 - see instr	uctions)	. If none, e	nter			
	"NONE."										
			(b) Title, and a				(d) Contribu				
(a	) Name and address of each employee paid more than \$50,000		hours per w	eek	(c) Comper	sation	employee plans and o			xpense a er allow	
			devoted to po	sition			compens				
NONE				•							
							_				
							_				
***********			ļ								
Total n	umber of other employees paid over \$50,000						<u> </u>	. >			0_
EEA									Form	990-PF	(2019)

Total. Add lines 1 through 3

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3

EEA

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundat	ions,	
	see instructions )		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	e# -	
	purposes	3 <u>.</u>	
а	Average monthly fair market value of securities	1a	2,265,375
b	Average of monthly cash balances	1b	777,973
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	3,043,348
е	Reduction claimed for blockage or other factors reported on lines 1a and	J	
	1c (attach detailed explanation) · · · · · · · · · · · · · · · · · · ·		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3.	Subtract-line=2-from-line=1d	. 3.	3-,043-,348-
4	Cash deemed held for charitable activities  Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	45,650
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 · · · · · · ·	5	2,997,698
6	Minimum investment return. Enter 5% of line 5	6	149,885
Part		ns	
	and certain foreign organizations, check here ▶ ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6 · · · · · · · · · · · · · · · · · ·	1	149,885
2a ·	Tax on investment income for 2019 from Part VI; line 5 · · · · · · · · · · · · · 2a 671		
b	Income tax for 2019 (This does not include the tax from Part VI ) · · · · · · · · · · <b>2b</b>		
С	Add lines 2a and 2b · · · · · · · · · · · · · · · · · ·	2c	671
3	Distributable amount before adjustments Subtract line 2c from line 1 · · · · · · · · · · · · · · · · · ·	3	149,214
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	149,214
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
_	line 1	7	149,214
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	154,000
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	1,23	
а	Suitability test (prior IRS approval required)	'3a '	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 · · · · · ·	4	154,000
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	671
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	153,329
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	dation	
	qualifies for the section 4940(e) reduction of tax in those years		

Form 990-PF (2019) Page 9 THE HURLBERT FAMILY FOUNDATION 20-0134216 Part XIII Undistributed Income (see instructions) (b) Years pnor to 2018 (a) Corpus (c) 2018 1 Distributable amount for 2019 from Part XI. 149,214 2 Undistributed income, if any, as of the end of 2019 Total for prior years 3 Excess distributions carryover, if any, to 2019 From 2014 . . . . . . . . . . . 2,149 From 2015 . . . . . . . . . . 8-55 From 2017 . . . . . . . . . . From 2018 . . . . . . . . . . . 3,713 Total of lines 3a through e . . . . . . . . . . . . 6,717 Qualifying distributions for 2019 from Part XII, line 4 ► \$ 154,000 Applied to 2018, but not more than line 2a · · · · Applied to undistributed income of prior years (Election required - see instructions) ..... Treated as distributions out of corpus (Election Applied to 2019 distributable amount . . . . . . 149,214 Remaining amount distributed out of corpus . . . . 4,786 Excess distributions carryover applied to 2019 (if an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: Corpus Add lines 3f, 4c, and 4e Subtract line 5 · · 11,503 Prior years' undistributed income Subtract 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 Subtract line 6c from line 6b Taxable amount - see instructions . . . . . . . . . . . . Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount - see instructions Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020 . . . . . . . . . . . . . . . . Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be 8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . . . . 2,149 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a . . . 19,354 10 Analysis of line 9 Excess from 2015 Excess from 2016 855 Excess from 2017 Excess from 2018 3,713

Excess from 2019 . . . . . .

4,786

	990-PF (2019) THE HURLBERT FA			t VII-A, question	<u>20-0134216</u> 9)	Page 10
• 1a	If the foundation has received a ruling or det				<u> </u>	· · · · - · · - · ·
	foundation, and the ruling is effective for 201				•	
b_	Check box to indicate whether the foundation			ribed in section.	4942(j)(3) or 49	42(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	investment return from Part X for each year listed	(8) 2013	(6) 2010	(6) 2017	(4) 2010	
b	85% of line 2a · · · · · · · · · · · · · · · · · ·				_	
		<del></del>				
С	Qualifying distributions from Part XII, line 4 for each year listed			<u> </u>		
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities-					1
е	Ouglifung distributions made directly					
e	Qualifying distributions made directly for active conduct of exempt activities					
	Subtract line 2d from line 2c · · · · ·					
3	Complete 3a, b, or c for the					
3	alternative test relied upon		\	$\checkmark$		
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under		1			
	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 · · · · ·					
_	•					*****
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					<del>\</del>
	and 5 or more exempt					
	organizations as provided in				ŀ	
	section 4942(j)(3)(B)(iii)		<del> </del>		<del> </del>	<del></del>
	(3) Largest amount of support from					
	an exempt organization				<del> </del>	
Part	• • • • • • • • • • • • • • • • • • • •	n-/Complete-th	ie-nart-anly-if-t	ho-foundation h	ad:\$5 000:or:mara	ein accete et
1 ait	<del></del>	•	•	ile iouiluation ii	au \$5,000 or more	: III assets at
	any time during the year -		15.1		·	
1	Information Regarding Foundation Mana	•	h.a. 20/ afiba tata			
а	List any managers of the foundation who hat before the close of any tax year (but only if the control of the co					
	Total and aloos or any law year (but only in	may mave commedic	a more than percept	) (000 0000011 007 (0	<u>//-//</u>	
None						
b	List any managers of the foundation who ov				rge portion of the	
	ownership of a partnership or other entity) o	t which the foundati	on has a 10% or gre	eater interest		
None						
2	Information Regarding Contribution, Gra	nt, Gift, Loan, Scho	olarship, etc., Prog	rams:		
	Check here ▶ ☐ If the foundation only ma	akes contributions to	preselected charita	able organizations and	d does not accept	
	unsolicited requests for funds. If the foundar	tion makes gifts, gra	ints, etc., to individua	als or organizations u	inder other conditions,	
	complete items 2a, b, c, and d See instruct	ions			···	
а	The name, address, and telephone number	or email address of	the person to whom	applications should	be addressed	
99	OOAPP					
b	The form in which applications should be su	bmitted and informa	ation and materials t	hey should include		
	•			-		
С	Any submission deadlines					•
=	•					Ĭ
d	Any restrictions or limitations on awards, su	ch as by geographic	al areas, charitable	fields, kinds of institu	tions, or other	<del></del>
-	factors	7 3 3 - Pine	;	,		1,

Form 990-PF (2019) THE HURLBERT FAMILY FOUNDATION 20-0134216 Page 11 Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to any foundation manager status of contribution Amount recipient Name and address (home or business) or substantial contributor a Paid during the year A CHRISTIAN MINISTRY IN THE NAT'L P 9250 E COSTILLA AVE STE 203 GREENWOOD VILLAGE, CO 80112 GENERAL 4 32,000 ALZHEIMER'S ASSN - GREENVILLE SC 901 S. PINE STREET Spartanburg, SC 29302 GENERAL 1,000 ALZHEIMER'S ASSN 225 N MICHIGAN AVE 17TH FLOOR Chicago, IL 60601 GENERAL 9,000 AMERICAN RED CROSS PO-BOX-37839 Boone, IA 50037-0839 GENERAL 6,000 CANCER RESEARCH INSTITUTE 29 BROADWAY, 4TH FLOOR New York, NY 10006 GENERAL 23,000 CARING BRIDGE DONATION PROCESSING CTR PO BOX 6032' Albert Lea, MN 56007-9854 GENERAL 1,000 CURE ALZHEIMER'S FUND 34 WASHINGTON STREET STE 310 Wellesley Hills, MA 02481 GENERAL 11,000 ELIJAH RISING 1100 STUDEWOOD STREET Houston, TX 77008 GENERAL 2,000 За Approved for future payment

Total

Page 11 20-0134216 Form 990-PF (2019) THE HURLBERT FAMILY FOUNDATION Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to status of Amount any foundation manager or substantial contributor recipient Name and address (home or business) a Paid during the year FISHER CENTER FOR ALZHEIMER'S RESEA 110 EAST 42ND STREET 16TH FLR GENERAL 11,000 New York, NY 10017 HOUSTON AREA PARKINSONS SOCIETY 2700 SOUTHWEST FREEWAY STE 296-GENERAL 14,000 Houston, TX 77098 LIVE PRAYER 6660 46TH AVENUE NORTH 8,000 Saint Petersburg, FL 33709 GENERAL MARQUETTE UNIV -COLLEGE OF ENG 1250 W WISCONSIN AVE GENERAL 10,000 Milwaukee, WI 53201 MICHAEL J FOX FOUNDATION 498 7TH AVENUE, 18TH FLOOR New York, NY 10018 GENERAL 12,000 SALVATION ARMY PO' BOX" 1'959" Atlanta, GA 30301 GENERAL 8,000 SOLDIERS' ANGELS 2895 NE LOOP 410, STE 107 3,000 San Antonio, TX 78218 GENERAL TAU BETA PI ASSOCIATION PO BOX 2697

Knoxville, TN 37901-2697 GENERAL 3,000 3a 154,000 Approved for future payment

> 3b Form **990-PF** (2019)

Total

Pa	rt XVI	i-A	Analysis of Income-Producing Acti	ivities				
Enter gross amounts unless otherwise indicated			1	1	usiness income	Excluded by secti	(e)	
	•			(a) Business code	(b) Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exempt function income (See-instructions-)
1			ervice revenue					
				_				
	е		- In the part of t					
	f							
	_		nd contracts from government agencies			ļ		
2			nip dues and assessments					
3			savings and temporary cash investments · ·		···	14	27	
4	Divide	ends	and interest from securities		***************************************	14	67,033	
5	Net re	ental	income or (loss) from real estate					
			nanced property					
	b No	t det	ot-financed property					
6	Net re	ental	income or (loss) from personal property · · ·					
7	Other	inve	stment income					
8	Gain	or (lo	ss) from sales of assets other than inventory .					
9	Net in	com	e or (loss) from special events · · · · · ·					
10	Gross	prof	fit or (loss) from sales of inventory					
11	Other	reve	enue <b>a</b>					
	_							
	-4				. 3.500000 000000 0			
	e-				<del></del>			
12	Subto	tal /	Add columns (b), (d), and (e)			. ******	67,060	
13	Total.	. Add	Add columns (b), (d), and (e) · · · · · · · · · · · · · · · · · · ·				. 13	67,060
(See			in line 13 instructions to verify calculations )					
	rt XVI			complishme	nt of Exempt	Purposes		
			accomplishment of the foundation's exempt purpo	oses (other than b			s) (See instruction	

Form 99		2019) THE	HURLBERT F	AMILY FOUNDATION	ON		2	0-01	34216		F	Page 1
Part.	XVII¥			sfers to and Trans	actions and	Relationsl	nips With Noncl	narita	bie Exe	mpt		
1	Did th	Organizations e organization dire		gage in any of the follo	owing with any	other organi	zation described			Con The	Yes	No
•				(3) organizations) or in						1000	2	
		zations?		(e) organizatione) or in								I =
а	_		ting foundation to a	noncharitable exemp	t organization o	of					1	
_										" 1a(1)	-	X
										1a(2)	<b></b>	x
ь	٠,	transactions									2	<b>1</b>
_			noncharitable exen	npt organization · ·						1b(1)		X
				ole exempt organizatio						1b(2)	+	x
				assets						1b(3)		x
	. ,									1b(4)	_	x
			<del>-</del>							1b(5)	-	x
		•		p or fundraising soliciti						1b(6)	+	x
С	. ,			s, other assets, or paid						1c		x
		-	· -	complete the following								
				s given by the reportin			•					
				ment, show in column								
(a) Line		b) Amount involved	[	noncharitable exempt orga	·	1	ption of transfers, tran			nng arrai	 ngeme	ents
						†****	·		**********			
		•							·········			
											• • • •	
			-	<del></del>								
				LUL OLULLULULULULULULULULULULULULULULULU								
2a	Is the	foundation directly	or indirectly affiliate	ed with, or related to, o	one or more tax	k-exempt org	janizations	,				
	descri	bed in section 501	(c) (other than sect	ion 501(c)(3)) or in sec	ction 527? -					☐ Ye	s X	No
b	If "Yes	" complete the foll	owing schedule									
		(a) Name of organiz	zation	(b) Type of c	organization		(c) Desci	iption o	f relations	nıp		
					·							
					<del></del>						<del></del>	
		penalties of perjury, I dec	clare that I have examine	t this return, including accom	npanying schedules	and statements	, and to the best of my kr	nowledge	and belief,	it is true,		-
Sign	correct	, empcompiete Declarat	on or preparer (other tha	an taxpayer) is based on all in	normation of which	preparer nas an	y Kilowieuge		May the IF	OS dicarre	this ==	turn
Here		MarinXLLA	WVN.O)	14/20	2/20 PPRI	ESIDENT			May the IF with the pr	reparer <u>sh</u>	own bel	low?
		nature of officer or truste	ee T	Date	Title				See instru	ctions X	Yes	No
		Pnnt/Type preparer's na	ame	Preparer's signature	· / /		Date	Check	] if	PTIN		

P00192362

06-11-2020

self-employed

Firm's EłN

678-319-0111

Phone no

Paid

Preparer

Use Only

Bob Ostapower

North Pointe Tax Services

11255 Parsons Road

Duluth GA 30097

Firm's name

Firm's address

**Federal Supporting Statements 2019** PG01 Name(s) as shown on return Tax ID Number THE HURLBERT FAMILY FOUNDATION 20-0134216 Form 990PF - Part VIII Statement #A01 Compensation Explanation Name MARY JEAN VOLPE Explanation NONE PG01 Form 990PF - Part VIII Statement #A02 Compensation Explanation Name JAMES G HURLBERT Explanation NONE PG01 Form 990PF - Part III - Line 3 Statement #115 Other Increases Schedule Nov'19 Cont. cashed in Jan '20 10,000 Kinder Mo non-div.dist.-basis reduc 840 Total 10,840

Federal Supporting Statements	2019 PG01
Name(s) as shown on return	Tax ID Number
THE HURLBERT FAMILY FOUNDATION	20-0134216
Form 990PF - Part III - Line, 5 Other Decreases Schedule	Statement #116
2019 Estimated Tax Payment	200
SPDR Dow Jones Indl-dividend timing	125
SPDR S&P 500 ETF-dividend timing	27
Kinder Mo non-div dist-basis reduc	445
Total1,7	<u> 197</u>
· ·	

Form 990PF - Part II - Line 10(b)
Investments: Corporate Stock Schedule

PG01 Statement #137

Category	BOY	Book Value	EOY FMV
EQUITIES	754,554	753,109	2,402,574
Totals	754,554	753,109	2,402,574

Revenue Net Adjusted Charitable and expenses investment net income purpose 500 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Name(s) as shown on return THE HURLBERT FAMILY FOUNDATION	Federal Supporting Statements	nėnts	2019 PG01 Tax ID Number
Net	Form 990PF - Part I	le 16(b) - Accounting Fees	Schedule	Statement #108~
0 005 0 0 005			Charıtable purpose	
	0			
	,			