Return of Private Foundation

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

F		do to www.iis.gov/rormssorr i				on.	
		ndar year 2019 or tax year beginning		19, and			, 20
	7	undation			' *	er identification numb	er
		N-ARI FOUNDATION, INC.				317221	
Nun	ber and	street (or PO box number if mail is not delivered to street address)	Roo	m/suite	B Telephor	ne number (see instruc	tions)
		OVENTRY LANE			(260) 432 <u>-</u> 2233	
City	or town	, state or province, country, and ZIP or foreign postal code			C If exemp	tion application is pend	ding, check here ▶
FO	RT W	AYNE IN 46804					_
			n of a former public	c charity	D 1. Foreig	n organizations, check	here ►
		☐ Final return ☐ Amended	•		١		
		☐ Address change ☐ Name cha	nae			n organizations meetin here and attach comp	
H	Checl	k type of organization: Section 501(c)(3) exempt p		ΛU	í	foundation status was	_
\Box		on 4947(a)(1) nonexempt charitable trust Other ta				607(b)(1)(A), check here	
一		narket value of all assets at J Accounting method					_
		f year (from Part II, col. (c),	i. 🔼 Casii 🗀 F	nociuai		ndation is in a 60-mon ction 507(b)(1)(B), chec	
		6) > \$ 19,631,624. (Part I, column (d), must b	o on each back \		ander se	C. C	K Horo
_	art I		Cash basis.)				(d) Diebinoemente
	arti	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net	investment	(c) Adjusted net	(d) Disbursements for charitable
		the amounts in column (a) (see instructions))	books	ır	icome	income	purposes (cash basis only)
				2588024e1988	90%** 548290.4 1 43459.490	Printer (: \$655	(Casir basis City)
	1	Contributions, gifts, grants, etc., received (attach schedule)	406.50 Processing & \$4.500.50 Processing	20072	94327 - SEE TE		
_	2	Check ► 🗵 if the foundation is not required to attacli Sch. B		¥ 40.077.0			
Revenue	3	Interest on savings and temporary cash investments		<u> </u>			
	4	Dividends and interest from securities	389,410.	4	<u>06,272.</u>		50 10 10 10 10 10 10 10 10 10 10 10 10 10
	5a	Gross rents		<u> </u>			
	b	Net rental income or (loss)	74				\$ 45 PM
	6a	Net gain or (loss) from sale of assets not on line 10	648,068.	3.3			
	b	Gross sales price for all assets on line 6a 6, 272, 786.	AND COMPANY OF THE PROPERTY OF	L=6a	«S.tmt		
	7	Capital gain net income (from Part IV, line 2)		_ 6	51 <u>,95</u> 8.		2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					(A. 1
	b	Less: Cost of goods sold	1000			all bearing to the s	-92
	С	Gross profit or (loss) (attach schedule)			N IS	NAME & B. BAN	18
	11	Other income (attach schedule) See. Stmt			468	MOA 1 2 SUN	3
	12	Total. Add lines 1 through 11	1,037,478.	1,0	58,698.	מסטבען ווי	
	13	Compensation of officers, directors, trustees, etc.	l			OGUEN, U	
enses	14	Other employee salaries and wages		<u> </u>			
ü	15	Pension plans, employee benefits					
	16a	Legal fees (attach schedule)					
Ë	b	Accounting fees (attach schedule)					
Ň	C	Other professional fees (attach schedule) L-16c Stmt	119,469.	1 1	20,916.		
at	17	Interest	123/1031	 	20,020.		
str	18	Taxes (attach schedule) (see instructions) See. Stmt	21,031.	 	6,031.		
Ξ.	19	Depreciation (attach schedule) and depletion	21,031.		0,001.		K 11
Operating and Administrative Exp	20	Occupancy		\vdash			39. Y. 20. E. S.
ĕ	21	Travel, conferences, and meetings		 			
밀	22	· · · · · · · · · · · · · · · · · · ·		 		· - -	
ਰ	23	•	<u> </u>	+	7 470		
<u>.</u>		Other expenses (attach schedule) See . Stmt .	23.	 	7,470.		
ati	24	Total operating and administrative expenses.]]			J
ğ		Add lines 13 through 23	140,523.	1	34,417.	VANNES SITEMAS SOCIAL ASSOCIAL SANS	
Ö	25	Contributions, gifts, grants paid	954,430.	(6020a)			954,430.
	26	Total expenses and disbursements. Add lines 24 and 25	1,094,953.	1	34,417.	THE RESIDENCE OF THE PROPERTY	954,430.
	27	Subtract line 26 from line 12.					
	а	Excess of revenue over expenses and disbursements	-57,475.		1		
	b	Net investment income (if negative, enter -0-) .		9	24,281.		7.5

For Paperwork Reduction Act Notice, see instructions.

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

Form 990-P

BAA

Pa	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End	of year
		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	1,168,671.	717,142.	717,142.
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶	And the second s		
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶		74 J	
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)		-	
	7		2 V-1 6384.27330/31926002-*	(0):3-/21/2003/00/00/00/00/00/00/00/00/00/00/00/00/	
	′	Other notes and loans receivable (attach schedule)			
s	8	Less allowance for doubtful accounts ▶ Inventories for sale or use			
ĕ	9	Prepaid expenses and deferred charges			
Assets	10a	Investments—U.S. and state government obligations (attach schedule)	2,948,183.	2,879,842.	2,996,179.
	b	Investments—corporate stock (attach schedule) L-10b Stmt			
	C	Investments—corporate stock (attach schedule) L-10¢ Stmt			
	11	Investments—land, buildings, and equipment, basis ▶	1,108,336.	1,114,646.	1,100,712.
	' '	Less. accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule) . L-13 Stmt	1,730,529.	1 670 563	1 595 496
	14	Land, buildings, and equipment: basis	1,730,329.	1,670,563.	1,595,496.
	["	Less accumulated depreciation (attach schedule) ▶	2.		
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	15,473,826.	15,372,934.	19,631,624.
	17	Accounts payable and accrued expenses	13,473,020.	15,572,954.	77,031,024.
	18	Grants payable			
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			1987
ab	21	Mortgages and other notes payable (attach schedule)			180 182 183
	22				
	23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)			1984 11 FE # 10 10 10 10 10 10 10 10 10 10 10 10 10
S		Foundations that follow FASB ASC 958, check here		-	4 15 16 17 18 W.
alances		and complete lines 24, 25, 29, and 30.			
lan	24	Net assets without donor restrictions			
Ва	25	Net assets with donor restrictions	·		
		Foundations that do not follow FASB ASC 958, check here ▶ 🗵		-	The same
ַ בַּ		and complete lines 26 through 30.			
ř	26	Capital stock, trust principal, or current funds	8,178,402.	7,040,031.	
S	27	Paid-in or capital surplus, or land, bldg., and equipment fund	4,050,458.	4,439,868.	
ğ	28	Retained earnings, accumulated income, endowment, or other funds	3,244,966.	3,893,035.	
Net Assets or Fund	29	Total net assets or fund balances (see instructions)	15,473,826.	15,372,934.	The second second
7	30	Total liabilities and net assets/fund balances (see			
ž		instructions)	15,473,826.	15,372,934.	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	·		
		Il net assets or fund balances at beginning of year-Part II, colu	mn (a), line 29 (mus	t agree with	
		-of-year figure reported on prior year's return)			15,473,826.
2		er amount from Part I, line 27a			-57,475.
3		and the same and the standard and the standard Albertanian Alberta			
4		lines 1, 2, and 3		4	15,416,351.
5	Deci	reases not included in line 2 (itemize) ► See Statement		5	43,417.
6		Il net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), Iii	ne 29 6	15,372,934.

Description	Part	IV Capital Gains and	Losses for Tax on Investme	ent Income			
DELONG-TERM CAPITAL GAIN DISTRIBUTIONS P 12/31/2018 12/31/2018 12/31/2019 C d e				tate,	P-Purchase		1 ' '
Complete only for assets showing gain in column (ii) and owned by the foundation on 12/31/89. (iii) Excess of coil ii) Cover of (iii) Irany Cover of (ii	1a	SEE ATTACHED STATEM	ENT		P	12/31/2018	12/31/2019
Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (oss), enter-0- in Part I, line 8 Part I, line	b	LONG-TERM CAPITAL G	AIN DISTRIBUTIONS		P	12/31/2018	12/31/2019
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (h) Captro (h) minus (gi)	c						_
(g) Gross sales proce (ft) Depresation abloved (or allowables) (g) Cost or other basis (p) Jules expense of sales (p) Jules (ft) months (g))	d						
Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 2 651, 95	<u> </u>	-	_ _		<u> </u>		<u> </u>
Description		(e) Gross sales price					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/89. (i) FMV as of 12/31/89 (ii) Adjusted basis as of 12/31/89 (iii) Adjusted basis as of 12/31/89 (iii) Adjusted basis as of 12/31/89 (iii) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)) c d	a		0,	<u> </u>	<u>5,789,136.</u>		650,867.
d e Complete only for assets showing gain in column (ii) and owned by the foundation on 12/31/89. (ii) FMV as of 12/31/89 (iii) Adjusted basis as of 12/31/89 (iii) Adjusted basis (iii) Cover col (ii), if any) as of 12/31/89 (iii) Adjusted basis (iii) Cover col (iii), if any) c d b c d d e 2 Capital gain net income or (net capital loss) [iii] gain, also enter in Part I, line 7 1f (loss), enter -0- in Part I, line 7 1f (loss), enter -0- in Part I, line 7 1f (loss), enter -0- in Part I, line 8 2 651, 95 3 Net short-term capital gain or (loss) as defined in sections 122/35 and (6): if gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 2 651, 95 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributiable amount of any year in the base period? Yes X If Yes, "the foundation doesn't qualify under section 4940(e). Do not complete this part. 1 Enter the appropriate amount in each column for each year; see the instructions before making any entries. (iii) Part (iii) Adjusted qualifying distributions in Net value of noncharitable-use assets (col (iii) Particular ratio (col (iii)) divided by col (ci) (col (iii)) divided	<u>b</u>	1,091.			0.		1,091.
e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (h) FMV as of 12/31/69 (h) Adjusted basis as of 12/31/69 (h) EMV as of 12/31/69 (h) Dath not less than -0-1 or Losses (from col (h)) over col (l), if any) 650, 86 (h) 650,							
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (h) FMV as of 12/31/69 (ii) Adjusted base as of 12/31/69 (iii) Adjusted base over cold (ii), if any cover cold (iii), and	<u>d</u>			<u> </u>			
We have a continued as a continued	<u>e</u>						
a		Complete only for assets show	ving gain in column (h) and owned b	y the foundation	on 12/31/69.		
Description		(i) FMV as of 12/31/69					
c d e 2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 fl (loss), enter -0- in Part I, line 7 fl (gain, also enter in Part I, line 7 fl (gain, also enter in Part I, line 7 fl (gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 part I, line 10 part I	<u>a</u>						650,867.
d e 2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7 f (loss), enter -0- in Part I, line 7 f (gain, also enter in Part I, line 7 f (gain, also enter in Part I, line 8 f (gain, also enter in Part I, line 8 f (gain, also enter in Part I, line 8 f (gain, also enter in Part I, line 8 f (gain, also enter in Part I, line 8 f (gain, also enter in Part I, line 8 f (gain, also enter in Part I, line 8 f (gain, also enter in Part I, line 8 f (gain, also enter in Part I, line 8 f (gain, also enter in Part I, line 8 f (gain, also enter in Part I, line 7 f (gain, also enter in Part I,	<u>b</u>						1,091.
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7 f (gain), also enter in Part I, line 8 column (c). See instructions If (loss), enter -0- in Part I, line 8 part I, line 8 gain, also enter in Part I, line 8 column (c). See instructions. If (loss), enter -0- in Part I, line 8 part I, line 8 gain I, line 10 gain I,	c				<u></u>		
2 Capital gain net income or (net capital loss) { ff gain, also enter in Part I, line 7 }	<u>d</u>				<u> </u>		
Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8. Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income	e				<u> </u>	<u> </u>	
If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8. Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes Mit "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part. 1	2	Capital gain net income or				2	651,958.
Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes	3	If gain, also enter in Part I,	line 8, column (c). See instruc	tions. If (loss).			-
(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making any entries. (a) Base period years Calendar year (or tax year beginning in) Adjusted qualifying distributions (b) Adjusted qualifying distributions Net value of noncharitable-use assets (c) (c) (d) Distribution ratio (col (b) divided by col (c)) Pet value of noncharitable-use assets (col (b) divided by col (c)) 2018 821, 849. 18, 639, 348. 0.0440 2017 830, 655. 17, 307, 102. 0.0479 2016 816, 752. 15, 758, 365. 0.0518 2015 774, 408. 16, 194, 920. 0.0478 2014 747, 454. 16, 215, 942. 0.0460 2 Total of line 1, column (d) 2 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 3 0.0475 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 Add lines 5 and 6 7 881, 93:	Dord				J		
Section 4940(d)(2) applies, leave this part blank. Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes New Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part. Inter the appropriate amount in each column for each year; see the instructions before making any entries. (a) Base period years (b) (b) (c)							
(a) Base period years Calendar year (or lax year beginning in) Adjusted qualifying distributions Net value of noncharitable-use assets (c) Distribution ratio (col (b) divided by col (c)) 2018 821,849. 18,639,348. 0.0440 2017 830,655. 17,307,102. 0.0479 2016 816,752. 15,758,365. 0.0518 2015 774,408. 16,194,920. 0.0478 2014 747,454. 16,215,942. 0.0460 2 Total of line 1, column (d) 2 0.2378 3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 3 0.0475 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 4 18,346,89 5 Multiply line 4 by line 3 5 872,680 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 9,241 7 Add lines 5 and 6 7 881,932	Was t	he foundation liable for the s	ection 4942 tax on the distributa			pase period?	☐ Yes ⊠ No
Base period years Adjusted qualifying distributions Net value of noncharitable-use assets Col (b) divided by col (c)	_1	Enter the appropriate amou	int in each column for each year	r; see the instru	uctions before m	akıng any entries.	
2018 821,849. 18,639,348. 0.0440 2017 830,655. 17,307,102. 0.0479 2016 816,752. 15,758,365. 0.0518 2015 774,408. 16,194,920. 0.0478 2014 747,454. 16,215,942. 0.0460 2 747,454. 16,215,942. 0.0460 3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 3 0.0475 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 4 18,346,89 5 Multiply line 4 by line 3 5 872,68 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 9,24 7 881,93	Cale	Base period years		Net value of			stribution ratio
2017 830,655. 17,307,102. 0.0479 2016 816,752. 15,758,365. 0.0518 2015 774,408. 16,194,920. 0.0478 2014 747,454. 16,215,942. 0.0460 2 Total of line 1, column (d) 2 0.2378: 3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 3 0.0475 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 4 18,346,899 5 Multiply line 4 by line 3 5 872,688 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 9,244 7 Add lines 5 and 6 7 881,932			821,84	9.	18,639,3	48.	0.044092
2016 816,752. 15,758,365. 0.0518 2015 774,408. 16,194,920. 0.0478 2014 747,454. 16,215,942. 0.0460 2 Total of line 1, column (d) 2 0.2378 3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 3 0.0475 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 4 18,346,896 5 Multiply line 4 by line 3 5 872,686 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 9,244 7 Add lines 5 and 6 7 881,935		2017					0.047995
2015 774,408. 16,194,920. 0.0478 2014 747,454. 16,215,942. 0.0460 2 Total of line 1, column (d) 2 0.2378 3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years 3 0.0475 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 4 18,346,89 5 Multiply line 4 by line 3 5 872,68 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 9,24 7 Add lines 5 and 6 7 881,93		2016	816,75	2.			0.051830
2 Total of line 1, column (d)		2015	774,40	8.			0.047818
Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years		2014	747,45	4.	16,215,9	42.	0.046094
the number of years the foundation has been in existence if less than 5 years	2	Total of line 1, column (d)	· · · · · · · · · · · · · · · · · · ·			. 2	0.237829
5 Multiply line 4 by line 3	3						0.047566
6 Enter 1% of net investment income (1% of Part I, line 27b)	4	Enter the net value of nonch	haritable-use assets for 2019 fro	om Part X, line	5	. 4	18,346,896.
7 Add lines 5 and 6	5	Multiply line 4 by line 3 .				. 5	872,688.
	6	Enter 1% of net investment	income (1% of Part I, line 27b)			. 6	9,243.
8 Enter qualifying distributions from Part XII, line 4	7	Add lines 5 and 6				. 7	881,931.
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See Part VI instructions.	8	If line 8 is equal to or greate					954,430. 1% tax rate. See the

3

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instruction	ons)_
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶□ and enter "N/A" on line 1.	He Till	
	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	9,	243.
	here ► 🗵 and enter 1% of Part I, line 27b		
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0.
3	Add lines 1 and 2	9,	243.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	9,	243.
6	Credits/Payments:		I A
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 19,092.	Vo.	
b	Exempt foreign organizations—tax withheld at source		
C	Tax paid with application for extension of time to file (Form 8868) 6c 0 .		
d	Backup withholding erroneously withheld		2
7	Total credits and payments. Add lines 6a through 6d	19 <u>,</u>	092.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10	<u>9,</u>	849.
<u> 11</u>	Enter the amount of line 10 to be. Credited to 2020 estimated tax ▶ 9,849. Refunded ▶ 11		
Part		Takes you a a	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	10	+
D	instructions for the definition	1b	×
	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	X
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. > \$	2	×
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	3	×
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	×
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	×
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		
	By language in the governing instrument, or		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		
	conflict with the state law remain in the governing instrument?	6 ×	
7	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 ×	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶		
	IN		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		
	(or designate) 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 4942(j)(3) or		
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"		
	complete Part XIV	9	×
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		
	names and addresses	10	<u> </u>

Par	VII-A Statements Regarding Activities (continued)		_	
	orazoniona riogenanig violiniaco (cominaco)	* 74	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		×
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	_	×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	×	<u> </u>
14	The books are in care of ► JENNIFER WILSON Telephone no. ► (260)		2233	3
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here		•	▶ [
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
10	over a bank, securities, or other financial account in a foreign country?	16	-	×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	44 - 300 s	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?	4,4		Š.
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	 (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? □ Yes ⋈ No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? □ Yes ⋈ No 		#4	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		reC Z	
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		· m	
	foundation agreed to make a grant to or to employ the official for a period after			1
	termination of government service, if terminating within 90 days.)			
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		
	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		×
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)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
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			
	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.	能增		1000
3a	▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ja	at any time during the year?			
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 the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	Saltano na	×
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 2019?	4b	94.0	×

Part	VII-B Statements Regarding Activitie	s for V	Vhich Form	4720	May Be F	lequire	e d (co <u>nt</u> u	nued)			
5a	During the year, did the foundation pay or incur	any am	ount to:						***	Yes	No
	(1) Carry on propaganda, or otherwise attempt	to influe	ence legislatio	on (sect	tion 4945(e))? .	☐ Yes	⊠ No	, 42		
	(2) Influence the outcome of any specific publ	ic electi	ion (see secti	on 495	5); or to c	arry on	ı				24
	directly or indirectly, any voter registration d	rive?					☐ Yes	X No		4	排棄
	(3) Provide a grant to an individual for travel, st	udy, or	other sımilar ı	ourpose	es?		☐ Yes	X No			
	(4) Provide a grant to an organization other that	n a cha	ırıtable, etc.,	organiz	ation desc	rıbed ır	1				
	section 4945(d)(4)(A)? See instructions						☐ Yes	× No			
	(5) Provide for any purpose other than religious										×
	purposes, or for the prevention of cruelty to						☐Yes	⊠ No	\$5000 F-555043	1	
b	If any answer is "Yes" to 5a(1)-(5), did any of t							scribed			
	in Regulations section 53.4945 or in a current ne	otice re	garding disas	ter ass	istance? S	ee instr	uctions		5b		
	Organizations relying on a current notice regard	_									
C	If the answer is "Yes" to question 5a(4), does			-					1		
	because it maintained expenditure responsibility		_				☐ Yes	☐ No		***	
	If "Yes," attach the statement required by Regu										
6a	Did the foundation, during the year, receive any		-	_		emiums	_	_		44.	4. 基
	·						∐ Yes	⊠ No			لتك
b	Did the foundation, during the year, pay premiu	ms, dire	ectly or indired	ctly, on	a persona	benefi	t contract	? .	6b	ANGRAGO, LA	X
_	If "Yes" to 6b, file Form 8870.									in y	優劇
7a	At any time during the tax year, was the foundation									1993	
p	If "Yes," did the foundation receive any proceed is the foundation subject to the section 4960 to							ny.	7b	200 of 100 or 10	1482 PROPERTY
8	remuneration or excess parachute payment(s) d							□ Na			i de
Part	VIII Information About Officers, Direct										eresser'i
ı Gı (and Contractors	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	11431003, 1	Janua	tion man	ugei 3,	gy .	a.G L	pioy	ccs,	
1	List all officers, directors, trustees, and found	dation r	managers an	d their	compens	ation. S	See instru	uctions	 3.		
	(a) Name and address		e, and average		mpensation		Contribution		(e) Expe	nse acc	count,
	(a) Name and address	hou	e, and average irs per week ed to position	(If n	mpensation not paid, ter -0-)	emplo	Contribution byee benefit erred compe	plans	(e) Expe	nse acc allowan	
RICH	(a) Name and address	hou devot	irs per week	(If n	ot paid,	emplo	yee benefit	plans			
		devot DIRECT	ed to position	(If n	ot paid,	emplo	yee benefit	plans			
5642	HARD RIFKIN	devot DIRECT	ors per week ed to position OR, CHAIRMAN	(If n	ot paid, ter -0-)	emplo	yee benefit	plans ensation			ces
5642 ARIE	HARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804	devot DIRECT PRESIDE	ors per week ed to position OR, CHAIRMAN 1.00	(If n	ot paid, ter -0-)	emplo	yee benefit	plans ensation			ces
5642 ARIE 5642 JENN	HARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 LA RIFKIN COVENTRY LANE FORT WAYNE IN 46804 NIFER L. WILSON	DIRECT PRESIDE TREA	ors per week led to position OR, CHAIRMAN 1.00 NT & SECRETARY	(If n	0 .	emplo	yee benefit	plans ensation 0.			0. 0.
5642 ARIE 5642 JENN	HARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 ELA RIFKIN COVENTRY LANE FORT WAYNE IN 46804	DIRECT PRESIDE TREA	ors per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00	(If n	ot paid, ter -0-)	emplo	yee benefit	plans ensation 0.			0.
5642 ARIE 5642 JENN	HARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 LA RIFKIN COVENTRY LANE FORT WAYNE IN 46804 NIFER L. WILSON	DIRECT PRESIDE TREA	ors per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00 SURER	(If n	0 .	emplo	yee benefit	plans ensation 0.			0. 0.
5642 ARIE 5642 JENN 5642	HARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 ELA RIFKIN COVENTRY LANE FORT WAYNE IN 46804 RIFER L. WILSON COVENTRY LANE FORT WAYNE IN 46804	DIRECT PRESIDE TREA	ors per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00 SURER 1.00	(If n	0. 0.	emplo and def	yee benefit	O. O.	other a	allowan	0. 0.
5642 ARIE 5642 JENN	HARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 COVENTRY LANE FORT WAYNE IN 46804 NIFER L. WILSON COVENTRY LANE FORT WAYNE IN 46804 COVENTRY LANE FORT WAYNE IN 46804	DIRECT PRESIDE TREA	ors per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00 SURER 1.00	(If n	0. 0.	emplo and def	yee benefit	O. O.	other a	allowan	0. 0.
5642 ARIE 5642 JENN 5642	HARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 ELA RIFKIN COVENTRY LANE FORT WAYNE IN 46804 RIFER L. WILSON COVENTRY LANE FORT WAYNE IN 46804	DIRECT PRESIDE TREA	ors per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00 SURER 1.00	(If n	0. 0.	emplo and def	oyee benefit erred compe	0. 0. uction	other a	allowan	0. 0.
5642 ARIE 5642 JENN 5642	HARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 CLA RIFKIN COVENTRY LANE FORT WAYNE IN 46804 WIFER L. WILSON COVENTRY LANE FORT WAYNE IN 46804 COMPENSATION OF five highest-paid employe "NONE."	PRESIDE TREA	ors per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00 SURER 1.00 Total control of the contro	se inclu	0. 0. uded on li	emple and def	see instr	0. 0. uction:	s). If no	one, o	0. 0. count,
5642 ARIE 5642 JENN 5642	HARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 COVENTRY LANE FORT WAYNE IN 46804 NIFER L. WILSON COVENTRY LANE FORT WAYNE IN 46804 COVENTRY LANE FORT WAYNE IN 46804	PRESIDE TREA	ors per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00 SURER 1.00	se incluverage	0. 0.	emple and def	see instr	0. 0. uction:	s). If no	one, (0. 0. count,
5642 ARIE 5642 JENN 5642	HARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 COVENTRY LANE FORT WAYNE IN 46804 VIFER L. WILSON COVENTRY LANE FORT WAYNE IN 46804 COVENTRY LANE FORT WAYNE IN 46804 Compensation of five highest-paid employe "NONE."	PRESIDE TREA	ris per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00 SURER 1.00 Ter than those (b) Title, and a hours per week	se incluverage	0. 0. uded on li	emple and def	see instr	0. 0. uction:	s). If no	one, o	0. 0. count,
5642 ARIE 5642 JENN 5642	HARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 COVENTRY LANE FORT WAYNE IN 46804 VIFER L. WILSON COVENTRY LANE FORT WAYNE IN 46804 COVENTRY LANE FORT WAYNE IN 46804 Compensation of five highest-paid employe "NONE."	PRESIDE TREA	ris per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00 SURER 1.00 Ter than those (b) Title, and a hours per week	se incluverage	0. 0. uded on li	emple and def	see instr	0. 0. uction:	s). If no	one, o	0. 0. count,
5642 JENN 5642 JENN 5642	AARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 ELA RIFKIN COVENTRY LANE FORT WAYNE IN 46804 NIFER L. WILSON COVENTRY LANE FORT WAYNE IN 46804 COMPENSATION of five highest-paid employe "NONE."	hou devot DIRECT PRESIDE TREA	ris per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00 SURER 1.00 Ter than those (b) Title, and a hours per week	se incluverage	0. 0. uded on li	emple and def	see instr	0. 0. uction:	s). If no	one, o	0. 0. count,
5642 JENN 5642 JENN 5642	HARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 COVENTRY LANE FORT WAYNE IN 46804 VIFER L. WILSON COVENTRY LANE FORT WAYNE IN 46804 COVENTRY LANE FORT WAYNE IN 46804 Compensation of five highest-paid employe "NONE."	hou devot DIRECT PRESIDE TREA	ris per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00 SURER 1.00 Ter than those (b) Title, and a hours per week	se incluverage	0. 0. uded on li	emple and def	see instr	0. 0. uction:	s). If no	one, o	0. 0. count,
5642 JENN 5642 JENN 5642	AARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 ELA RIFKIN COVENTRY LANE FORT WAYNE IN 46804 NIFER L. WILSON COVENTRY LANE FORT WAYNE IN 46804 COMPENSATION of five highest-paid employe "NONE."	hou devot DIRECT PRESIDE TREA	ris per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00 SURER 1.00 Ter than those (b) Title, and a hours per week	se incluverage	0. 0. uded on li	emple and def	see instr	0. 0. uction:	s). If no	one, o	0. 0. count,
5642 JENN 5642 JENN 5642	AARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 ELA RIFKIN COVENTRY LANE FORT WAYNE IN 46804 NIFER L. WILSON COVENTRY LANE FORT WAYNE IN 46804 COMPENSATION of five highest-paid employe "NONE."	hou devot DIRECT PRESIDE TREA	ris per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00 SURER 1.00 Ter than those (b) Title, and a hours per week	se incluverage	0. 0. uded on li	emple and def	see instr	0. 0. uction:	s). If no	one, o	0. 0. count,
5642 JENN 5642 JENN 5642	AARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 ELA RIFKIN COVENTRY LANE FORT WAYNE IN 46804 NIFER L. WILSON COVENTRY LANE FORT WAYNE IN 46804 COMPENSATION of five highest-paid employe "NONE."	hou devot DIRECT PRESIDE TREA	ris per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00 SURER 1.00 Ter than those (b) Title, and a hours per week	se incluverage	0. 0. uded on li	emple and def	see instr	0. 0. uction:	s). If no	one, o	0. 0. count,
5642 JENN 5642 JENN 5642	AARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 ELA RIFKIN COVENTRY LANE FORT WAYNE IN 46804 NIFER L. WILSON COVENTRY LANE FORT WAYNE IN 46804 COMPENSATION of five highest-paid employe "NONE."	hou devot DIRECT PRESIDE TREA	ris per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00 SURER 1.00 Ter than those (b) Title, and a hours per week	se incluverage	0. 0. uded on li	emple and def	see instr	0. 0. uction:	s). If no	one, o	0. 0. count,
5642 JENN 5642 JENN 5642	AARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 ELA RIFKIN COVENTRY LANE FORT WAYNE IN 46804 NIFER L. WILSON COVENTRY LANE FORT WAYNE IN 46804 COMPENSATION of five highest-paid employe "NONE."	hou devot DIRECT PRESIDE TREA	ris per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00 SURER 1.00 Ter than those (b) Title, and a hours per week	se incluverage	0. 0. uded on li	emple and def	see instr	0. 0. uction:	s). If no	one, o	0. 0. count,
5642 JENN 5642 JENN 5642	ARD RIFKIN COVENTRY LANE FORT WAYNE IN 46804 CLA RIFKIN COVENTRY LANE FORT WAYNE IN 46804 RIFER L. WILSON COVENTRY LANE FORT WAYNE IN 46804 Compensation of five highest-paid employe "NONE." a) Name and address of each employee paid more than \$50,0	hou devot DIRECT PRESIDE TREA	ris per week ed to position OR, CHAIRMAN 1.00 NT & SECRETARY 1.00 SURER 1.00 Ter than those (b) Title, and a hours per week	se incluverage	0. 0. uded on li	emple and def	see instr	0. 0. uction:	s). If no	one, o	0. 0. count,

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	Employees,
3 Five	highest-paid independent contractors for professional services. See instructions. If none, enter "NO	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
	······································	-
	er of others receiving over \$50,000 for professional services	0
Part IX-A	Summary of Direct Charitable Activities	
	indation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number one and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 NON	E	
		0.
2		
		-
3		
		-
4		-
		-
Part IX-B	Summary of Program-Related Investments (see instructions)	
	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NON		
		0.
2		-
		-
All other pre	ogram-related investments. See instructions	
3	g i sales in terminal decimandations	
		-
		·
Total. Add I	ines 1 through 3	
		Form 990-PF (2019)

Part	•	ign fo	undations,
	see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	T- & T	
'	purposes.		
а	Average monthly fair market value of securities	1a	17,731,766.
b	Average of monthly cash balances	1b	894,524.
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	18,626,290.
е	Reduction claimed for blockage or other factors reported on lines 1a and	243.55	
	1c (attach detailed explanation)	1	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	18,626,290.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	279,394.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	18,346,896.
6	Minimum investment return. Enter 5% of line 5	6	917,345.
Part		ounda	
1	Minimum investment return from Part X, line 6	1	917,345.
2a	Tax on investment income for 2019 from Part VI, line 5	Z NEW AN	
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b	- · · · · · · · · · · · · · · · · · · ·	
С	Add lines 2a and 2b	2c	9,243.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	908,102.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	908,102.
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	908,102.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.	で複響	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	954,430.
b	Program-related investments—total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	За	
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	954,430.
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	9,243.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	945,187.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculatin qualifies for the section 4940(e) reduction of tax in those years.	-	ther the foundation
BAA	REV 06/02/20 PRO		Form 990-PF (2019)

Part	XIII Undistributed Incom	e (see instructi	ons)			
			(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 line 7	from Part XI,				908,102
2	Undistributed income, if any, as of	the end of 2019:				
а					<u>896,533.</u>	
b	Total for prior years: 20, 2					
3	Excess distributions carryover, From 2014	if any, to 2019:				
a h	From 2015	0.				
c	From 2016	0.				
d	From 2017	0.				
е	From 2018	0.				a me e
f	Total of lines 3a through e .		0.	Estate III		
4	Qualifying distributions for 201 line 4: ► \$ 954,430.					
а	Applied to 2018, but not more t				896,533.	
b	Applied to undistributed incom (Election required—see instruct					
С	Treated as distributions out of crequired—see instructions) .	• •				
d	Applied to 2019 distributable ar					57,89 <u>7</u>
C	Remaining amount distributed of	•	·			
5	Excess distributions carryover a (If an amount appears in colum amount must be shown in colur	in (d), the same				
6	Enter the net total of eac indicated below:	h column as				
а	Corpus. Add lines 3f, 4c, and 4e.		0.			
b	Prior years' undistributed incline 4b from line 2b	ome. Subtract		0.		
С	Enter the amount of prior years income for which a notice of been issued, or on which the tax has been previously assess	deficiency has section 4942(a)				
d	Subtract line 6c from line amount—see instructions .	6b. Taxable		0.		
е	Undistributed income for 2018 4a from line 2a. Taxable instructions		\$ 7 1 4 4 5 7 1 2 1		0.	
f	Undistributed income for 2019. 4d and 5 from line 1. This and distributed in 2020					850,205.
7	Amounts treated as distribution to satisfy requirements impos 170(b)(1)(F) or 4942(g)(3) (Ele required—see instructions) .	sed by section				
8	Excess distributions carryover applied on line 5 or line 7 (see in		0.			
9	Excess distributions carryo Subtract lines 7 and 8 from line	ver to 2020.	0.	1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1		
10	Analysis of line 9:					
а	Excess from 2015	0.				
b	Excess from 2016	0.		Transferrence (1985)		
c	Excess from 2017	<u></u>	Annung (1971 International Administration of the Control of the Co			
ď	Excess from 2018 Excess from 2019	0.				

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

c Any submission deadlines:

factors:

BAA

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

3 Grants and Contributions Paid During t			ture Payment	, <u> </u>
Recipient	If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
GRAND TETON MUSIC FESTIVAL			i	
4015 W LAKE CREEK DR #1	ļ			
WILSON WY 83014		501 (c) (3)	ANNUAL FUND	103,500.
BASCOM PALMER EYE INSTITUTE				
900 NW 17TH STREET				
MIAMI FL 33136		501 (c) (3)	OPERATING SUPPORT	37,500.
FRANCINE'S FRIENDS				-
709 CLAY STREET				
FORT WAYNE IN 46802		501(c)(3)	MOBILE MAMMOGRAPHY PROGRAM	10,000.
SOCIETY FOR THE PRESERVATION OF THE GREAT AMERICAN SONGBOOK				
130 BIRDSEYE ROAD				
FARMINGTON CT 06032		501(c)(3)	OPERATING SUPPORT	5,000.
JACKSON HOLE LAND TRUST				
555 EAST BROADWAY				F0 000
JACKSON WY 83001		501(c)(3)	ANNUAL FUND	50,000.
KRAVIS CENTER FOR PERFORMING ARTS				
701 OKEECHOBEE BLVD				
WEST PALM BEACH FL 33401-6399		501 (c) (3)	ANNUAL CAMPAIGN	22,500.
GRAND TETON NATIONAL PARK FOUNDATION				
PO BOX 249				F.F. 000
MOOSE WY 83012		501 (c) (3)	OPERATING SUPPORT	55,000.
TRI COUNTY HUMANE SOCIETY				
21287 BOCA RIO ROAD		502 () (2)		25 222
BOCA RATON FL 33433		501 (c) (3)	OPERATING SUPPORT	25,000.
PALM BEACH OPERA				
415 S OLIVE AVE		F01 (-) (2)	ODDDAGTNG CHDDODG	215 000
WEST PALM BEACH FL 33401		501 (C) (3)	OPERATING SUPPORT	215,000.
See Statement				
				430 030
				430,930.
		,		'
Total			▶ 3a	954,430.
b Approved for future payment				
			[
Total	<u> </u>	<u> </u>	▶ 3b	

Form 990-PF: Return of Private Foundation

Part XV, Line 3a: Grants and Contributions Paid During the Year

Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
RICHARD DAVID KANN MELANOMA FDN		501 (c)	OPERATING SUPPORT	25,000.
621 CLEARWATER PARK ROAD		(3)		
WEST PALM BEACH, FL 33401				
ISRAEL CHILDREN'S CENTER		501 (c)	OPERATING SUPPORT	5,000.
3275 WEST HILLSBORO BLVD, SUITE 102		(3)		
DEERFIELD BEACH, FL 33442				
INTERNATIONAL SOCIETY OF PALM BEACH		501(c)(3)	OPERATING SUPPORT	10,000.
44 COCOANUT ROW				
PALM BEACH, FL 33480				
BLESSINGS IN A BACKPACK		501(c)(3)	OPERATING SUPPORT	5,000.
111 EAST WAYNE ST, STE 555			1	
FORT WAYNE, IN 46802		•		
FILM SOCIETY OF LINCOLN CENTER		501(c)(3)	GENERAL SUPPORT	69,240.
165 WEST 65TH ST				
NEW YORK, NY 10023				
TEMPLE AVODAT SHALOM		501(c)(3)	OPERATING SUPPORT	1,690.
385 HOWLAND AVENUE				
RIVER EDGE, NJ 07661				
ACHILLES INTERNATIONAL		501(C)(3)	CONCERT TO	10,000.
42 WEST 38TH STREET, SUITE 400			BENEFIT WOUNDED	
NEW YORK, NY 10018			VETERANS	
AMERICAN FRIENDS OF SHEBA MEDICAL CENTER		501(C)(3)	SUPPORT FOR	10,000.
250 WEST 57TH STREET, SUITE 711			IMMUNOTHERAPY	
NEW YORK, NY 10107				
BIG DOG RANCH RESCUE		501(C)(3)	OPERATING SUPPORT	5,000.
1090 JUPITER PARK DRIVE, STE 201				
JUPITER, FL 33458				
PALM BEACH OPERA GUILD		501(C)(3)	OPERATING SUPPORT	20,850.
415 SOUTH OLIVE AVENUE				
WEST PALM BEACH, FL 33401				
PALM BEACH SYMPHONY		501(C)(3)	OPERATING SUPPORT	28,000.
44 COCOANUT ROW, M207B				
PALM BEACH, FL 33480				
CLIMB WYOMING		501(C)(3)	OPERATING SUPPORT	5,000.
1001 W 31ST STREET				
CHEYENNE, WY 82001				
ISLAND DOLPHIN CARE INC.		501(C)(3)	PEOPLE/OCEANS/	5,000.
150 LORELANE PLACE			DOLPHINS MATCH	
KEY LARGO, FL 33037			CAMPAIGN	
NICKLAUS CHILDREN'S HEALTH CARE FOUNDATION		501(C)(3)	OPERATING SUPPORT	5,000.
11770 US HIGHWAY ONE, STE 308				-,
NORTH PALM BEACH, FL 33408				
CANCER ALLIANCE OF HELP & HOPE, INC.	<u> </u>	501(C)(3)	BENEFACTOR	7,850.
PO BOX 3292			SPONSORSHIP	
2011 0010				

Form 990-PF: Return of Private Foundation

Part XV, Line 3a: Grants and Contributions Paid During the Year

	dons I ald During th			
Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	·		<u> </u>	
IT HAPPENED TO ALEXA FOUNDATION		501(C)(3)	OPERATING SUPPORT	1,000.
411 CENTER STREET				
LEWISTON, NY 14092	1			
EMBASSY THEATRE FOUNDATION, INC.		501 (C) (3)	OPERATING SUPPORT	5,000.
125 W. JEFFERSON BLVD		301(0)(0)		3,000.
FORT WAYNE, IN 46802				
ALLIANCE FOR EATING DISORDERS AWARENESS	 	501 (C) (3)	PSYCHOLOGICAL	5,000.
1649 FORUM PLACE #2		301(0)(3)	SERVICES PROGRAM	3,000.
			BRIVE OF THOUSAND	
WEST PALM BEACH, FL 33401		F01 (0) (2)	MECEMERTA COCTAL	50,000.
CENTRAL FUND OF ISRAEL		[501 (C) (3)	MEGEMERIA SOCIAL BUSINESS AND	50,000.
980 AVENUE OF THE AMERICAS			SCHOOL	
NEW YORK, NY 10018				
PALM BEACH ROUND TABLE		501(C)(3)	OPERATING SUPPORT	3,200.
44 COCOANUT ROW, STE T-12				
PALM BEACH, FL 33480				
RESCUE MISSION		501(C)(3)	COMMUNITY MEALS	5,000.
301 W SUPERIOR ST			PROGRAM FOR	
FORT WAYNE, IN 46802			CHRISTMAS	
AMERICAN LUNG ASSOCIATION		501(C)(3)	OPERATING SUPPORT	5,000.
2701 N. AUSTRALIAN AVE, STE 100		}		·
WEST PALM BEACH, FL 33407				
JEWISH FEDERATION OF PALM BEACH COUNTY		501 (C) (3)	OPERATING SUPPORT	10,000.
1 HARVARD CIRCLE, STE 100		301(0)(3)		20,000
WEST PALM BEACH, FL 33409				
LIFE - LEADERS IN FURTHERING EDUCATION		501 (C) (3)	OPERATING SUPPORT	30,000.
1720 S OCEAN BLVD		301(0)(3)	OT BIGHTING SOLI ON	30,000.
MANALAPAN, FL 33462				
THE PERLMAN MUSIC PROGRAM		501 (C) (3)	OPERATING SUPPORT	7,000.
19 WEST 69TH ST, STE 1101				,,000
NEW YORK, NY 10023			į į	
AMERICAN FRIENDS OF MAGEN DAVID ADOM		F01/C1/21	OPERATING SUPPORT	10,000.
		301(0)(3)	OPERATING SUPPORT	10,000.
352 SEVENTH AVENUE, STE 400				
NEW YORK, NY 10001		501 (0) (2)	ODEDAMINO	10,000.
CHILDRENS HOME SOCIETY OF FLORIDA		201(C)(3)	OPERATING SUPPPORT	10,000.
3333 FOREST HILL BLVD			Sofficial	
WEST PALM BEACH, FL 33406				
INTERNATIONAL FRIENDS OF THE KHM		501(C)(3)		56,600.
C/O HARNIK LAW FIRM, 666 THIRD AVE 10TH FLOOR			EXHIBITION	
NEW YORK, NY 10017		501 (5) (5)		10.000
JEWISH FEDERATION OF FORT WAYNE		501(C)(3)	VIOLINS OF HOPE	10,000.
5200 OLD MILL ROAD				
FORT WAYNE, IN 46807				
RIOULT		501(C)(3)	OPERATING SUPPORT	2,000.
34-01 STEINWAY STREET				
ASTORIA, NY 11101				

Form 990-PF: Return of Private Foundation

Part XV, Line 3a: Grants and Contributions Paid During the Year

Continuation Statement

If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	501(C)(3)	OPERATING SUPPORT	5,000.
	501(C)(3)	CAREER TRANSITION	2,500.
		· - · · -	
		PROGRAM	
	501(C)(3)	OPERATING SUPPORT	1,000.
]		
	individual, show any relationship to any foundation manager or substantial	individual, show any relationship to any foundation manager or substantial contributor 501(C)(3)	individual, show any relationship to any foundation manager or substantial contributor 501(C)(3) OPERATING SUPPORT

430,930.

Ente	r gross amounts unless otherwise indicated.	Unrelated bu	Isiness income	Excluded by sect	ion 512, 513, or 514	(e)
_	_	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemption function income (See instructions.)
1	Program service revenue:					
	a					
	b					
	<u> </u>					
	d					
	e	<u> </u>	<u> </u>			
	T	<u> </u>				
2	g Fees and contracts from government agencies	<u> </u>				- -
2	Membership dues and assessments					·
3 4	Interest on savings and temporary cash investments Dividends and interest from securities	<u> </u>		1.4	300 410	<u> </u>
5	Net rental income or (loss) from real estate:	6.36.Ac.H.A. A6	San and Jack 1	14	389,410.	
3	·	Significa Campullilla Signus	HIDEL JAMINITORINI - TABATATINI HITE, TABA	inns)))Ner "Johnneisendeit", och minnst	MICO DE LA LINE CONTRACTOR LA	and the state of t
	a Debt-financed property		-			
6	b Not debt-financed property				<u> </u>	
6 7	Net rental income or (loss) from personal property Other investment income					
8				18	649 069	
9	Gain or (loss) from sales of assets other than inventory			10	648,068.	-
10	Net income or (loss) from special events Gross profit or (loss) from sales of inventory					
11		<u> </u>				
• •	<u> </u>	<u> </u>				
		<u> </u>				
	d					
						
12	Subtotal. Add columns (b), (d), and (e)	States see the see the		• \$ \$. 1.\$ \$4 \$\frac{1}{2} \text{\$2.}\$	1,037,478.	
12					13	1,037,478.
10	i otal. Add into 12, coldini is (b), (d), and (e)				15	1,037,470.
See						
	worksheet in line 13 instructions to verify calculation	s)	ent of Exemp	Purposes	 	
Pai	worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s) ccomplishm		-	-A contributed in	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the tions.)
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed ir oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the tions.)
Par Line	worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s) ccomplishm		-	-A contributed in oses) (See instruc	nportantly to the tions.)

		Organization	ons										
1	in s			tly engage in any of ton 501(c)(3) organiz								Yes N	0
а	Tran	sfers from the rep	oorting foundatio	n to a noncharitable	exempt orga	anization	of:						
					_						1a(1)	>	X
	(2)	Other assets .									1a(2)	7	×
b	Othe	er transactions:										ا التعا	Ī
	(1) S	Sales of assets to	a noncharitable	exempt organization							1b(1)		ζ.
				aritable exempt organ							1b(2)		×
				ther assets							1b(3)		K
											1b(4)		K
		oans or loan gua	-							•	1b(5)		<u>`</u>
		•		rship or fundraising							1b(6)		÷
С				g lists, other assets,							1c		÷
d				Yes," complete the		-							
•				ervices given by the									
				ingement, show in co									
(a) Line		(b) Amount involved		oncharitable exempt organ			otion of transf						
						(-,							_
	-												_
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2a b	desc		01(c) (other than	affiliated with, or resection 501(c)(3)) or alle.							☐ Yes	s 🗵 No	o
		(a) Name of organiz	zation	(b) Type of	organization			(c) De:	scription	of relation	nship		_
													_
		<u>-</u>											_
													
		· <u> </u>											_
	1 11-2		daalaas that 1 5			· ·			h = = \$ - \$	an i lan a a d	d	dead at an a	
e i a n				nined this return, including ac r than taxpayer) is based on a					Dest of I	ny knowie	age and be	eller, it is tru	Je,
Sign Iere		AMMULU afure of officer/or trust	L.Wils	11 12 15 Date	` .	ASURER	_		_[reparer sh	this return own below Yes \bigcup No	?
		Print/Type preparer's		Preparer's signature			Date			7	PTIN		=
aid										if nployed			
repa		Firm's name ▶						Erm's	s EIN ▶	,			_
Jse (nly	Firm's address	-					Phone			-		_
		i i i i addiess						1 110116	- 11U			-PF (201	_

Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Other Income

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income
OTHER PORTFOLIO INCOME		468.	
	Total	468.	-

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
EXCISE TAX	15,000.			
FOREIGN TAXES	6,031.	6,031.		
Tota	21,031.	6,031.		

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
PORTFOLIO DEDUCTIONS FROM SCH K-1		7,470.		
ENTITY REPORT FEE	23.			
Total	23.	7,470.		

Form 990-PF: Return of Private Foundation

Other Decreases

Description	Amount
NET COST BASIS ADJUSTMENTS	18,417.
CHECKS ISSUED, HAVE NOT CLEARED BANK	25,000.
Total	43,417.

Name THE LEN-ARI FOUNDATION, INC.	Employer Identification No 20-1317221
Asset Information:	
Description of Property SEE ATTACHED	
Business Code Exclusion Code <u>18</u>	
Date Acquired How Acquired	
Date Sold Name of Buyer .	
Check Box, if Buyer is a Business	5 604 710
Sales Price6, 272, 786. Cost or other basis (do not reduce by depreciat	
Sales Expense0. Valuation Method	
Total Gain (Loss) 648, 068. Accumulated Depreciation 648, 068.	
Description of Property	
Business Code Exclusion Code	
Date Acquired How Acquired	
Date Sold Name of Buyer	
Check Box, if Buyer is a Business	
Sales Price Cost or other basis (do not reduce by depreciate	
Sales Expense Valuation Method	
Total Gain (Loss)	· · ·
Description of Property	
Business Code Exclusion Code	
Date Acquired How Acquired	
Date Sold . Name of Buyer .	
Check Box, if Buyer is a Business	
Sales Price Cost or other basis (do not reduce by depreciat	ion)
Sales Expense Valuation Method	
Total Gain (Loss) Accumulated Depreciation	<u></u>
Description of Property	
Business Code Exclusion Code	
Date Acquired How Acquired	
Date Sold Name of Buyer	
Check Box, if Buyer is a Business .	
Sales Price Cost or other basis (do not reduce by depreciat	ion)
Sales Expense Valuation Method	
Total Gain (Loss) Accumulated Depreciation	
Description of Property	
Business Code Exclusion Code	
Date Acquired How Acquired	
Date Sold . Name of Buyer	
Check Box, if Buyer is a Business	
Sales Price Cost or other basis (do not reduce by depreciat	ion)
Sales Expense Valuation Method	,
Total Gain (Loss) Accumulated Depreciation	
Totals:	
Total Gain (Loss) of all assets 648,068.	
Gross Sales Price of all assets 6, 272, 786.	
Unrelated Business Income Business Code	
Excluded by section 512, 513, 514 648, 068. Exclusion Code . 18	-
Related/Exempt Function Income	-
Trouteur Exempt 1 direction intention 1	
QuickZoom here to Form 990-PF, Page 1	
QuickZoom here to Form 990-PF, Page 12	

Legal and Professional Fees

Name		Employer Identification No
THE LEN-ARI FOUNDATION,	INC.	20-1317221

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
otal to Form 990-	PF, Part I, Line 16a				

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Total to Form 990-F	PF, Part I, Line 16b				

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MERRILL LYNCH	INVESTMENT FEES	119,469.	120,916.		
Total to Form 990	PF, Part I, Line 16c	119,469.	120,916.		

Name IHE LEN-ARI FOUNDATION,	INC.			-	ver Identification No 317221
Line 10a - Investments - US and State Government Obligations:	End o State and Local Obligations Book Value	f Year State and Local Obligations FMV	US Govern Obligati Book Va	ons	f Year US Government Obligations FMV
Tot to Fm 990-PF, Pt II, Ln 10a					
Line 10b - Investmo	ents - Corporate	Stock:	Book Value	-	f Year Fair Market Value
ALTRIA GROUP INC. CHEVRON CORP EXXON MOBIL CORP See L-10b Stmt Totals to Form 990-PF, Part II, I	ine 10b		21,		27,923. 41,598. 24,837. 13,042,737. 13,137,095.
Line 10c - Investme	ents - Corporate I	Bonds:	Book Value	· .	f Year Fair Market Value
MERRILL LYNCH A/C XXX-X	K3532		1,114,	646.	1,185,712.
Totals to Form 990-PF, Part II, I	ine 10c		1,114,	646.	1,185,712.
Line 12 - Investme	ents - Mortgage I	oans:	Book Value		f Year Fair Market Value
Totals to Form 990-PF, Part II, I	_ine 12				
Line 13 - Inve	estments - Other:	:	Book Value		f Year Fair Market Value
THE ENDOWMENT TEI FUND MERRILL LYNCH A/C XXX-X	K3532 MUTUAL I	FUNDS	190, 1,479,	728. 835.	209,981. 1,385,515.
Totals to Form 990-PF, Part II, I	_ine 13		1,670,	563.	1,595,496.

Additional information from your 2019 Federal Exempt Tax Return

Form 990-PF Part II Line 10, 12 and 13 Investments

L-10b Stmt

Line 10b Description	Line 10b Book	Line 10b FMV
STEEL DYNAMICS INC	674,375.	851,000.
PHILIP MORRIS INTL INC	23,955.	50,581.
MERRILL LYNCH A/C XXX-X3528	3,931,318.	6,808,261.
MERRILL LYNCH A/C XXX-X3529	2,408,338.	2,883,232.
MERRILL LYNCH A/C XXX-X3530	917,449.	1,285,096.
MERRILL LYNCH A/C XXX-X3531	981,688.	1,164,567.
Total	8,937,123.	13,042,737.

Len Ari Foundation Inc.

2019Summary Attachment
Part I
Line 7 Capital Gain net income (from Part IV, Line 2)

•	•		1
1	1		1
55,452	51,015	•	4,437
1,170,114	1,156,459	2,471	16,126
1,245,322	838,980	1,635	407,977
1,038,286	1,010,069	2,683	30,901
948,267	816,129	1,815	133,953
apital Gain Distributions 483	ı	•	483
169,835	196,902	16	(27,050)
252,170	186,405	179	65,945
apital Gain Distributions 608	1	•	809
773,377	283,631	1,319	(8,935)
319,385	314,724	1,111	5,773
479,132	470,934	1	8,199
488,661	476,163	1,043	13,541
apital Gain Distributions	,	•	1
531 Short Term 531 Long Term 532 Short Term 532 Long Term 532 Long Term 532 Long Term Capital Gain Distributions	283,631 314,724 470,934 476,163	1,319 1,111 1,043	<u> </u>

651,958

12,274

\$ 6,441,094 \$5,801,410 \$

Total