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Department of the Treasury

Internal Revenue Service

As Filed Data -

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2019

OMB No. 1545-0052

Form 990-PF **Return of Private Foundation**

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

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

Open to Public Inspection

or	caler	ndar year 2019, or tax year beginning 01-01-20)19 , and	l ending 12-31-	2019	
		Indation		A Employer id	entification numbe	r
IF	IE FRUE	HAUF FOUNDATION		23-7015744		
		d street (or P.O. box number if mail is not delivered to street address) L TR 2001 KIRBY DR NO 120	Room/suite	B Telephone nu	mber (see instructior	ns)
C:L		TID of contract to the second		(713) 529-3729)	
		n, state or province, country, and ZIP or foreign postal code TX 77019		C If exemption	application is pending	g, check here
G C	neck al	l that apply: \Box Initial return \Box Initial return of a	former public charity	D 1. Foreign or	ganizations, check he	re
		☐ Final return ☐ Amended return			ganizations meeting k here and attach cor	
		Address change Name change			undation status was t	· _
		rpe of organization: Section 501(c)(3) exempt private			n 507(b)(1)(A), chec	
		n 4947(a)(1) nonexempt charitable trust Other taxable	e private foundation Cash	E If the founds	ation is in a 60-month	a termination —
of	year (f	From Part II, col. (c), ▶\$ 5,086,681 CPart I, column (d) must			n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and	•		(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)				
	2	Check ▶ ☑ if the foundation is not required to attach Sch. B				
0	3	Interest on savings and temporary cash investments	16,309	16,309		
	4	Dividends and interest from securities	130,525	130,525		
	5a	Gross rents				
	b	Net rental income or (loss)				
Ĭ	6a	Net gain or (loss) from sale of assets not on line 10	-11,442			
Revenue	b	Gross sales price for all assets on line 6a 902,620 Capital gain net income (from Part IV, line 2)		0		
~	7 8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	ь	Less: Cost of goods sold				
	C	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	2,881	2,881	0	
	12	Total. Add lines 1 through 11	138,273	149,715		
	13 14	Compensation of officers, directors, trustees, etc. Other employee salaries and wages	0	0	0	(
S	15	Pension plans, employee benefits				
Se	16a	Legal fees (attach schedule)				
<u> </u>	b	Accounting fees (attach schedule)				
Ĕ	c	Other professional fees (attach schedule)				
Ě	17	Interest				
st ra	18	Taxes (attach schedule) (see instructions)	4,007	4,007	0	(
ੂ	19	Depreciation (attach schedule) and depletion				
5	20	Occupancy				
ב ב	21	Travel, conferences, and meetings				
ਰ	22	Printing and publications				
<u> </u>	23	Other expenses (attach schedule)				
Operating and Administrative Expenses	24	Add lines 13 through 23	4,007	4,007	0	
5	25	Contributions, gifts, grants paid	238,000	·		238,000
	26	Total expenses and disbursements. Add lines 24 and 25	242.005	4.603	_	222.00
	27	Subtract line 26 from line 12:	242,007	4,007	0	238,000
	a	Excess of revenue over expenses and				
	ь	disbursements Net investment income (if negative, enter -0-)	-103,734	445 700		
	C	Adjusted net income (if negative, enter -0-)		145,708	0	
	1	· · · · · · · · · · · · · · · · · ·	i l			i

Cat. No. 11289X

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Part	ш	Balance Sheets Attached schedules and amounts in the description column	beginning or year	End o	
1		should be for end-of-year amounts only. (See instructions.) Cash—non-interest-bearing	(a) Book Value	(b) Book Value	(c) Fair Market Value
	2	Savings and temporary cash investments	963,926	630,297	630,297
3		Accounts receivable 5,043	903,920	030,297	
"	•	Less: allowance for doubtful accounts	5,866	5,043	5,043
4		Pledges receivable ▶	3,000	3,043	
"	•	Less: allowance for doubtful accounts			
5		Grants receivable			
		Receivables due from officers, directors, trustees, and other			
Ι,	,	disqualified persons (attach schedule) (see instructions)			
7	,	Other notes and loans receivable (attach schedule)			
1		Less: allowance for doubtful accounts			
ء ا ۾.	ł	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges		3,720	3,720
AS 10		Investments—U.S. and state government obligations (attach schedule)	154,534	0	0
_ _ `	b	Investments—corporate stock (attach schedule)	581,356	1,198,265	
	c	Investments—corporate bonds (attach schedule)	232,233	, =,===,===	
1		Investments—land, buildings, and equipment: basis ▶			
-	-	Less: accumulated depreciation (attach schedule)			
1	2	Investments—mortgage loans			
1:		Investments—other (attach schedule)	2,923,641	2,691,273	2,997,379
1		Land, buildings, and equipment: basis ▶	· · · ·	, ,	
	•	Less: accumulated depreciation (attach schedule) ▶			
1	5	Other assets (describe >)			
1		Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	4,629,323	4,528,598	5,086,681
1	7	Accounts payable and accrued expenses	4,138	4,007	
1:	8	Grants payable	·		
S 1	9	Deferred revenue			
፷ ₂	0	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	1	Mortgages and other notes payable (attach schedule)			
<u> </u>	2	Other liabilities (describe >)			
2	3	Total liabilities(add lines 17 through 22)	4,138	4,007	
<u></u>		Foundations that follow FASB ASC 958, check here ▶			
		and complete lines 24, 25, 29 and 30.			
	4	Net assets without donor restrictions			
සි ²		Net assets with donor restrictions			
Fund Balance	-	_			
리		Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30.			
٥] ء	e	Capital stock, trust principal, or current funds	3,977,256	3,977,256	
Assets		Paid-in or capital surplus, or land, bldg., and equipment fund	3,377,230	3,977,230	
S 2 2		Retained earnings, accumulated income, endowment, or other funds	647,929	547,335	
		Total net assets or fund balances (see instructions)	4,625,185	4,524,591	
Ne 25		Total liabilities and net assets/fund balances (see instructions) .	4,629,323	4,528,598	
Part		· · · · · · · · · · · · · · · · · · ·	1,025,025	1,020,030	
		I net assets or fund balances at beginning of year—Part II, column (a), line	29 (must agree with en	ıd-	
		ear figure reported on prior year's return)		1	4,625,185
		r amount from Part I, line 27a		2	-103,734
3	Othe	er increases not included in line 2 (itemize)	% j	3	3,140
4	Add	lines 1, 2, and 3		. 4	4.524.591

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5 Decreases not included in line 2 (itemize) ▶ ___

6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

5

6

Page **2**

Page **3**

	e the kind(s) of property sold (e.g., arehouse; or common stock, 200 sh		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a PUBLICLY TRADED SECU	RITIES		Р	2019-01-01	2019-12-31
b PUBLICLY TRADED SECU	RITIES		Р	2018-01-01	2019-12-31
c PUBLICLY TRADED SECU	RITIES		Р	2018-01-01	2019-12-31
d					
e					
(e) Gross sales price				Gain o	h) r (loss)) minus (g)
a 55	7,806		581,014		-23,208
	6,610		44,809	 	1,801
c 29	98,204		288,239		9,965
d	'		,		· · · · · · · · · · · · · · · · · · ·
e					
	s showing gain in column (h) and ow	rned by the foundation	on 12/31/60	,	1)
Complete only for assets	(i)	Thed by the loundation	(k)		l) h) gain minus
(i) F.M.V. as of 12/31/69	Adjusted basis		s of col. (i) l. (j), if any	col. (k), but not	less than -0-) or om col.(h))
a					-23,208
b					1,801
c					9,965
d					
e					
•	gain or (loss) as defined in sections rt I, line 8, column (c) (see instructi	. , . ,	···· }	3	
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment In	come	
(For optional use by domestic p	rivate foundations subject to the se	ction 4940(a) tax on n	et investment incom	ne.)	
If section 4940(d)(2) applies, le	eave this part blank.				
	ne section 4942 tax on the distributa ot qualify under section 4940(e). Do		· ·	?	es 🗹 No
1 Enter the appropriate ar	nount in each column for each year;	see instructions before	e making any entrie	s.	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharital	ole-use assets	(d) Distribution rati (col. (b) divided by c	
	244,234		5,048,157		0.048381
2018	,				
2018 2017	228,786		5,064,178		0.045177
			5,064,178 4,828,607		0.045177 0.054121
2017	228,786				
2017 2016 2015 2014	228,786 261,330 236,126 255,542		4,828,607		0.054121
2017 2016 2015	228,786 261,330 236,126 255,542		4,828,607 5,126,383 5,377,094		0.054121 0.046061
2017 2016 2015 2014 2 Total of line 1, column (3 Average distribution ration number of years the four	228,786 261,330 236,126 255,542	the total on line 2 by 5 than 5 years	4,828,607 5,126,383 5,377,094		0.054121 0.046061 0.047524
2017 2016 2015 2014 2 Total of line 1, column (3 Average distribution ration number of years the four	228,786 261,330 236,126 255,542 d)	the total on line 2 by 5 than 5 years n Part X, line 5	4,828,607 5,126,383 5,377,094 2 5.0, or by the 3		0.054121 0.046061 0.047524 0.241264 0.048253
2017 2016 2015 2014 2 Total of line 1, column (3 Average distribution rationumber of years the four 4 Enter the net value of no 5 Multiply line 4 by line 3	228,786 261,330 236,126 255,542 d)	the total on line 2 by 5 than 5 years	4,828,607 5,126,383 5,377,094 2 5.0, or by the		0.054121 0.046061 0.047524 0.241264 0.048253 4,649,849
2017 2016 2015 2014 2 Total of line 1, column (3 Average distribution rationumber of years the four 4 Enter the net value of no 5 Multiply line 4 by line 3	228,786 261,330 236,126 255,542 d)	the total on line 2 by 5 than 5 years	4,828,607 5,126,383 5,377,094 2 5.0, or by the		0.054121 0.046061 0.047524 0.241264 0.048253 4,649,849 224,369
2017 2016 2015 2014 2 Total of line 1, column (3 Average distribution ration number of years the four of the the net value of notation of the the net value of notation of the then the net value of the net	228,786 261,330 236,126 255,542 d)	the total on line 2 by 5 than 5 years	4,828,607 5,126,383 5,377,094 2 5.0, or by the		0.054121 0.046061 0.047524 0.241264 0.048253 4,649,849 224,369 1,457

Form	990-PF (2019)									P	age 6
Pai	rt VII-B St	tatements Regard	ling	Activities for Which	Form 4720 May Be	Required (cont	inued)				
5a	During the yea	ar did the foundation p	ay o	r incur any amount to:						Yes	No
	(1) Carry on p	oropaganda, or otherw	ise a	ttempt to influence legisla	tion (section 4945(e))?		Yes 🗸	No.			
	(2) Influence	the outcome of any sp	ecific	public election (see secti	on 4955); or to carry	_					
	on, directl	y or indirectly, any vo	ter re	gistration drive?		· ·	Yes 🗸	No			
	(3) Provide a	grant to an individual	for tr	avel, study, or other simil	lar purposes?		Yes 🔽	No			
		-		her than a charitable, etc. ctions	· •		Yes 🗸	N.			
	• •			eligious, charitable, scient ention of cruelty to childre	* * * * * * * * * * * * * * * * * * * *	. \Box	_				
b				iny of the transactions fai			Yes 🔽	No			
_				nt notice regarding disast					5b		
	Organizations relying on a current notice regarding disaste						▶ □				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the											
	tax because it	maintained expenditu	re re	sponsibility for the grant?			Yes 🗌	No			
	If "Yes," attaci	h the statement requi	red by	y Regulations section 53.4	1945–5(d).		res 🗀	NO			
6a	Did the founda	ation, during the year,	rece	ive any funds, directly or i	indirectly, to pay premiu	ms on					
	a personal ber	nefit contract?					Yes 🗸	N.			
b	b Did the foundation, during the year, pay premiums, directly or indirectly of "Yes" to 6b, file Form 8870.				rectly, on a personal ben	efit contract?	· ·		6 b		No
7a	•		s the	foundation a party to a pr	ohibited tax shelter tran	saction?					
b	If "Yes", did th	ne foundation receive	any p	roceeds or have any net i	ncome attributable to the	اسا :transaction?	Yes ☑	No	7b		
8				.960 tax on payment(s) of							
	excess parachute payment during the year?										
				ers, Directors, Trusto					ees.		
Pai		d Contractors		,,		g,g,		,	,		
1	List all office	rs, directors, trustee	es, fo	undation managers and	d their compensation.	See instructions					
				(b) Title, and average	(c) Compensation (If	(d) Contribut	ons to	(6)	Evner	se acc	ount
	(a) Name	and address		hours per week	not paid, enter	employee benefit				lowand	
FLISA	BETH FRUEHAUF F	DDAST	DRES	devoted to position IDENT/TREASURER	-0-)	deferred compe	ensation				
	KIRBY DR STE 120		0.00	IDENT/ TREASORER	l o		,	ή			U
	TON, TX 77019										
DAVI	O A BRISTOL JR			PRESIDENT	0		C	0			0
	KIRBY DR STE 120	00	0.00								
	ARD LAFONT		VD/SI	ECRETARY	0		(\			
	KIRBY DR STE 120	າດ	0.00	CKLIAKI	0			Ί			U
	TON, TX 77019										
LESLI	E KIEFER AMANN			ECRETARY	0		C				0
	KIRBY DR STE 120	00	0.00								
2	Compensatio	n of five highest-pa	d en	ployees (other than th	ose included on line 1	see instruction	s). If no	ne. eni	ter "	NONE.	**
	Compensatio	n or nive ingliest par	u cii	. , ,	ose meruded on mie 2	(d) Contributi		iic, cii		TOTTE	
(a)		ess of each employee han \$50,000	paid	(b) Title, and average hours per week devoted to position	(c) Compensation	employee be plans and def compensat	nefit erred			se acco	
NON	 E					<u> </u>					
Tota	I number of oth	er employees paid ov	er \$5	0,000			•				0
		<u> </u>						Form	1 99 ()-PF (2019)

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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 servic	es (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		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produ		r of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see i	nstructions)	
Describe the two largest program-related investments made by the foundation during the	<u> </u>	Amount
1	,	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		• o
Total Add Mico Landagn 5		Form 990-PF (2019)

3

4

5

6

7

1a

1b

2

3a 3b

4

5

231.035

231.035

231.035

238,000

238,000

1,457

236.543

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Distributable amount before adjustments. Subtract line 2c from line 1.

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

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

income. Enter 1% of Part I, line 27b. See instructions.

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

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

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

3

4 5

6

1

2

3

4

5

b

Part XII

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. .

P	Part XIII Undistributed Income (see instruct	tions)			r age 3
		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				231,035
2	Undistributed income, if any, as of the end of 2019:	, 			
а	Enter amount for 2018 only			235,684	
b	Total for prior years: 20, 20		0		
3	Excess distributions carryover, if any, to 2019:	1			
а		1			
b		1			
С		İ			
d		İ			
	From 2018	l			
f	Total of lines 3a through e	<u> </u>	0		
4	Qualifying distributions for 2019 from Part	l			
l	XII, line 4: ► \$	l			
а	Applied to 2018, but not more than line 2a	<u> </u>		235,684	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election required—see instructions)		0		
d	Applied to 2019 distributable amount				2,316
е	Remaining amount distributed out of corpus		0		
5	Excess distributions carryover applied to 2019.		0		0
	(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		0		
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
c	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d	Subtract line 6c from line 6b. Taxable amount —see instructions		0		
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				228,719
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)	İ	0		

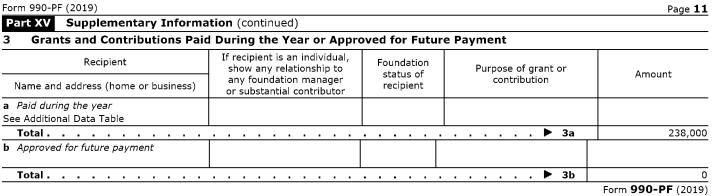
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1a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling							
b	Check box to indicate whether the organizati	on is a private oper	ating foundation desc	cribed in section \Box	4942(j)(3) or] 4942(j)(5)		
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(-) T-t-1		
	income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total		
	investment return from Part X for each year listed		. ,		. ,			
b	85% of line 2a							
С	Qualifying distributions from Part XII, line 4 for each year listed							
d	Amounts included in line 2c not used directly for active conduct of exempt activities							
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c							
3	Complete 3a, b, or c for the alternative test relied upon:							
а	"Assets" alternative test—enter:							
	(1) Value of all assets							
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)							
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed							
c	"Support" alternative test—enter:							
	(1) Total support other than gross investment income (interest, dividends, rents, payments							
	on securities loans (section 512(a)(5)), or royalties)							
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)							
	(3) Largest amount of support from an exempt organization							
	(4) Gross investment income							
Pa	rt XV Supplementary Information			oundation had s	\$5,000 or more i	in		
1	assets at any time during th Information Regarding Foundation Mana		ructions.)					
a	List any managers of the foundation who hav before the close of any tax year (but only if	e contributed more				n		
b	List any managers of the foundation who own	n 10% or more of th	e stock of a corporat	tion (or an equally la				
	ownership of a partnership or other entity) of							
2	Information Regarding Contribution, Gra		• • • •	-				
	Check here ► ☐ if the foundation only mak							
	unsolicited requests for funds. If the founda other conditions, complete items 2a, b, c, a			als or organizations i	under			
а	The name, address, and telephone number of	or e-mail address of	the person to whom	applications should	be addressed:			
	LISA FRUEHAUF PRAST CO SENTINEL TRU							
	2001 KIRBY DRIVE SUITE 1200 HOUSTON, TX 770196081 (713) 529-3729							
b	The form in which applications should be sub		tion and materials th	ney should include:				
	REQUESTS SHOULD BE SUBMITTED IN LETT	EK FUKM.						
С	Any submission deadlines:	MONTHLY BACTO						
.,	NONE - APPLICATIONS ARE REVIEWED ON A			talda Idad6t	Minne on eller			
d	Any restrictions or limitations on awards, sur	cn as by geographic	ai areas, charitable f	ieias, kinas ot institu	itions, or other			

ORGANIZATIONS LISTED IN OR OTHERWISE QUALIFYING AS: CUMULATIVE LIST OF ORGANIZATIONS DESCRIBED IN SECTION 170(C) OF THE



	I-A Analysis of Income-Producing					(-)
nter gross	s amounts unless otherwise indicated.		usiness income	Excluded by section		(e) Related or exempt function income
_	n service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See instructions.)
	and contracts from government agencies					
_	ership dues and assessments					
	st on savings and temporary cash			14	16,309	
	nds and interest from securities			14	130,525	
	ntal income or (loss) from real estate:					
	-financed property lebt-financed property					
6 Net rer	ntal income or (loss) from personal property					
	nvestment income			14	2,881	
invento	•			18	-11,442	
9 Net inc	come or (loss) from special events:				11,112	
	profit or (loss) from sales of inventory					
	revenue: a					
	al. Add columns (b), (d), and (e).		0		138,273	
2 Total	Add line 12 columns (b) (d) and (e)					
(See w	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations.)			.	138,2/3
	orksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the	lations.) le Accomplisi	hment of Exem	ot Purposes		138,273
(See w Part XV	orksheet in line 13 instructions to verify calcu Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	orksheet in line 13 instructions to verify calcu Relationship of Activities to th Explain below how each activity for which	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	T-B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	resplain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	resplain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	resplain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	resplain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	resplain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No.	resplain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273
(See w Part XV Line No. ▼	resplain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) e Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribu	ted importantly to	138,273

	Information Regarding Transfers To and Transactions and Relationships With Noncharit	abla							
Part XVII									
I dit AVII	Exempt Organizations								
1 Did the or	ganization directly or indirectly engage in any of the following with any other organization described in section 501								

		- Exempt Organi	zauviis										
		ganization directly or in than section 501(c)(3)								tion 501		Yes	No
•	•	from the reporting foun	-	•			•	-		F			
										.	1a(1)		No
		r assets									1a(2)		No
b Ot	her trar	nsactions:											
(1) Sales	s of assets to a nonchar	itable exemp	t orga	nization.						1b(1)		No
(2) Purcl	hases of assets from a r	noncharitable	exem	npt organiz	zation				[1b(2)		No
(3) Rental of facilities, equipment, or other assets									1b(3)		No		
(4) Reim	bursement arrangemen	ts							. [1b(4)		No
(5) Loan	s or loan guarantees.								[1b(5)		No
(6) Perfo	rmance of services or m	embership o	r fund	raising sol	licitations				. [1b(6)		No
c Sh	aring o	f facilities, equipment, r	nailing lists, (other	assets, or	paid employee	es			. [1c		No
of in	the goo any tra	wer to any of the above ods, other assets, or ser nsaction or sharing arra	vices given b ngement, sh	y the low in	reporting column (c	foundation. If and the state of	the fo the g	oundation receive loods, other asse	ed less than fair ma ets, or services rece	arket value eived.	1		
(a) Lir	e No.	(b) Amount involved	(c) Name of	nonch	aritable exe	mpt organization	1	(d) Description of	transfers, transaction	s, and shari	ng arrai	ngemen	its
							+						
							+						
							+						
							+						
							-						
							+						
							+						
2a Is	the fou	ndation directly or indire	ectly affiliate	d with	or relate	d to one or m	ore ta	v-evemnt organ	izations				
		in section 501(c) (other	•		•	•				Yes 🗸	No		
		complete the following s		501(30001011 327.					1110		
D 11	165, 0	(a) Name of organization			l a	b) Type of organi	ization		(c) Descriptio	on of relation	nship		
		(=,				, .,,,			(-,				
	of n	ler penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, co										
Sigr Her		*****				2020-07-14		*****		return	e IRS dis e prepar		
		Signature of officer or t	rustee			Date		Title			str.) 🔽	Yes [No
		Print/Type preparer's	name	Prep	arer's Sigr	nature	[,	Date		PTIN			
					,		[Check if self-		01321	832	
		SANDRA K COMPT	ON					2020-07-14	employed ▶ ☐		J1J21	JJ2	
Paid			=					2020-07-14					
	oarer		EL SCHROE	DER			I		1	Eirmala ET	N > 74	20522)E2
Jse	Only									Firm's EI	v ≠ /4-	-20523	
		Firm's address ► 62	0 HIGHWAY	90 WI	EST								
		SE	ALY, TX 774	47438	18					Phone no	. (979)	885-6	6588
			==, ,										
										Far	~ OO(DE /	2010

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				
ACLU 125 BROAD RIVER STREET 18TH FLOOR NEW YORK, NY 10004	NONE	HUMAN SERVICES	HUMAN SERVICES OPERATING SUPPORT	665

NEW YORK, NY 10004				
AMERICAN RED CROSS431 18TH ST NW WASHINGTON, DC 20006	NONE	PUBLIC WELFARE	PUBLIC WELFARE OPERATING SUPPORT	2,
AMERICAN RED CROSS GREATER	NONE	PUBLIC	PUBLIC WELFARE OPERATING	1,

AMERICAN RED CROSS431 18TH ST NW WASHINGTON, DC 20006	NONE	PUBLIC WELFARE	PUBLIC WELFARE OPERATING SUPPORT	2,000
AMERICAN RED CROSS GREATER HOUSTON 2700 SOUTHWEST FREEWAY	NONE	PUBLIC WELFARE	PUBLIC WELFARE OPERATING SUPPORT	1,000

WASHINGTON, DC 20006	NONE	WELFARE	SUPPORT	2,000
AMERICAN RED CROSS GREATER HOUSTON 2700 SOUTHWEST FREEWAY HOUSTON, TX 77098	NONE	PUBLIC WELFARE	PUBLIC WELFARE OPERATING SUPPORT	1,000
Total			▶ 3a	238,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation 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 AMERICAN RED CROSS GREATER NONE PUBLIC PUBLIC WELFARE OPERATING 10,000 AVELEADE HOUSTON CLIDDODT

2700 SOUTHWEST FREEWAY HOUSTON, TX 77098		WELFARE	SUFFORT	
ASPCAP O BOX 96929 WASHINGTON, DC 200777127	NONE	ANIMAL RELATED	ANIMAL RELATED OPERATING SUPPORT	2,000

238,000

■ 3a

ASPCAP O BOX 96929 WASHINGTON, DC 200777127	NONE	ANIMAL RELATED	ANIMAL RELATED OPERATING SUPPORT	2,000
ASPCAPO BOX 96929 WASHINGTON, DC 200777127	NONE	ANIMAL RELATED	ANIMAL RELATED OPERATING SUPPORT	665

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 status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BEAUMONT FOUNDATIONPO BOX 5802 NONE PUBLIC PUBLIC WELFARE OPERATING 4,000 TROY, MI 480075802 WELFARE SUPPORT

BILLY GRAHAM EVANGELISTIC ASSOCIATION 1 BILLY GRAHAM EVANGELISTIC ASSOCIATION PARKWAY CHARLOTTE, NC 28201	NONE	RELIGIOUS ORGANIZATI	RELIGIOUS ORGANIZATION OPERATING SUPPORT	1,000
BLUE RIDGE AREA FOOD BANK	NONE	PUBLIC	PUBLIC WELFARE OPERATING	3,000

ASSOCIATION 1 BILLY GRAHAM EVANGELISTIC ASSOCIATION PARKWAY CHARLOTTE, NC 28201		ORGANIZATI	OPERATING SUPPORT	
BLUE RIDGE AREA FOOD BANK	NONE	PUBLIC	PUBLIC WELFARE OPERATING	3,0

CHARLOTTE, NC 28201				
BLUE RIDGE AREA FOOD BANK PO BOX 937 VERONA, VA 24482	NONE	PUBLIC WELFARE	PUBLIC WELFARE OPERATING SUPPORT	3,000

BLUE RIDGE AREA FOOD BANK	NONE	PUBLIC	PUBLIC WELFARE OPERATING	
PO BOX 937		WELFARE	SUPPORT	
				1

O BOX 937	WELFARE	SUPPURI	
/ERONA, VA 24482			

238,000 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 BROADWAY CARES NONE HUMAN HUMAN SERVICES OPERATING 670

165 WEST 46 STREET NEW YORK, NY 10036		SERVICES	SUPPORT	
BUCKNELL UNIVERSITY1 DENT DRIVE LEWISBURG, PA 17837	NONE	EDUCATION	EDUCATION OPERATING SUPPORT	5,000

LEWISBURG, PA 17837			SUPPORT	
BUCKNELL UNIVERSITY 301 MARKET STREET SUITE 2 LEWISBURG, PA 17837	NONE	EDUCATION	EDUCATION OPERATING SUPPORT	3,000

Total .

238,000

■ 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				
CALIFORNIA COMMUNITY FOUNDATION 221 S FUGUEROA	NONE	PUBLIC WELFARE	PUBLIC WELFARE OPERATING SUPPORT	250

LOS ANGELES, CA 90012				
CHARLOTTESVILLE FREE CLINIC 1138 ROSE HILL DRIVE SUITE 200 CHARLOTTESVILLE, VA 22903	NONE	MEDICAL	MEDICAL OPERATING SUPPORT	2,000
DOCTORS WITHOUT BORDERS	NONE	PUBLIC	PUBLIC WELFARE OPERATING	2,000

DOCTORS WITHOUT BORDERS 40 RECTOR STREET 16TH FLOOR NEW YORK, NY 10006 NONE PUBLIC WELFARE PUBLIC WELFARE OPERATING SUPPORT 2,000	CHARLOTTESVILLE FREE CLINIC 1138 ROSE HILL DRIVE SUITE 200 CHARLOTTESVILLE, VA 22903	NONE	MEDICAL	MEDICAL OPERATING SUPPORT	2,000
	40 RECTOR STREET 16TH FLOOR	NONE			2,000

Total			▶ 3a	238,000
DOCTORS WITHOUT BORDERS 40 RECTOR STREET 16TH FLOOR NEW YORK, NY 10006	NONE	PUBLIC WELFARE	PUBLIC WELFARE OPERATING SUPPORT	2,000
CHARLOTTESVILLE, VA 22903				

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 (nome or business)	or substantial contributor			
a Paid during the year				
EPILEPSY FOUNDATION OF VIRGINIA	NONE	MEDICAL	MEDICAL OPERATING SUPPORT	2,000

PO BOX 800659 CHARLOTTESVILLE, VA 229080659				
FAMILY RESEARCH COUNCIL 11311 JAMES STREET HOLLAND, MI 49424	NONE	RESEARCH INSTITUTION	RESEARCH INSTITUTION OPERATING SUPPORT	2,000

FAMILY RESEARCH COUNCIL 11311 JAMES STREET HOLLAND, MI 49424	NONE	RESEARCH INSTITUTION	RESEARCH INSTITUTION OPERATING SUPPORT	2,000
FISHER HOUSE FOUNDATION INC 111 ROCKVILLE PIKE 420	NONE	HEALTH SUPPORT	HEALTH SUPPORT SERVICES OPERATING SUPPORT	2,000

11311 JAMES STREET HOLLAND, MI 49424		INSTITUTION	OPERATING SUPPORT	_,
FISHER HOUSE FOUNDATION INC 111 ROCKVILLE PIKE 420 ROCKVILLE, MD 20850	NONE	HEALTH SUPPORT SERVI	HEALTH SUPPORT SERVICES OPERATING SUPPORT	2,000

HOLLAND, MI 49424		INSTITUTION	OF ERATING SOFF ORT	
FISHER HOUSE FOUNDATION INC 111 ROCKVILLE PIKE 420 ROCKVILLE, MD 20850	NONE	HEALTH SUPPORT SERVI	HEALTH SUPPORT SERVICES OPERATING SUPPORT	2,000
Total			▶ 3a	238,000

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
FOCUS ON THE FAMILY	NONE	RELIGIOUS	RELIGIOUS ORGANIZATION	2,000

8605 EXPLORER DRIVE COLORADO SPRINGS, CO 80920	NONE		OPERATING SUPPORT	2,000
FRIENDS OF MACARTHUR STATE PARK 10900 JACK NICKLAUS DRIVE NORTH PALM BEACH FL 33408	NONE	ENVIRONMENT	ENVIRONMENT OPERATING SUPPORT	5,000

COLORADO SPRINGS, CO 80920				
FRIENDS OF MACARTHUR STATE PARK 10900 JACK NICKLAUS DRIVE NORTH PALM BEACH, FL 33408	NONE	ENVIRONMENT	ENVIRONMENT OPERATING SUPPORT	5,000
FURMAN UNIVERSITY 3300 POINSETT HIGHWAY GREENVILLE, SC. 29613	NONE	EDUCATION	EDUCATION OPERATING SUPPORT - ANNUAL FUND	5,000

10900 JACK NICKLAUS DRIVE NORTH PALM BEACH, FL 33408			SUPPORT	
FURMAN UNIVERSITY 3300 POINSETT HIGHWAY GREENVILLE, SC 29613	NONE	EDUCATION	EDUCATION OPERATING SUPPORT - ANNUAL FUND	5,000
				ĺ

FURMAN UNIVERSITY 3300 POINSETT HIGHWAY GREENVILLE, SC 29613	NONE	 EDUCATION OPERATING SUPPORT - ANNUAL FUND	5,000
Total		 ▶ 3a	238,000

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	recipient		
a Paid during the year				
FURMAN UNIVERSITY	NONE	EDUCATION	EDUCATION OPERATING	7,500

FURMAN UNIVERSITY 3300 POINSETT HIGHWAY GREENVILLE, SC 29613	NONE	EDUCATION	EDUCATION OPERATING SUPPORT	
GORDON COLLEGE	NONE	EDUCATION	EDUCATION OPERATING	

CORDON COLLECT	NONE	EDUCATION	EDUCATION OPERATING	
GORDON COLLEGE 255 GRAPEVINE ROAD WENHAM, MA 019841899	NONE	EDUCATION	EDUCATION OPERATING SUPPORT	
GREENVILLE, SC 29613				

255 GRAPEVINE ROAD WENHAM, MA 019841899			SUPPORT	
GORDON COLLEGE 255 GRAPEVINE ROAD	NONE	EDUCATION	EDUCATION OPERATING SUPPORT	5,000

2,000

WENHAM, MA 019841899				
GORDON COLLEGE 255 GRAPEVINE ROAD WENHAM, MA 019841899	NONE	EDUCATION	EDUCATION OPERATING SUPPORT	5,

Total			▶ 3a	238,000
255 GRAPEVINE ROAD WENHAM, MA 019841899			SUPPORT	
GORDON COLLEGE	NONE	EDUCATION	EDUCATION OPERATING	5,000

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 GORDON-CONWELL THEOLOGICAL NONE EDUCATION **EDUCATION OPERATING** 2,000 SUPPORT SEMINARY 130 ESSEX STREET

SOUTH HAMILTON, MA 01982				
GRAND TETON NATIONAL PARK FOUNDATION PO BOX 249 MOOSE, WY 83012	NONE	ENVIRONMENT, CONSERV	ENVIRONMENT, CONSERVATION AND WILDLIFE OPERATING SUPPORT	5,000
GROSSE POINTE WAR MEMORIAL	NONE	HISTORICAL	HISTORICAL SITE OPERATING	1,000

MOOSE, WY 83012				
GROSSE POINTE WAR MEMORIAL 32 LAKE SHORE DRIVE GROSSE POINTE FARMS, MI 482363784	NONE	HISTORICAL SITE	HISTORICAL SITE OPERATING SUPPORT	1,000

▶ 3a

238,000

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

a Paid during the year				
HILLSDALE COLLEGE 33 EAST COLLEGE ST HILLSDALE, MI 49242	NONE	EDUCATION	EDUCATION OPERATING SUPPORT	5,000

HILLSDALE, MI 49242				
HILLSDALE COLLEGE 33 EAST COLLEGE ST HILLSDALE, MI 49242	NONE	EDUCATION	EDUCATION OPERATING SUPPORT	5,000
HOSPICE OF THE PIEDMONT	NONE	MEDICAL	MEDICAL OPERATING SUPPORT	2 000

33 EAST COLLEGE ST HILLSDALE, MI 49242			SUPPORT	,
HOSPICE OF THE PIEDMONT 675 PETER JEFFERSON PARKWAY SUITE 300 CHARLOTTESVILLE, VA 22911	NONE	MEDICAL	MEDICAL OPERATING SUPPORT	2,000

HILLSDALE, MI 49242			
HOSPICE OF THE PIEDMONT 675 PETER JEFFERSON PARKWAY SUITE 300 CHARLOTTESVILLE, VA 22911	 MEDICAL	MEDICAL OPERATING SUPPORT	2,000
Total	 	▶ 3a	238,000

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

- '				
HOUSTON BALLET601 PRESTON STREET HOUSTON, TX 77002	NONE	ARTS, CULTURE, AND H	ARTS, CULTURE, AND HUMANITIES OPERATING SUPPORT	5,000
HOUSTON MUSEUM OF NATURAL SCIENCE	NONE	ARTS, CULTURE,	ARTS, CULTURE, AND HUMANITIES OPERATING	6,000

		ANDII	3011011	
HOUSTON MUSEUM OF NATURAL SCIENCE 5555 HERMANN PARK DR HOUSTON, TX 77030	NONE	ARTS, CULTURE, AND H	ARTS, CULTURE, AND HUMANITIES OPERATING SUPPORT	6,000
HOUSTON ZOO INC	NONE	ANIMAL	ANIMAL RELATED OPERATING	5,000

5555 HERMANN PARK DR HOUSTON, TX 77030		AND H	SUPPORT	
HOUSTON ZOO INC 1513 CAMBRIDGE ST HOUSTON, TX 77030	NONE	ANIMAL RELATED	ANIMAL RELATED OPERATING SUPPORT	5,000

HOUSTON ZOO INC 1513 CAMBRIDGE ST HOUSTON, TX 77030	NONE	ANIMAL RELATED	ANIMAL RELATED OPERATING SUPPORT	5,000
Total			▶ 3a	238,000

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

Name and address (home or husiness)

Name and address (nome or business)	or substantial contributor		
a Paid during the year			
INTERLOCHEN CENTER FOR THE ARTS PO BOX 199 INTRERLOCHEN, MI 469430199	NONE	EDUCATION OPERATING SUPPORT	2,500

'				
INTERNATIONAL RESCUE COMMITTEE 609 MARKET ST SUITE 104 CHARLOTTESVILLE, VA 22902	NONE	PUBLIC WELFARE	PUBLIC WELFARE OPERATING SUPPORT	2,000
LEGAL AID JUSTICE CENTER	NONE	LEGAL	LEGAL SERVICES OPERATING	2,000

609 MARKET ST SUITE 104 CHARLOTTESVILLE, VA 22902	NONE	WELFARE	SUPPORT	2,000
LEGAL AID JUSTICE CENTER 1000 PRESTON AVENUE SUITE A CHARLOTTESVILLE, VA 22903	NONE	LEGAL SERVICES	LEGAL SERVICES OPERATING SUPPORT	2,000

CHARLOTTESVILLE, VA 22902		WELFARE	SUPPORT	
LEGAL AID JUSTICE CENTER 1000 PRESTON AVENUE SUITE A CHARLOTTESVILLE, VA 22903	NONE	LEGAL SERVICES	LEGAL SERVICES OPERATING SUPPORT	2,000
Total			▶ 3a	238,000

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

a Paid during the year				
LITERACY VOLUNTEERS OF C'VILLEALBEMARLE 233 4TH ST NW BOX L CHARLOTTESVILLE, VA 22903	NONE	EDUCATION	EDUCATION OPERATING SUPPORT	2,000

CHARLOTTESVILLE, VA 22903				
LIVE ARTSPO BOX 1231 CHARLOTTESVILLE, VA 22902	NONE	ARTS, CULTURE, AND H	ARTS, CULTURE, AND HUMANITIES OPERATING SUPPORT	2,000
LOGGERHEAD MARINELIFE CENTER	NONE	ANIMAL	ANIMAL RELATED OPERATING	5.000

CHARLOTTESVILLE, VA 22902		AND H	HUMANITIES OPERATING SUPPORT	
LOGGERHEAD MARINELIFE CENTER 14200 US HWY ONE JUNO BEACH, FL 33408	NONE	ANIMAL RELATED	ANIMAL RELATED OPERATING SUPPORT	5,000

238,000

		AND H	SUPPORT	
LOGGERHEAD MARINELIFE CENTER 14200 US HWY ONE JUNO BEACH, FL 33408	NONE	ANIMAL RELATED	ANIMAL RELATED OPERATING SUPPORT	5,00

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 status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year LONE STAR FLIGHT MUSEUM NONE ARTS. ARTS, CULTURE, AND 2,000 CULTURE, **HUMANITIES OPERATING** 11551 AEROSPACE AVE

HOUSTON, TX 7/034		ANDH	SUPPORT	
LOST TREE CHAPEL 11149 TURTLE BEACH ROAD NORTH PALM BEACH, FL 33408	NONE	RELIGIOUS ORGANIZATI	RELIGIOUS ORGANIZATION OPERATING SUPPORT	10,000
LOST TREE VILLAGE CHARITABLE FOUNDATION 8 CHURCH LANE NORTH PALM BEACH, FL 33408	NONE	PUBLIC WELFARE	PUBLIC WELFARE OPERATING SUPPORT	5,000

Total .

238,000

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

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
MARTHA JEFFERSON HOSPITAL FOUNDATION	NONE	MEDICAL	MEDICAL OPERATING SUPPORT	1,000

recipient

500 MARTHA JEFFERSON DRIVE CHARLOTTESVILLE, VA 22911				
MAYO CLINIC200 FIRST STREET SW ROCHESTER, MN 55905	NONE	MEDICAL	MEDICAL OPERATING SUPPORT	4,000
MUCIUTUEATED DAVADIADO DOV E4E	NONE	ADTC	ADTO CHITUDE AND	7 000

MAYO CLINIC200 FIRST STREET SW ROCHESTER, MN 55905	NONE	MEDICAL	MEDICAL OPERATING SUPPORT	4,000
MUSIKTHEATER BAVARIAPO BOX 545 WINTER PARK, FL 327900545	NONE	ARTS, CULTURE, AND H	ARTS, CULTURE, AND HUMANITIES OPERATING SUPPORT	7,000

MAYO CLINIC200 FIRST STREET SW ROCHESTER, MN 55905	NONE	MEDICAL	MEDICAL OPERATING SUPPORT	4,000
MUSIKTHEATER BAVARIAPO BOX 545 WINTER PARK, FL 327900545	NONE	ARTS, CULTURE, AND H	ARTS, CULTURE, AND HUMANITIES OPERATING SUPPORT	7,000
Total			▶ 3a	238,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation 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 MEDICAL MEDICAL OPERATING SUPPORT 2,000 NORTH SHORE MEDICAL CENTER

SALEM, MA 019709881				
PEABODY ESSEX MUSEUM161 ESSEX ST SALEM, MA 01970	NONE	ARTS, CULTURE,	ARTS, CULTURE, AND HUMANITIES OPERATING	2,000

SALEM, MA 01970		CULTURE, AND H	HUMANITIES OPERATING SUPPORT	2,000
PILOTS N PAWS4651 HOWE RD LANDRUM, SC 29356	NONE	ANIMAL RELATED	ANIMAL RELATED OPERATING SUPPORT	1,000
Total			▶ 3a	238,000

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 PLANNED PARENTHOOD OF HOUSTON NONE MEDICAL MEDICAL OPERATING SUPPORT 250

4600 GULF FREEWAY HOUSTON, TX 77023				
PLANNED PARENTHOOD OF MICHIGAN 2300 N FLORIDA MANGO ROAD WEST PALM BEACH FL 33409	NONE	MEDICAL	MEDICAL OPERATING SUPPORT	8,000

2300 N FLORIDA MANGO ROAD WEST PALM BEACH, FL 33409	THO ILE	TIEBICALE	THE STORE OF ENVIRONMENT OF THE	0,000
SALVATION ARMY1500 AUSTIN STREET HOUSTON, TX 77002	NONE	HUMAN SERVICES	HUMAN SERVICES OPERATING SUPPORT	2,500
Total			▶ 3a	238,000

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 SECOND HARVEST FOOD BANK OF NONE HUMAN HUMAN SERVICES OPERATING 2,000 CENTRAL ELOPIDA SERVICES CLIDDODT

411 MERCY DRIVE ORLANDO, FL 32808		SERVICES	SOFFORT	
SEXUAL ASSAULT RESOURCE AGENCY 335 GREENBRIAR DRIVE SUITE 102 CHARLOTTESVILLE, VA 22901	NONE	HUMAN SERVICES	HUMAN SERVICES OPERATING SUPPORT	2,000

SEXUAL ASSAULT RESOURCE AGENCY 335 GREENBRIAR DRIVE SUITE 102 CHARLOTTESVILLE, VA 22901	NONE	HUMAN SERVICES	HUMAN SERVICES OPERATING SUPPORT	2,000
SHELTER FOR HELP IN EMERGENCY PO BOX 1013 CHARLOTTESVILLE, VA 22902	NONE	HUMAN SERVICES	HUMAN SERVICES OPERATING SUPPORT	2,000

238,000

335 GREENBRIAR DRIVE SUITE 102 CHARLOTTESVILLE, VA 22901		SERVICES	SUPPORT	
SHELTER FOR HELP IN EMERGENCY PO BOX 1013 CHARLOTTESVILLE, VA 22902	NONE	HUMAN SERVICES	HUMAN SERVICES OPERATING SUPPORT	2,00

CHARLOTTESVILLE, VA 22901				
SHELTER FOR HELP IN EMERGENCY PO BOX 1013 CHARLOTTESVILLE, VA 22902	NONE	HUMAN SERVICES	HUMAN SERVICES OPERATING SUPPORT	2,000

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 status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SPECIAL OPERATIONS WARRIOR NONE EDUCATION EDUCATION OPERATING 2.000

FOUNDATION PO BOX 89367 TAMPA, FL 33689	, manz		SUPPORT	2,000
ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE	NONE	MEDICAL	MEDICAL OPERATING SUPPORT	2,500

TAMPA, FL 33689				
ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105	NONE	MEDICAL	MEDICAL OPERATING SUPPORT	2,500
ST MARK'S EPISCOPAL CHURCH	NONE	RELIGIOUS	RELIGIOUS ORGANIZATION	2.000

HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105				
ST MARK'S EPISCOPAL CHURCH 16-18 THOMAS STREET CHARLESTON, SC 29403	NONE		RELIGIOUS ORGANIZATION OPERATING SUPPORT	2,000

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ST MARK'S EPISCOPAL CHURCH 16-18 THOMAS STREET CHARLESTON, SC 29403		RELIGIOUS ORGANIZATI	RELIGIOUS ORGANIZATION OPERATING SUPPORT	2,000
Total			▶ 3a	238,000

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 status of contribution

recipient

▶ 3a

238,000

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year				
ST MARTIN'S EPISCOPAL CHURCH 717 SAGE ROAD HOUSTON, TX 77056	NONE	RELIGIOUS ORGANIZATI	RELIGIOUS ORGANIZATION OPERATING SUPPORT - 2019 CAPITAL CAMPAIGN	5,000
TEAM RUBICON 6171 W CENTURY BLVD SUITE 310 LOS ANGELES, CA 90045	NONE	PUBLIC WELFARE	PUBLIC WELFARE OPERATING SUPPORT	5,000

TEAM RUBICON 6171 W CENTURY BLVD SUITE 310 LOS ANGELES, CA 90045	NONE	PUBLIC WELFARE	PUBLIC WELFARE OPERATING SUPPORT	5,000
THE EVERGLADES FOUNDATION 18001 OLD CUTLER ROAD SUITE 625 PALMETTO BAY, FL 33157	NONE	ENVIRONMENT, CONSERV	ENVIRONMENT, CONSERVATION AND WILDLIFE OPERATING SUPPORT	5,000

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 status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE NATIOE CONSEDVANCY NONE ENIVEDONIMENT ENVIRONMENT CONSERVATION 250

1101 WEST RIVER PARKWAY MINNEAPOLIS, MN 554151291	NONE	CONSERV	AND WILDLIFE OPERATING SUPPORT	250
THE UNIVERSITY OF TEXAS MD ANDERSON CANCER CENTER PO BOX 4470 HOUSTON, TX 772104470	NONE	MEDICAL	MEDICAL OPERATING SUPPORT	3,000

PO BOX 4470 HOUSTON, TX 772104470				
THE WILD DOLPHIN PROJECT PO BOX 8436 JUPITER, FL 33468	NONE	ANIMAL RELATED	ANIMAL RELATED OPERATING SUPPORT	1,000

238,000

HOUSTON, TX 772104470			
THE WILD DOLPHIN PROJECT PO BOX 8436 JUPITER, FL 33468	NONE	 ANIMAL RELATED OPERATING SUPPORT	1,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation 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 NONE HUMAN SERVICES OPERATING 500 THON227D HETZEL UNION BUILDING HUMAN SERVICES UNIVERSITY, PA 16802 SUPPORT

WINGS OF HOPE 18370 WINGS OF HOPE BLVD ST LOUIS, MO 63005	NONE	HUMAN SERVICES	HUMAN SERVICES OPERATING SUPPORT	1,000
AGAINST MALARIA FOUNDATION PO BOX 7247-3670 PHILADELPHIA, PA 191706370	NONE	PUBLIC WELFARE	PUBLIC WELFARE OPERATING SUPPORT	2,000

238,000

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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 cubetantial contributor

	or substantial contributor			
a Paid during the year				
CITIZENS FOR ANIMAL PROTECTION 17555 KATY FREEWAY	NONE	ANIMAL RELATED	ANIMAL RELATED OPERATING SUPPORT	4,000

HOUSTON, TX 77094		RELATED	SUPPORT	
ENVIRONMENTAL DEFENSE FUND 257 PARK AVENUE SOUTH 17TH FLOOR NEW YORK, NY 10010	NONE	ENVIRONMENT, CONSERV	ENVIRONMENT, CONSERVATION AND WILDLIFE OPERATING SUPPORT	1,000

ENVIRONMENTAL DEFENSE FUND 257 PARK AVENUE SOUTH 17TH FLOOR NEW YORK, NY 10010	NONE	ENVIRONMENT, CONSERV	ENVIRONMENT, CONSERVATION AND WILDLIFE OPERATING SUPPORT	1,000
FRIENDS OF ASPEN ANIMAL SHELTER 101 ANIMAL SHELTER RD ASPEN, CO 81611	NONE	ANIMAL RELATED	ANIMAL RELATED OPERATING SUPPORT	2,000

257 PARK AVENUE SOUTH 17TH FLOOR NEW YORK, NY 10010		CONSERV	AND WILDLIFE OPERATING SUPPORT	
FRIENDS OF ASPEN ANIMAL SHELTER 101 ANIMAL SHELTER RD ASPEN, CO 81611	NONE	ANIMAL RELATED	ANIMAL RELATED OPERATING SUPPORT	2,000
Total			▶ 3a	238,000

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

or substantial contributor

Name and address (home or business)

a Paid during the year				
GIVEWELL182 HOWARD STREET 208 SAN FRANCISCO, CA 94105	NONE	PUBLIC WELFARE	PUBLIC WELFARE OPERATING SUPPORT	2,000
SIERRA CLUB FOUNDATION	NONE	ENVIRONMENT,	ENVIRONMENTAL,	1,000

SIERRA CLUB FOUNDATION 2101 WEBSTER ST SUITE 1250 DAKLAND, CA 94612	NONE	,	ENVIRONMENTAL, CONSERVATION AND WILDLIFE OPERATING SUPPORT	
SPECIAL OPERATIONS WARRIOR FOUNDATION	NONE	EDUCATION	EDUCATION OPERATING SUPPORT	

OAKLAND, CA 94612		CONSERV	OPERATING SUPPORT	
SPECIAL OPERATIONS WARRIOR FOUNDATION PO BOX 89367 TAMPA, FL 33689	NONE	EDUCATION	EDUCATION OPERATING SUPPORT	2,500

Total				238 000
SPECIAL OPERATIONS WARRIOR FOUNDATION PO BOX 89367 TAMPA, FL 33689	NONE	EDUCATION	EDUCATION OPERATING SUPPORT	2,500
OAKLAND, CA 94612			OPERATING SUPPORT	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation 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 ST MARTIN'S EPISCOPAL CHURCH NONE RELIGIOUS RELIGIOUS ORGANIZATION 10,000

717 SAGE ROAD HOUSTON, TX 77056		ORGANIZATI	OPERATING SUPPORT - ANNUAL FUND	
THE CENTER491 HILLSDALE DR CHARLOTTESVILLE, VA 22901	NONE	PUBLIC WELFARE	PUBLIC WELFARE OPERATING SUPPORT	2,500
THE GARY SINISE FOUNDATION PO BOX 368 WOODLAND HILLS, CA 91365	NONE	PUBLIC WELFARE	PUBLIC WELFARE OPERATING SUPPORT	2,000

Total . .

238,000

■ 3a

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

	1			
THE UNIVERSITY OF TEXAS MD ANDERSON CANCER CENTER PO BOX 4470 HOUSTON, TX 772104470	NONE	MEDICAL	MEDICAL OPERATING SUPPORT	750
UCONN FOUNDATION 2390 ALUMNI DR 3206	NONE	EDUCATION	EDUCATION OPERATING SUPPORT	5,000

•				
UCONN FOUNDATION 2390 ALUMNI DR 3206 STORRS, CT 06269	NONE	EDUCATION	EDUCATION OPERATING SUPPORT	5,000
WMFE 90711510 EAST COLONIAL DR ORLANDO, FL 32817	NONE	ARTS, CULTURE, AND H	ARTS, CULTURE AND HUMANITIES OPERATING SUPPORT	2,000

STORRS, CT 06269			SUPPORT	
WMFE 90711510 EAST COLONIAL DR ORLANDO, FL 32817	NONE	ARTS, CULTURE, AND H	ARTS, CULTURE AND HUMANITIES OPERATING SUPPORT	2,000
Total			▶ 3a	238,000

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 status of contribution any foundation manager recipient Name and address (home or business)

a Paid during the year			
	or substantial contributor		

WUCF	NONE	ARTS,	ARTS, CULTURE AND	2,000
12461 RESEARCH PARKWAY SUITE 550		CULTURE,	HUMANITIES OPERATING	
ORLANDO, FL 32826		AND H	SUPPORT	

238,000

17001	110112	,,	/ ((10) 002101(2 / ((10)	
12461 RESEARCH PARKWAY SUITE 550		CULTURE,	HUMANITIES OPERATING	
ORLANDO, FL 32826		AND H	SUPPORT	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491197010180		
TY 2019 Investments Corporate Stock Schedule					
Name:	THE FRUEHAUF FO	DUNDATION			

1,450,242

1,198,265

EIN: 23-7015744		
Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value

US EQUITY

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491197010180				
TW 2040 To select the Other Orbert to						
TY 2019 Investments - Other Schedule						

66,570

1,234,856

66,431

1,290,116

Name: THE FRUEHAUF FOUNDA

MUTUAL FUND - FIXED INCOME COMMINGLED - FIXED INCOME

EIN: 23-7015744

Investments Other Schedule 2						
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value			
INTERNATIONAL EQUITY	FMV	1,389,847	1,640,832			

FMV

FMV

-	
TY 2019 Other Income Schedule	

Name: THE FRUEHAUF FOUNDATION EIN: 23-7015744

Other Income Schedule					
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income		
MARKET DISCOUNT	388	388			
ORIGINAL ISSUE DISCOUNT	78	78			
LITIGATION SETTLEMENT	2 4 1 5	2 415			

DLN: 93491197010180

D	escription		Amount	
EIN:	23-7015744			
Name:	THE FRUEHAU	F FOUNDATION		
TY 2019 Other Increases Schedule				
efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491197010180	

PRIOR PERIOD ADJUSTMENT FOR PREPAID TAXES

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491197010180							
TY 2019 Taxes Schedule							
Name: THE FRUEHAUF FOUNDATION							
EIN: 23-7015744							
EIN. 25-/015/44							
Category Amount Net Investment Adjusted Net Disbursement Income Income for Charitat							

FOREIGN W/H

4,007

4,007

Purposes