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2019

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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

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

Open to Public Inspection

For	caler	ndar year 2019, or tax year beginning 01-01-20)19 , ar	nd ending 12-31-	2019	
		Indation DN FOUNDATION INC		A Employer id	entification numbe	r
				22-3299243		
		d street (or P.O. box number if mail is not delivered to street address) /ERCREST 230 COURT SQUARE	Room/suite	B Telephone nu	mber (see instructio	ns)
				(973) 994-4021	L	
		n, state or province, country, and ZIP or foreign postal code :SVILLE, VA 22902		C If exemption	application is pendin	g, check here
G Ch	neck al	I that apply: □ Initial return □ Initial return of a	former public charity	D 1. Foreign or	ganizations, check he	
u c.	icck ui	Final return Amended return	Tormer public charity	1	ganizations meeting	▶ □
		☑ Address change ☐ Name change		test, chec	k here and attach co	mputation 🕨 🔲
H C	neck ty	vpe of organization: \checkmark Section 501(c)(3) exempt private	foundation		undation status was f n 507(b)(1)(A), chec	
	Section		e private foundation			
		from Part II col (c)	☑ Cash ☐ Accru		ation is in a 60-mont n 507(b)(1)(B), chec	
		◆\$ 4,623,261	be on cash basis.)			
Pa	rt I	Analysis of Revenue and Expenses (The total	,	<u> </u>	Ι	(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b) Net investment income	(c) Adjusted net income	for charitable purposes
		equal the amounts in column (a) (see instructions).)	books	meome	meome	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)				
	2	Check ► ✓ if the foundation is not required to attach				
		Sch. B		60		
	3 4	Interest on savings and temporary cash investments Dividends and interest from securities	59,589			
	-т 5а	Gross rents	33,303	33,303		
	b	Net rental income or (loss)				
<u>e</u>	6a	Net gain or (loss) from sale of assets not on line 10	162,838			
Revenue	b	Gross sales price for all assets on line 6a				
Re	7	654,547 Capital gain net income (from Part IV, line 2)		162,838		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less: Cost of goods sold				
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	222,487	222,487		
-	13	Compensation of officers, directors, trustees, etc.		·		
	14	Other employee salaries and wages				
es	15	Pension plans, employee benefits				
ens	16a	Legal fees (attach schedule)				
Expenses	b	Accounting fees (attach schedule)				
ve	17	Other professional fees (attach schedule)				
rati	18	Taxes (attach schedule) (see instructions)	4 1,500			
and Administrative	19	Depreciation (attach schedule) and depletion				
Ē	20	Occupancy				
ΑÞ	21	Travel, conferences, and meetings				
a	22	Printing and publications				
ing	23	Other expenses (attach schedule)	70			
Operating	24	Total operating and administrative expenses. Add lines 13 through 23	1 670	0		0
đ	25	Contributions, gifts, grants paid	1,570 211,500			211,500
	26	Total expenses and disbursements. Add lines 24 and	,			,
		25	213,070	0		211,500
	27	Subtract line 26 from line 12:				
	а	Excess of revenue over expenses and disbursements	9,417			
	b	Net investment income (if negative, enter -0-)		222,487		
For	c Paper	Adjusted net income (if negative, enter -0-)		Cat. No. 11289)	(F	m 990-PF (2019)

Beginning of year

3,612,482

3,612,482

3,612,482

3,612,482

3,612,482

Balance Sheets Attached schedules and amounts in the description column

disqualified persons (attach schedule) (see instructions)

Other notes and loans receivable (attach schedule) ▶

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

Investments—corporate bonds (attach schedule)

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Capital stock, trust principal, or current funds

Total net assets or fund balances (see instructions)

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

Total net assets or fund balances at beginning of year-Part II, column (a), line 29 (must agree with end-

Analysis of Changes in Net Assets or Fund Balances

Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds

Investments—land, buildings, and equipment: basis ▶ _____

Less: accumulated depreciation (attach schedule) ▶ _____

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

Less: accumulated depreciation (attach schedule) ▶ _____

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

Foundations that follow FASB ASC 958, check here

Receivables due from officers, directors, trustees, and other

Less: allowance for doubtful accounts

Less: allowance for doubtful accounts ▶

Land, buildings, and equipment: basis ▶ _

instructions. Also, see page 1, item I)

and complete lines 24, 25, 29 and 30. Net assets without donor restrictions . . .

and complete lines 26 through 30.

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

Net assets with donor restrictions

Other assets (describe > _

Other liabilities (describe ▶_

Grants payable

Page 2

4,573,136

4,623,261

50,125

End of year

3,571,899

3,621,899

3,621,899

3,621,899

3,621,899

1

3,612,482

50,000

Form 990-PF (2019)

Part II

5

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9 10a

b

C

11

12

13 14

15

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17

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20 21

22

23

24 25

26

28

29

30

Part III

Liabilities

Fund Balances

ŏ

Assets 27

Net

Page **3**

Capital Gaills	and Losses for Tax on Thivest	inent Income			
	e the kind(s) of property sold (e.g., rehouse; or common stock, 200 shs	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1 a THRU MORGAN STANLEY	Р				
b THRU MORGAN STANLEY	Р				
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain d	h) or (loss) or minus (g)
a 10	2,330		102,254	(-) (-	76
	2,217		389,455		162,762
	,		,		· · · · · ·
d					
e					
	-h		12/21/60		
Complete only for assets	showing gain in column (h) and ow			Gains (Col. ((I) h) gain minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) s of col. (i) l. (j), if any	col. (k), but not	less than -0-) or om col.(h))
а					76
b					162,762
с					
d					
e					
• •	ain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi	. , . ,)-	3	162,838
Part V Qualification U	Inder Section 4940(e) for Re	educed Tax on Net	Investment Inc	come	
	rivate foundations subject to the sec				
If section 4940(d)(2) applies, le	ave this part blank.				
If "Yes," the foundation does no	e section 4942 tax on the distributal t qualify under section 4940(e). Do	not complete this part	· ·		es 🔽 No
1 Enter the appropriate am	ount in each column for each year;	see instructions before	e making any entries	5.	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	ole-use assets	(d) Distribution rat (col. (b) divided by o	
2018	200,300		4,334,479		0.046211
2017	206,000		4,207,738		0.048957
2016	197,163		3,764,206		0.052378
2015	184,350		4,024,767		0.045804
2014	202,214		3,825,614		0.052858
2 Total of line 1, column (c	1)		2		0.246208
number of years the foun	for the 5-year base period—divide of dation has been in existence if less ncharitable-use assets for 2019 from	than 5 years	.0, or by the 3		0.049242 4,202,075
5 Multiply line 4 by line 3		*	5		206,919
• • • • •	ent income (1% of Part I, line 27b)		6		2,225
			7		209,144
	ons from Part XII, line 4 ,		8		211,500
	ater than line 7, check the box in Pa			g a 1% tax rate. Se	<u> </u>
				Fo	orm 990-PF (2019)

Form	990-PF (2019)						F	Page 6
Pa	rt VIII-B Statements R	egarding	Activities for Which	Form 4720 May Be	Required (continued)			
5a	During the year did the found	dation pay o	r incur any amount to:				Yes	No
	(1) Carry on propaganda, or	otherwise a	ttempt to influence legis	lation (section 4945(e))?	☐ Yes 🗸	No.		
	(2) Influence the outcome of	f any specific	public election (see sec	tion 4955); or to carry	L les L	"		
	on, directly or indirectly,	any voter re	gistration drive?		· · 🗌 Yes 🗸	No		
	(3) Provide a grant to an ind	ividual for tr	avel, study, or other sim	nilar purposes?	☐ Yes 🗸	No		
	(4) Provide a grant to an org			· -				
	in section 4945(d)(4)(A)?				· · · Pes 🗸	No		
	(5) Provide for any purpose		- ·					
L	educational purposes, or	•	•		∟ Yes 🖭	No		
D	If any answer is "Yes" to 5a(Regulations section 53.4945					5b		
	Organizations relying on a cu				_	, 30		+-
С	If the answer is "Yes" to ques]		
·	tax because it maintained ex			•	🗆 🗆			
	If "Yes," attach the statemen	•			' ' ∐ Yes ∐	No		
6a	Did the foundation, during th		_	• •	ıms on			
Ju	a personal benefit contract?.			cou,, to pu, premie		_		
b	Did the foundation, during th			directly, on a personal be	nefit contract?	No 6b		No
	If "Yes" to 6b, file Form 8870		, ,	,, ,				
7a	At any time during the tax ye	ear, was the	foundation a party to a p	orohibited tax shelter trai	nsaction? Yes	N		
b	If "Yes", did the foundation re	eceive any p	roceeds or have any net	income attributable to th	ne transaction?	NO 7b		
8	Is the foundation subject to t	he section 4:	960 tax on payment(s)	of more than \$1,000,000	in remuneration or			
	excess parachute payment d	uring the ye	ar?		· · 🗌 Yes 🗸	No L		
	Information Al	out Offic	ers, Directors, Trus	tees, Foundation Ma	nagers, Highly Paid E	-110	i,	
Pa	and Contractor	rs						
1	List all officers, directors,	trustees, fo	undation managers a	nd their compensation	See instructions			
	6 3 N	(b) Title, and average	(c) Compensation (If		(e) Expe	nse acc	count,
	(a) Name and address		hours per week devoted to position	not paid, enter -0-)	employee benefit plans and deferred compensation		allowan	
RICH	ARD E KROON	PRES	. & TREA	- ,				0
	SILVERCREST 230 COURT SQUARE	0.50						
	LOTTESVILLE, VA 22902	0500	ETABY	_				
	JANE SHEEHAN KROON SILVERCREST 230 COURT SQUARE	0.50	ETARY	0		기		0
	LOTTESVILLE, VA 22902							
DAVI	D FLEMING KROON	TRUS		0	1)		0
	SILVERCREST 230 COURT SQUARE	000.0	10					
	LOTTESVILLE, VA 22902 Compensation of five high	est-naid en	nlovees (other than t	 hose included on line 1	 —see instructions). If no	ne. enter '	NONE	. "
	compensation of five mgm	cot para en			(d) Contributions to	no, circo		· <u>·</u>
(a)	Name and address of each em	ployee paid	(b) Title, and average hours per week	(c) Compensation	employee benefit	(e) Exper		
	more than \$50,000		devoted to position	(c) compensuion	plans and deferred compensation	other a	llowanc	ces
NON	 F				compensation			
	_							
				<u> </u>				
Tota	l number of other employees p	paid over \$5	0,000					

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		•
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rel organizations and other beneficiaries served, conferences convened, research papers produ	evant statistical information such as the numbe uced, etc.	r of Expenses
1	,	
2		_
3		
4		
Part IX-B Summary of Program-Related Investments (see	instructions)	
Describe the two largest program-related investments made by the foundation during t		Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		•
Iotal. Add lines 1 through 3	 	Form 900 PE (2010)

	organizations check here $ ightharpoonup$ and do not complete this part.)					
1	Minimum investment return from Part X, line 6		 		1	210,104
2a	Tax on investment income for 2019 from Part VI, line 5	2a		2,225		
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b				
С	Add lines 2a and 2b		 		2c	2,225
3	Distributable amount before adjustments. Subtract line 2c from line 1		 		3	207,879
4	Recoveries of amounts treated as qualifying distributions		 		4	

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

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

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

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

5

6

7

1a

1b

2

За 3h

4

5

207.879

207.879

211,500

211,500

2.225

209.275

Form 990-PF (2019)

5

6

1

2

3

4

5

b

Part XII

4a from line 2a. Taxable amount-see instructions f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must

be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . . 9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.

10 Analysis of line 9: a Excess from 2015. b Excess from 2016. c Excess from 2017. d Excess from 2018. e Excess from 2019.

Undistributed Income (see instructions)

Part XIII

Page 9

		CO, pas	I cars prior to Loto		
1	Distributable amount for 2019 from Part XI, line 7				207,879
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only			148,031	
b	Total for prior years: 20				
3	Excess distributions carryover, if any, to 2019:				
а	From 2014				
b	From 2015				
С	From 2016				
d	From 2017				
е	From 2018				
f	Total of lines 3a through e				
4	Qualifying distributions for 2019 from Part				
	XII, line 4: ► \$ 211,500				
а	Applied to 2018, but not more than line 2a			148,031	
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election				_
	required—see instructions)				
d	Applied to 2019 distributable amount				63,469
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2019.				
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount —see instructions				

(a)

Corpus

(b)

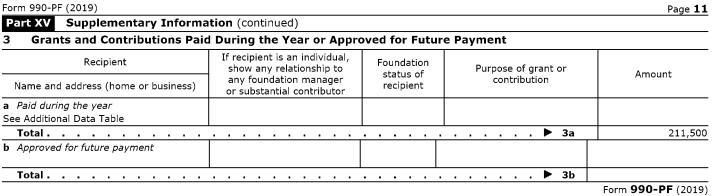
Years prior to 2018

(c)

2018

_	remaining amount distributed out of corpus		
5	Excess distributions carryover applied to 2019.		
	(If an amount appears in column (d), the same amount must be shown in column (a).)		
6	Enter the net total of each column as indicated below:		
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5		
b	Prior years' undistributed income. Subtract line 4b from line 2b		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		
d	Subtract line 6c from line 6b. Taxable amount —see instructions		
е	Undistributed income for 2018. Subtract line		

144,410



ter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
a					
b					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments			14	60	
Dividends and interest from securities			14	59,589	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property Other investment income					
Gain or (loss) from sales of assets other than					
inventory			18	162,838	
Net income or (loss) from special events:			10	102,000	
Gross profit or (loss) from sales of inventory					
Other revenue: a					
b					
c d					
Δ					
e Subtotal, Add columns (b), (d), and (e).				222 487	
Subtotal. Add columns (b), (d), and (e).			13	222,487 3	222,487
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcu	ılations.)			222,487	222,487
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the substitution of the substit substitution of the substitution of the substitution of the sub	ulations.) ne Accomplisi income is report	nment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	222,487
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second section of the second s	ulations.) ne Accomplisi income is report	nment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	222,487
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	ulations.) ne Accomplisi income is report	nment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	222,487
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	ulations.) ne Accomplisi income is report	nment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	222,487
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	ulations.) ne Accomplisi income is report	nment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	222,485
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculate to the second	ulations.) ne Accomplisi income is report	nment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	222,487
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculate to the second	ulations.) ne Accomplisi income is report	nment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	222,485
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculate to the second	ulations.) ne Accomplisi income is report	nment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	222,487
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	ulations.) ne Accomplisi income is report	nment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	222,487
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the second s	ulations.) ne Accomplisi income is report	nment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	222,487
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculate to the second	ulations.) ne Accomplisi income is report	nment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	222,487
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculate to the second	ulations.) ne Accomplisi income is report	nment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	222,487
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculate to the second	ulations.) ne Accomplisi income is report	nment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	222,487
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculate to the second	ulations.) ne Accomplisi income is report	nment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	222,48
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcurt XVI-B Relationship of Activities to the second sec	ulations.) ne Accomplisi income is report	nment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	222,48
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculate to the second	ulations.) ne Accomplisi income is report	nment of Exem	pt Purposes If Part XVI-A contribut	ted importantly to	222,48

Form 990-PF	(2019)				Pa	ge 13
Part XVII	Information Re Exempt Organiz		ions and Relationships With Nonchari	table		
		directly engage in any of the following with a organizations) or in section 527, relating to	any other organization described in section 501 political organizations?		Yes	No
a Transfers	from the reporting foun	dation to a noncharitable exempt organization	on of:			
(1) Cash				1a(1)		No
(2) Othe	r assets			1a(2)		No
b Other tran	nsactions:					
		table exempt organization		1b(1)		No
(2) Purcl	nases of assets from a n	oncharitable exempt organization		1b(2)		No
` '		t, or other assets		1b(3)		No
		ts		1b(4)		No
(5) Loan	s or loan guarantees.			1b(5)		No
` .		embership or fundraising solicitations		1b(6)		No
c Sharing of	f facilities, equipment, n	nailing lists, other assets, or paid employees		1c		No
in any tra (a) Line No.	nsaction or sharing arra (b) Amount involved	ngement, show in column (d) the value of t (c) Name of noncharitable exempt organization	he goods, other assets, or services received. (d) Description of transfers, transactions, and sha	ring arra	ngemen	ts

2a Is the fo	oundation directly or indire	ectly affiliated with	, or related to, one or mo	re tax-exem	pt organizations
describe	ed in section 501(c) (other	r than section 501(c)(3)) or in section 527?		Yes 🗹 No
b If "Yes,	" complete the following s	chedule.			
	(a) Name of organization	on	(b) Type of organiza	ation	(c) Description of relationship

Sign Here Paid **Preparer Use Only**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. May the IRS discuss this 2020-02-02 return with the preparer shown Signature of officer or trustee Title Date (see instr.) 🗹 Yes 🗆 No Print/Type preparer's name Preparer's Signature Date PTIN Check if self-P00849568 employed ▶ 🔲 DONNA STEFANELLI 2020-02-10 Firm's name ▶ SILVERCREST FINANCIAL SERVICES INC Firm's EIN ►11-2461669 Firm's address ▶ 230 COURT SQUARE SUITE 101 Phone no. (434) 977-4420 CHARLOTTESVILLE, VA 22902

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Name and address (home or business)

	or substantial contributor			
a Paid during the year				
ALZHEIMER'S ASSOCIATION 225 NORTH MICHIGAN AVENUE	NONE	PUBLIC	GENERAL	1,000

CHICAGO, IL 60601				
CLEAN OCEAN ACTION 18 HARTSHORNE DRIVE HIGHLANDS, NJ 07732	NONE	PUBLIC	GENERAL	2,500
1	1		· · · · · · · · · · · · · · · · · · ·	

18 HARTSHORNE DRIVE HIGHLANDS, NJ 07732	NONE	PUBLIC	GENERAL	2,500
COMPASSION AND CHOICES PO BOX 101810 DENVER, CO 80250	NONE	PUBLIC	GENERAL	2,500

	Total			▶ 3a	211,500
1	COMPASSION AND CHOICES PO BOX 101810 DENVER, CO 80250	NONE	PUBLIC	GENERAL	2,500
	HIGHLANDS, NJ 07732				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Daid during the year

a Falu during the year				
COVENANT HOUSE461 EIGHTH AVENUE NEW YORK, NY 10001	NONE	PUBLIC	GENERAL	2,000
DOCTORS WITHOUT BORDERS	NONE	PUBLIC	GENERAL	3,000

DOCTORS WITHOUT BORDERS 333 7TH AVENUE 2ND FLOOR NEW YORK, NY 10011	NONE	PUBLIC	GENERAL	3,000
ENVIRONMENTAL DEFENSE FUND	NONE	PUBLIC	GENERAL	15,000

NEW YORK, NY 10011				
ENVIRONMENTAL DEFENSE FUND 257 PARK AVENUE SOUTH NEW YORK, NY 10010	NONE	PUBLIC	GENERAL	15,000

211,500

■ 3a

ENVIRONMENTAL DEFENSE FUND 257 PARK AVENUE SOUTH	NONE	PUBLIC	GENERAL	15,0
NEW YORK, NY 10010				

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

FOOD BANK OF MONMOUTH COUNTY 3300 ROUTE 66 NEPTUNE, NJ 07753	NONE	PUBLIC	GENERAL	1,000
HARVARD GRADUATE SCHOOL	NONE	PUBLIC	GENERAL	5,000

HARVARD GRADUATE SCHOOL CAMBRIDGE CAMBRIDGE, MA 02138	NONE	PUBLIC	GENERAL	5,000
HOLIDAY EXPRESSPO BOX 6487	NONE	PUBLIC	GENERAL	1,000

CAMBRIDGE, MA 02138				
HOLIDAY EXPRESSPO BOX 6487 FAIR HAVEN, NJ 07704	NONE	PUBLIC	GENERAL	1,00

Total .

211,500

3a

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

a Paid during the year				
HYDROCEPHALUS ASSOCIATION 4340 EAST WEST HIGHWAY STE 905 BETHESDA, MD 20814	NONE	PUBLIC	GENERAL	1,000

BETHESDA, MD 20814				
LUNCH BREAK 121 DRS JAMES PARKER BLV RED BANK, NJ 07701	NONE	PUBLIC	GENERAL	5,000

LUNCH BREAK 121 DRS JAMES PARKER BLV RED BANK, NJ 07701	NONE	PUBLIC	GENERAL	5,000
MICHAEL J FOX FOUNDATION PO BOX 4777	NONE	PUBLIC	GENERAL	1,000

RED BANK, NJ 07701				
MICHAEL J FOX FOUNDATION PO BOX 4777 NEW YORK, NY 10163	NONE	PUBLIC	GENERAL	1,000
Total			▶ 3a	211,500

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

a Falu dulling the year				
MONMOUTH CONSERVATION FOUNDTION 162 HOLLAND ROAD MIDDLETOWN, NJ 07748	NONE	PUBLIC	GENERAL	5,000

FOUNDTION 162 HOLLAND ROAD MIDDLETOWN, NJ 07748				
MONMOUTH COUNTY HISTORICAL SOCIETY 70 COURT STREET	NONE	PUBLIC	GENERAL	1,000

MONIMOLITIL DAY CARE CENTER	NONE	DUDI TO	GENERAL	2 500
SOCIETY 70 COURT STREET FREEHOLD, NJ 07728				
MONMOUTH COUNTY HISTORICAL	NONE	PUBLIC	GENERAL	1,000
MIDDLETOWN, NJ 07748				

SOCIETY 70 COURT STREET FREEHOLD, NJ 07728				ŕ
MONMOUTH DAY CARE CENTER 9 DRS JAMES PARKER BLVD	NONE	PUBLIC	GENERAL	2,500

FREEHOLD, NJ 07728				
MONMOUTH DAY CARE CENTER 9 DRS JAMES PARKER BLVD RED BANK, NJ 07701	NONE	PUBLIC	GENERAL	2,500

MONMOUTH DAY CARE CENTER 9 DRS JAMES PARKER BLVD RED BANK, NJ 07701	NONE	PUBLIC	GENERAL	2,5
Total			▶ 3a	211,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

NONE

NATHANIEL WHARTON FUND

622 W 168TH STREET NEW YORK, NY 10032				2,000
NEW JERSEY SEEDS494 BROAD STREET NEWARK, NJ 07102	NONE	PUBLIC	GENERAL	5,000

PUBLIC

GENERAL

1.000

NEWARK, NJ 07102	NONE	PUBLIC	GENERAL	5,000
PARKER FAMILY HEALTH CENTER 211 SHREWSBURY AVE RED BANK, NJ 07701	NONE	PUBLIC	GENERAL	5,500

KED BANK, NO 07701
PARKER FAMILY HEALTH CENTER NONE PUBLIC GENERAL 5,! 211 SHREWSBURY AVE RED BANK, NJ 07701

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

or substantial contributor

	or substantial contributor			
a Paid during the year				
PHELPS ASSOCIATIONYORK STREET	NONE	PUBLIC	GENERAL	1,0

NEW HAVEN, CT 06511				
PHI BETA KAPPA 1606 NEW HAMPSHIRE AVE NW WASHINGTON, DC 20009	NONE	PUBLIC	GENERAL	

PHI BETA KAPPA 1606 NEW HAMPSHIRE AVE NW WASHINGTON, DC 20009	NONE	PUBLIC	GENERAL	500
POLICEMEN'S BENEVOLENT ASSOCIATION	NONE	PUBLIC	GENERAL	500

1606 NEW HAMPSHIRE AVE NW WASHINGTON, DC 20009				
POLICEMEN'S BENEVOLENT ASSOCIATION RUMSON	NONE	PUBLIC	GENERAL	5

WASHINGTON, DC 20009				
POLICEMEN'S BENEVOLENT ASSOCIATION RUMSON RUMSON, NJ 07760	NONE	PUBLIC	GENERAL	500

ASSOCIATION RUMSON RUMSON, NJ 07760				
POLICEMEN'S BENEVOLENT	NONE	PUBLIC	GENERAL	500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

a raid during the year				
PROJECT SMILEPO BOX 336 HOPDALE, MA 01747	NONE	PUBLIC	GENERAL	2,000
RED BANK REGIONAL SOURCE	NONE	PUBLIC	GENERAL	34,000

RED BANK REGIONAL SOURCE 101 RIDGE ROAD LITTLE SILVER, NJ 07739	NONE	PUBLIC	GENERAL	34,000
RED BANKCOMMUNITY YMCA 113 TINDALL ROAD	NONE	PUBLIC	GENERAL	10,000

LITTLE SILVER, NJ 07/39				
RED BANKCOMMUNITY YMCA 113 TINDALL ROAD MIDDLETOWN, NJ 07748	NONE	PUBLIC	GENERAL	10,000

211,500

RED BANKCOMMUNITY YMCA	NONE	PUBLIC	GENERAL	10,0
113 TINDALL ROAD				
MIDDLETOWN, NJ 07748				

Total .

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

or substantial contributor

Total .

a Paid during the year				
RESOURCES FOR THE FUTURE 1616 P STREET NW WASHINGTON, DC 20036	NONE	PUBLIC	GENERAL	5,000

WASHINGTON, BC 20050				
RIVERVIEW MEDICAL CENTER 1 RIVERVIEW PLAZA REDBANK, NJ 07701	NONE	PUBLIC	GENERAL	

RIVERVIEW MEDICAL CENTER 1 RIVERVIEW PLAZA REDBANK, NJ 07701	NONE	PUBLIC	GENERAL	5,000
RUMSON EMERGENCY EMS ONE WILSON CIRCLE	NONE	PUBLIC	GENERAL	500

RUMSON EMERGENCY EMS ONE WILSON CIRCLE RUMSON, NJ 07760 NONE PUBLIC GENERAL	500

211,500

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

RUMSON VOLUNTEER FIRE 140 E RIVER ROAD RUMSON, NJ 07760	NONE	PUBLIC	GENERAL	500
SEMPER ET ELIND	NONE	DUBLIC	GENERAL	1 000

RUMSON, NJ 07760				
SEMPER FI FUND 715 BROADWAY STREET QUANTICO, VA 22134	NONE	PUBLIC	GENERAL	1,000
SHORE CLUBHOUSEPO BOX 8446	NONE	PUBLIC	GENERAL	20.000

QUANTICO, VA 22134				
SHORE CLUBHOUSEPO BOX 8446 RED BANK, NJ 07701	NONE	PUBLIC	GENERAL	20,000

Total .

211,500

3a

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

a Paid during the year				
SISTERS ACADEMY 1416 SPRINGWOOD AVENUE ASBURY PARK, NJ 07712	NONE	PUBLIC	GENERAL	10,000
THE VENTURE CARTEAL FOUNDATION	NONE	DUDUTC	CENEDAL	F 000

ASBURY PARK, NJ U7/12				
THE VENTURE CAPITAL FOUNDATION 25 MASSACHUSETTS AVE NW STE 730 WASHINGTON, DC 20001	NONE	PUBLIC	GENERAL	5,000
•	1			

25 MASSACHUSETTS AVE NW STE 730 WASHINGTON, DC 20001				
TROUT UNLIMITED 1777 N KENT STREET STE 1	NONE	PUBLIC	GENERAL	2,500
ADLINCTON VA 22200				

WASHINGTON, DC 20001				
TROUT UNLIMITED 1777 N KENT STREET STE 1 ARLINGTON, VA 22209	NONE	PUBLIC	GENERAL	2,500

Total .

211,500

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

a Paid during the year				
TWO RIVER THEATRE 21 BRIDGE AVENUE RED BANK, NJ 07701	NONE	PUBLIC	GENERAL	22,500

,				
VNA HEALTH GROUP 23 MAIN STREET STE D1 HOLMDEL, NJ 07733	NONE	PUBLIC	GENERAL	1,500

23 MAIN STREET STE D1 HOLMDEL, NJ 07733				
YALE UNIVERSITY149 ELM STREET	NONE	PUBLIC	GENERAL	30,000

HOLMDEL, NJ 07733				
YALE UNIVERSITY149 ELM STREET NEW HAVEN, CT 06511	NONE	PUBLIC	GENERAL	30,000

Total .

211,500

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efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491041000040			
TY 2019 Investments Corporate Bonds Schedule						
11 2023 Investments corporate Bonas Sancaale						
Name: 7	THE KROON FOUN	IDATION INC				

50,125

50,000

EIN: 22-3299243					
Investments Corporate Bonds Schedule					
Name of Bond	End of Year Book	End of Year Fair			
	│ Value	Market Value			

CORPORATE BONDS

TY 2019 In	nvestments Corporat	e Stock Sche	dule	

Name: THE KROON FOUNDATION INC.

EIN: 22-3299243

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

CORPORATE STOCK , ETF, MUTUAL FUNDS

Investments Corporation Stock Schedule Name of Stock

End of Year Fair

3,571,899

4,573,136

Market Value

DLN: 93491041000040

End of Year Book Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	N: 93491041000040	
TY 2019 Other Expenses Schedule					
Name:	Name: THE KROON FOUNDATION INC				
EIN:	22-3299243				
Other Expenses Schedule		<u></u>		 (
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
EXPENSES					
MISCELLANEOUS	70		1		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491041000040		
TY 2019 Taxes Schedule						
Name: THE KROON FOUNDATION INC EIN: 22-3299243						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FEDERAL EXCISE TAX	1,500					