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2019

OMB No. 1545-0052

## **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

or	caler	ndar year 2019, or tax year beginning 01-01-20	)19 , aı	ıd eı	nding 12-31-	2019				
		Indation			A Employer id	A Employer identification number				
FC	UNDAT	& J FAYE SAMPSON FAMILY FOUNDATI IONC/O INTENTIONAL PHILANTHROPHY			25-6407379					
		l street (or P.O. box number if mail is not delivered to street address) SDA METRO CENTER NO 960	Room/suite		· ·	mber (see instruction	ns)			
Citv	or town	, state or province, country, and ZIP or foreign postal code			(301) 761-4433	(301) 761-4433				
		MD 208146345			C If exemption	application is pendin	g, check here			
G Cł	neck al	l that apply: $\Box$ Initial return $\Box$ Initial return of a	former public charity		<b>D 1.</b> Foreign or	ganizations, check he	ere			
		☐ Final return ☐ Amended return				ganizations meeting k here and attach co				
		Address change Name change			<u> </u>		· —			
_	,	rpe of organization: ✓ Section 501(c)(3) exempt private to a stable track.	foundation e private foundation			undation status was t n 507(b)(1)(A), chec				
				-1						
of '	year (f	xet value of all assets at end from Part II, col. (c),  ▶\$ 33,487,440  J Accounting method:  □ Other (specify) (Part I, column (d) must	<b>☑</b> Cash ☐ Accru	aı		ation is in a 60-montl n 507(b)(1)(B), chec				
Pa	rt I	Analysis of Revenue and Expenses (The total	( ) 5 .		I		(d) Disbursements			
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)			
	1	Contributions, gifts, grants, etc., received (attach schedule)	27,890							
	2	Check ▶ ☐ if the foundation is <b>not</b> required to attach Sch. B								
	3	Interest on savings and temporary cash investments	10,466		10,466					
	4	Dividends and interest from securities	598,359		598,359					
	5a	Gross rents								
ne	b	Net rental income or (loss)								
	6a	Net gain or (loss) from sale of assets not on line 10	508,091							
Revenue	b	Gross sales price for all assets on line 6a 8,268,197								
2	7	Capital gain net income (from Part IV, line 2)			508,091					
	8	Net short-term capital gain								
	9	Income modifications								
	10a	Gross sales less returns and allowances								
	b	Less: Cost of goods sold								
	C	Other income (attach schedule)	<b>66-1</b> 21.150							
	11	,	21,158		1 116 016					
	12	Total. Add lines 1 through 11	1,165,964		1,116,916		6.750			
	13 14	Other employee salaries and wages	6,750				6,750			
ı.A	15	Pension plans, employee benefits	272		0		272			
Se	16a	Legal fees (attach schedule)								
<u></u>	ь	Accounting fees (attach schedule)	8,250		0		8,250			
Ä	c	Other professional fees (attach schedule)	219,432	-	77,292		142,140			
Νe	17	Interest			,					
Lat	18	Taxes (attach schedule) (see instructions)								
<u> </u>	19	Depreciation (attach schedule) and depletion								
Ξ	20	Occupancy								
Ă	21	Travel, conferences, and meetings	1,592		0		1,592			
and	22	Printing and publications								
Operating and Administrative Expenses	23	Other expenses (attach schedule)	3,226		0		3,226			
a E	24	Total operating and administrative expenses.								
<u>p</u>		Add lines 13 through 23	239,522		77,292		162,230			
)	25	Contributions, gifts, grants paid	1,411,658			-	1,411,658			
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	1,651,180		77,292		1,573,888			
	27	Subtract line 26 from line 12:	.,,100		,		_,			
	а	Excess of revenue over expenses and								
	b	disbursements  Net investment income (if negative, enter -0-)	-485,216	$\vdash$	1.020.024					
	C	Adjusted net income (if negative, enter -0-)		$\vdash$	1,039,624					
	. ~		i	1			į.			

Cat. No. 11289X

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Page 2

31,796,263

250,000

33,487,440

30,033,427

31,628,565

31,628,565

31.628.565

31,628,565

32,113,781 -485,216

31,628,565

31.628.565 Form **990-PF** (2019)

1

2

3

4

5

6

32,113,781

32,113,781

32,113,781

250,000

Form 990-PF (2019)

Liabilities

**Fund Balances** 

ŏ 26

Assets 27

Net 29

2

3

24

25

28

30

Part III

	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶	•		
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶	ľ		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	198,068	206,096	302,13
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			

## Less: accumulated depreciation (attach schedule) 12 Investments—mortgage loans . . . . Investments—other (attach schedule) 29,611,493 13 14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶ \_ Other assets (describe **∞** 이%) 15 Total assets (to be completed by all filers—see the 16 instructions. Also, see page 1, item I) 32,113,781 17 Accounts payable and accrued expenses . Grants payable 18 19 Loans from officers, directors, trustees, and other disqualified persons 20 Mortgages and other notes payable (attach schedule). . . . . . 21 22 Other liabilities (describe -\_ Total liabilities(add lines 17 through 22) . . . . . . . . . . . . 23

Foundations that follow FASB ASC 958, check here ▶

Capital stock, trust principal, or current funds . . . .

Paid-in or capital surplus, or land, bldg., and equipment fund

Retained earnings, accumulated income, endowment, or other 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-

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

Analysis of Changes in Net Assets or Fund Balances

Foundations that do not follow FASB ASC 958, check here ▶ □

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

Net assets with donor restrictions .

and complete lines 26 through 30.

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 . . . . . .

Decreases not included in line 2 (itemize)

Page **3** 

Capital Gallis	and Losses for Tax on Thivest	inent filcome					
	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)  (b)  How acquired P—Purchase D—Donation						
1 a THRU PUBLICLY TRADED	SECURITIES		Р				
<b>b</b> CAPITAL GAINS DIVIDEN	IDS		Р				
c							
d							
e							
	(f)		(g)	,	h)		
(e)	Depreciation allowed		other basis		or (loss)		
Gross sales price	(or allowable)		ense of sale		minus (g)		
<b>a</b> 7,85	8,845		7,760,106		98,739		
<b>b</b> 40	9,352				409,352		
c							
d							
e							
	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		1)		
Complete only for assets	(i)		(k)		( <b>I)</b> (h) gain minus		
(i)	Adjusted basis		of col. (i)	col. (k), but not	less than -0-) <b>or</b>		
F.M.V. as of 12/31/69	as of 12/31/69		. (j), if any	Losses (fr	om col.(h))		
a					98,739		
b					409,352		
c							
d							
e							
	or (net capital loss)  gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi	. , . ,	Part I, line 7	3	508,091		
Part V Qualification L	Jnder Section 4940(e) for Re	educed Tax on Net	Investment In	come			
(For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	t investment incom	ne.)			
If section 4940(d)(2) applies, le	eave this part blank.						
	e section 4942 tax on the distributal of qualify under section 4940(e). Do			? \ \ \ \ \ \ \ \	es 🗹 No		
	nount in each column for each year;			e			
(a)	•		making any eneries	(d)			
Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab		Distribution rat (col. (b) divided by o	col. (c))		
2018	1,428,271		31,416,785		0.045462		
2017	1,417,072		29,464,394		0.048094		
2016	1,682,250		28,673,162		0.058670		
2015	1,255,712		29,978,271		0.041887		
2014	1,142,633		29,942,879	T	0.038160		
2 Total of line 1, column (d	•		2		0.232273		
number of years the four	ofor the 5-year base period—divide to dation has been in existence if less	than 5 years	.0, or by the		0.046455		
<b>4</b> Enter the net value of no	ncharitable-use assets for 2019 fron	n Part X, line 5	4		31,556,117		
<b>5</b> Multiply line 4 by line 3			5		1,465,939		
<b>6</b> Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		10,396		
<b>7</b> Add lines 5 and 6			7		1,476,335		
8 Enter qualifying distributi	ons from Part XII, line 4 ,		8		1,823,888		
If line 8 is equal to or gre	eater than line 7, check the box in Pa		plete that part usin	ig a 1% tax rate. Se	e the Part VI		
instructions.				Fr	orm <b>990-PF</b> (2019)		
					(====)		

Form	990-PF (2019)									F	Page <b>6</b>
Pa	rt VIII-B Statements Regar	ding	<b>Activities for Which</b>	Form 4720 May Be	Required (co	ntinue	ed)				
5a	During the year did the foundation	рау о	r incur any amount to:							Yes	No
	(1) Carry on propaganda, or other	wise a	ttempt to influence legisla	ation (section 4945(e))?		Yes	<b>✓</b>	No			
	(2) Influence the outcome of any s	pecifi	c public election (see sect	ion 4955); or to carry		1 163		110			
	on, directly or indirectly, any v	oter r	egistration drive?			Yes	~	No			
	(3) Provide a grant to an individua	l for t	ravel, study, or other simi	ilar purposes?		Yes	~	No			
	(4) Provide a grant to an organizat	ion of	ther than a charitable, etc	., organization described	<u> </u>						
	in section 4945(d)(4)(A)? See	nstru	ctions		· · •	Yes		No			
	(5) Provide for any purpose other	than r	eligious, charitable, scien	tific, literary, or			_				
	educational purposes, or for th	educational purposes, or for the prevention of cruelty to children or anim					~	No			
<b>b</b> If any answer is "Yes" to $5a(1)-(5)$ , did			any of the transactions fa	il to qualify under the exc	ceptions describe	Yes ed in					
	Regulations section 53.4945 or in a	curre	ent notice regarding disas	ter assistance? See instru	uctions				5b		No
	Organizations relying on a current	notice	regarding disaster assist	ance check here		. ▶					
C	If the answer is "Yes" to question 5	a(4),	does the foundation claim	n exemption from the							
	tax because it maintained expendit		· · · · · ·			Yes		No			
	If "Yes," attach the statement requ	ired b	y Regulations section 53.	4945–5(d).							
6a	Did the foundation, during the year	, rece	ive any funds, directly or	indirectly, to pay premiu	ms on						
	a personal benefit contract?					Yes	<b>✓</b>	No			
b	Did the foundation, during the year	, pay	premiums, directly or ind	irectly, on a personal ber	nefit contract? .				6b		No
	If "Yes" to 6b, file Form 8870.										
7a	At any time during the tax year, wa					Yes	<b>✓</b>	No			
b	If "Yes", did the foundation receive		,				•		7b		
8	Is the foundation subject to the sec				in remuneration	or					
	excess parachute payment during t	he ye	ar?			Yes	<b>✓</b>	No			
1	List all officers, directors, truste		oundation managers and (b) Title, and average	d their compensation. (c) Compensation (If			to	(0)	- Evman		
	(a) Name and address		hours per week devoted to position	not paid, enter -0-)		yee benefit plans and rred compensation			d <b>(e)</b> Expense account other allowances		
KATH	ERINE S MCBRIDE		RETARY/TRUSTEE	0			(	)			C
	HESDA METRO CENTER SUITE 960	1.00									
	ESDA, MD 20814 E SAMPSON	TRUS	TEE	0							
	HESDA METRO CENTER SUITE 960	1.00	)   LL				,	1			·
	ESDA, MD 20814										
KRIS	Y S RODRIGUEZ		IDENT/LEAD TRUSTEE	6,750			(	ס			C
	HESDA METRO CENTER SUITE 960 ESDA, MD 20814	5.00									
2		id er	nplovees (other than th	l nose included on line 1	see instruction	ons). I	[f no	ne, e	nter "	NONE	
	•		T T		(d) Contribu						
(a)	Name and address of each employee more than \$50,000	paid	(b) Title, and average hours per week devoted to position	(c) Compensation	employee plans and d compens	benefit eferre				se acco	
NON	 E				1						
			]								
			1								
							$\neg \dagger$				
			1								
Tota	I number of other employees paid or	/er \$5	0,000			<b></b>					C
								Ear	-m 00	0-PF	(2019)

Form 990-PF (2019)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trust and Contractors (continued)	tees, Foundation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional	services (see instructions). If none, enter "NOI	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
INTENTIONAL PHILANTHROPY LLC	ADMIN, MGMT, AND CONSULTING	142,140
3 BETHESDA METRO CENTER SUITE 960 BETHESDA, MD 20814		
SYNTRINSIC INVESTMENT COUNSEL	INVESTMENT MANAGEMENT	77,284
1899 WYNKOOP STREET - SUITE 315 DENVER, CO 80202		
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. Incl organizations and other beneficiaries served, conferences convened, research paper		Expenses
2		
3		
4		
Part IX-B Summary of Program-Related Investments	(see instructions)	
Describe the two largest program-related investments made by the foundation of	· /	Amount
1 REINVESTMENT FUND - LENDING IN THE GREATER PHILADELPHIA A BUILDING STRONG, MORE EQUITABLE COMMUNITIES BY MAKING HAVAILABLE AND ACCESSIBLE TO FAMILIES, REGARDLESS OF INCO AND STRATEGIC INVESTMENTS TO IMPROVE THE QUALITY OF LIFE FINANCIAL TOOLS, THEY BRING HIGH-QUALITY GROCERY STORES, CENTERS TO THE COMMUNITIES THAT NEED BETTER ACCESS-CREATERS TO THE LONG TERM AND HELP FAMILIES LEAD HEALTHIER, MOR ARTS AND CULTURE, CENTRAL BALTIMORE FUTURE FUND, EARLY CEOUITABLE FOOD SYSTEMS, INVEST HEALTH AND PAY FOR SUCCESSORY	AREAREINVESTMENT FUND IS COMMITTED TO HEALTH, WELLBEING, AND FINANCIAL SECURITY ME OR ZIP CODE. THEY INTEGRATE DATA, POLICY IN NEIGHBORHOODS. USING ANALYTICAL AND AFFORDABLE HOUSING, SCHOOLS AND HEALTH ATING ANCHORS THAT ATTRACT INVESTMENT IS PRODUCTIVE LIVES. INITIATIVES INCLUDE: CHILDHOOD EDUCATION, CLEAN ENERGY,	250,000
All other program-related investments. See instructions.		230,000
Total. Add lines 1 through 3		250,000 Form <b>990-PF</b> (2019)

Page 8

1,577,806

10,396

21.158

1,567,410

1,588,568

1.588.568

1,573,888

1,823,888

1.813.492

Form 990-PF (2019)

10,396

250,000

Form 990-PF (2019)

1

2a

3

4

5

6

1

2

3

4

5

6

b

Part XII

3	Subtract line 2 from line 1d	3	32,036,667
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	480,550
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	31,556,117
6	Minimum investment return. Enter 5% of line 5	6	1,577,806
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	nd cei	rtain foreign
Par	organizations check here $\triangleright$ and do not complete this part.)		

2a

2b

10,396

2c

3

4

5

6

7

1a

1b

2

За 3h

4

5

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. . .

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

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

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

Tax on investment income for 2019 from Part VI, line 5. . . . . .

Income tax for 2019. (This does not include the tax from Part VI.). . .

Add lines 2a and 2b.

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

Part XIII Undistributed Inc	ome (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2018	(c) 2018	<b>(d)</b> 2019
1 Distributable amount for 2019 from	Part XI, line 7				1,588,568
2 Undistributed income, if any, as of t	he end of 2019:				
a Enter amount for 2018 only				1,013,240	
<b>b</b> Total for prior years: 20, 2	0, 20		0		
3 Excess distributions carryover, if an	y, to 2019:				
a From 2014					
<b>b</b> From 2015					
c From 2016					
<b>d</b> From 2017					
d From 2017					

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810,648

777,920

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1,013,240

e From 2018. . . . . f Total of lines 3a through e. . . . . . . .

4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ 1,823,888 a Applied to 2018, but not more than line 2a

6 Enter the net total of each column as

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. .

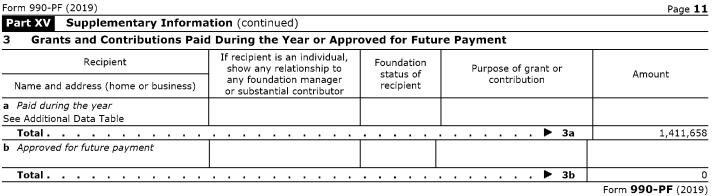
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract line 4b from line 2b . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . **d** Subtract line 6c from line 6b. Taxable amount —see instructions . . . . . . . . . . . . . e Undistributed income for 2018. Subtract line 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 . . . . . .

indicated below:

**b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . .

**d** Applied to 2019 distributable amount. . . . . e 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).)



er gross	amounts unless otherwise indicated.	Unrelated bu	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
_	n service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions.)
	and contracts from government agencies rship dues and assessments					
Interes investm	t on savings and temporary cash nents			14	10,466	
	ds and interest from securities			14	598,359	
	tal income or (loss) from real estate: financed property					
<b>b</b> Not d	ebt-financed property					
	tal income or (loss) from personal property					
Gain or	(loss) from sales of assets other than					
invento Net ince	ry			18	508,091	
Gross p	profit or (loss) from sales of inventory					
Other r	evenue: REFUND			01	21,158	
ь					·	
d e						
d e			(	)	1,138,074	
e Subtota Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations.)			1,138,074	
e Subtota Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations.) ne Accomplish	ment of Exem	pt Purposes		1,138,074
e Subtota Total. (See wo	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. (See wo art XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. (See wo art XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. (See wo art XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. (See wo art XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. (See wo art XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. (See wo art XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. (See wo art XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. (See wo art XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. (See wo art XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. (See wo art XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. (See wo art XVI ne No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. (See wo art XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. (See wo art XVI ne No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. (See wo art XVI	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. (See wo art XVI ne No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. (See wo art XVI ne No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) ne Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	

om 550 TT (2015)									
		Information Regarding Transfers To and Transactions and Relationships With Noncharit	abla						
Pa	rt XVII	Exempt Organizations	abic						
<b>1</b> D	oid the organ	nization directly or indirectly engage in any of the following with any other organization described in section 501							

		rganization directly or in than section 501(c)(3)								on 501		Yes	No
	. , .	from the reporting foun	-	•		, , ,	•			-			
					itable exe	impe organización					la(1)		No
	(-,	er assets.									a(2)		No
		nsactions:		•						· F	(_/		110
		s of assets to a nonchar	itable evemnt	organ	vization					١,	b(1)		No
		hases of assets from a r		-							b(2)		No
		al of facilities, equipmen			-						b(3)		
											<del>``</del>		No
		nbursement arrangemen									b(4)		No
		ns or loan guarantees.									b(5)		No
		rmance of services or m	•		_					· 1	b(6)		No
	_	f facilities, equipment, n								· L	1c		No
i	of the goo n any tra	swer to any of the above ods, other assets, or ser insaction or sharing arra	vices given by ngement, sho	the r	eporting f olumn <b>(d</b>	foundation. If the  i) the value of the	foundation goods, oth	receive er asse	d less than fair mar ts, or services recei	ket value ved.			<b>.</b>
(a)	Line No.	(b) Amount involved	(c) Name of r	noncnar	ritable exer	mpt organization	(a) Descri	iption of	transfers, transactions	, and snarii	ng arrai	ngemen	ts
						+							
						+							
(	described	indation directly or indire in section 501(c) (other complete the following s	r than section	,		•		-		es 🗹	No		
		(a) Name of organization	on		(b	) Type of organizati	on		(c) Description	of relation	ship		
				_									
	of n whi	der penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, co										
Sig He	re	*****				2020-04-13	***	****		May the return with the below			
		Signature of officer or t	rustee			Date	Titl	le		(see ins	tr.) 🗸	Yes □	No
		Print/Type preparer's	s name	Prepa	rer's Sign	ature	Date		Check if self- employed ▶ □	PTIN P	00097	440	
Pai Pré	id eparei	CHRISTOPHER PETERMANN	O'CONNOR D	A)/ICC	LLD		2020-04	4-13	·				
	e Only	/	O'CONNOR DA		LLT					Firm's EIN	N ►27-	17289	45
			55 FIFTH AVEN EW YORK, NY		2					Phone no	(212)	) 286-2	2600

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 AMERICAN FOUNDATION FOR SUICIDE N/A PC IN HONOR OF BRIAN ALLEN 10,000 PREVENTION DEEBEL

120 WALL STREET 22ND FLOOR NEW YORK, NY 10005				
AFRICA YOGA PROJECT INC C/O FUSION ACCOUNTING PO BOX 1435 LAYTON.UT 84041	N/A	PC	GENERAL OPERATING SUPPORT	2,500

C/O FUSION ACCOUNTING PO BOX 1435 LAYTON, UT 84041				_,,,,,
ALLIES FOR HEALTH WELLBEING 5913 PENN AVENUE	N/A	PC	GENERAL OPERATING SUPPORT 2019	5,000

1435 LAYTON, UT 84041				
ALLIES FOR HEALTH WELLBEING 5913 PENN AVENUE	N/A	PC	GENERAL OPERATING SUPPORT 2019	5,00

Total .

LATION, OT 04041				
ALLIES FOR HEALTH WELLBEING 5913 PENN AVENUE PITTSBURGH, PA 15206	N/A	PC	GENERAL OPERATING SUPPORT 2019	5,000

1,411,658

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

AMERICAN CIVIL LIBERTIES UNION INC 125 BROAD ST 18TH FLOOR NEW YORK, NY 10033	N/A	PC	SUPPORT FOR IMMIGRATION RIGHTS	15,000
a Paid during the year				

NEW YORK, NY 10033				
AMERICAN CIVIL LIBERTIES UNION INC 125 BROAD ST 18TH FLOOR NEW YORK, NY 10033	N/A	PC	LGBTQ RIGHTS	5,000
AMERICAN IMMIGRATION COUNCIL 1331 G STREET SUITE 200	N/A	PC	IMMIGRATION JUSTICE CAMPAIGN	30,000

Total			▶ 3a	1,411,658
AMERICAN IMMIGRATION COUNCIL 1331 G STREET SUITE 200 WASHINGTON, DC 20005	N/A	PC	IMMIGRATION JUSTICE CAMPAIGN	30,000
125 BROAD ST 18TH FLOOR NEW YORK, NY 10033				

	11211 101000				
	AMERICAN IMMIGRATION COUNCIL 1331 G STREET SUITE 200 WASHINGTON, DC 20005	N/A	PC	IMMIGRATION JUSTICE CAMPAIGN	30,000
1				_	

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

	or substantial contributor			
a Paid during the year				
ANTI-DEFAMATION LEAGUE 605 THIRD AVENUE NEW YORK, NY 10158	N/A	PC	TEMPLE OF LIFE	2,500
BLACK HILLS REGIONAL SKI FOR LIGHT	N/A	PC	41ST ANNUAL BLACK HILLS	5.000

NEW YORK, NY 10158				
BLACK HILLS REGIONAL SKI FOR LIGHT PO BOX 3707 RAPID CITY, SD 57709	N/A	PC	41ST ANNUAL BLACK HILLS REGIONAL SKI FOR LIGHT.	5,000
BUCKNELL UNIVERSITY	N/A	PC	JAMES D. HOSTETLER OUTDOOR	20,000

PO BOX 3707 RAPID CITY, SD 57709			REGIONAL SKI FOR LIGHT.	3,600
BUCKNELL UNIVERSITY 301 MARKET ST SUITE 2 LEWISBURG, PA 17837	N/A	PC	JAMES D. HOSTETLER OUTDOOR EDUCATION AND LEADERSHIP FUND	20,000
Total			<b>→</b> 22	1 411 658

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 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 CENTER FOR COALFIELD JUSTICE N/A PC 35,000 CULTIVATING YOUTH

WASHINGTON, PA 15301			COMMUNITIES	
CENTER FOR MIND BODY MEDICINE 5225 CONNECTICUT AVENUE NW SUITE 415 WASHINGTON, DC 20015	N/A	PC	BUILDING CAPACITY, LEVERAGING GROWTH: THE CMBM WEBSITE REDESIGN	55,000

415 WASHINGTON, DC 20015			CMBM WEBSITE REDESIGN	
COLORECTAL CANCER ALLIANCE 1025 VERMONT AVENUE WASHINGTON, DC 20005	N/A	PC	2019 - BLUE HOPE BASH MATCH	5,000
Total	1.411.658			

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 COLORECTAL CANCER ALLIANCE N/A PC COLORECTAL CANCER 100,000 1025 VERMONT AVENUE INTEGRATIVE MEDICINE WASHINGTON DC 20005 DDOCDAM (CDC IMD)

WASHINGTON, DC 20005			PROGRAM (CRC IMP)	
COMMUNITY FOUNDATION OF GREATER JOHNSTOWN DBA COMMUNITY FOUNDATION FOR THE 216 FRANKLIN ST SUITE 400 JOHNSTOWN, PA 15901	N/A	PC	SCHOOL FOOD SUMMIT	21,158
COMMUNITY KITCHEN PITTSBURGH 107 FLOWERS AVE	N/A	PC	COMMUNITY KITCHEN PITTSBURGH FOOD EDUCATION	50,000

3a

1,411,658

PITTSBURGH, PA 15207

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, 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 N/A PC GENERAL OPERATING SUPPORT 3,500 COMMUNITY YOUTH SERVICES 711 STATE AVENUE NE 3RD FLOOR

OLYMPIA, WA 98506				
CONCERN FOR ANIMALSP O BOX 4422 TUMWATER, WA 98501	N/A	PC	GENERAL OPERATING SUPPORT	5,000
DOG TAG BAKERY INC 3206 GRACE STREET NW WASHINGTON DC 20007	N/A	PC	DOG TAG FELLOWSHIP PROGRAM	25,000

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1,411,658

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 status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year DR EISENBERG AT THE WINDWARD N/A PC TEACHING KITCHEN 100,000 LIND COLLABORATIVE FUNDING FOR

1201 CONNECTICUT AVE NW SUITE 300 WASHINGTON, DC 20036			YEARS 3-5	
ENVIRONMENTAL HEALTH TRUST PO BOX 58 TETON VILLAGE, WY 83025	N/A	PC	GENERAL OPERATING BUDGET	1,000

Total			▶ 3a	1,411,658
ENVIRONMENTAL WORKING GROUP 1436 U ST NW SUITE 100 WASHINGTON, DC 20009	N/A	PC	HEALTHY CHILD HEALTHY WORLD 2019	5,000
PO BOX 58 TETON VILLAGE, WY 83025			GENERAL OF ENATING BODGET	1,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, 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 FAIR SHAKE ENVIRONMENTAL LEGAL N/A PC COMMUNITY OUTREACH AND 35,000 SERVICES PLANNING 5614 ELGIN STREET DITTERLIDGH DA 15206

11113B0KGH,1A 13200				
FAMILY HOUSE 5001 BAUM BLVD SUITE 545 PITTSBURGH, PA 15213	N/A	PC	HEALTHY EATING PROGRAM AND GUEST ASSISTANCE	60,000
FRACTRACKER ALLIANCE 704 LISBURN ROAD SUITE 102	N/A	PC	PROTECTING APPALACHIA FROM PETROCHEMICAL DEVELOPMENT	20,000

Total			▶ 3a	1,411,658
FRACTRACKER ALLIANCE 704 LISBURN ROAD SUITE 102 CAMP HILL, PA 17011	N/A	PC	PROTECTING APPALACHIA FROM PETROCHEMICAL DEVELOPMENT	20,000
PITTSBURGH, PA 15213			GUEST ASSISTANCE	

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 B1 / A 10 000

777 POST RD SUITE 205 DARIEN, CT 06820	N/A	PC	GENERAL OPERATING SUPPORT	10,000
GARDEN RAISED BOUNTY 2016 ELLIOTT AVE NW OLYMPIA, WA 98502	N/A	PC	GENERAL OPERATING SUPPORT	2,500
GIVE BACK YOGA FOUNDATION EAT	N/A	PC	EAT BREATHE THRIVE	65,000

2016 ELLIOTT AVE NW OLYMPIA, WA 98502				_,
GIVE BACK YOGA FOUNDATION EAT BREATHE THRIVE 900 BASELINE ROAD COTTAGE 13B BOULDER, CO 80302	N/A	PC	EAT BREATHE THRIVE	65,000
Total			▶ 3a	1,411,658

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 GIVEBACK YOGA FOUNDATION N/A PC MINDFUL YOGA THERAPY (MYT) 30,000 MINDFUL YOGA THERAPY 900 BASELINE RD 13B

BOULDER, CO 80302				
GROW PITTSBURGH 6587 HAMILTON AVENUE 2 W PITTSBURGH, PA 15206	N/A	PC	SCHOOL GARDEN AND EARLY CHILDHOOD PROGRAMMING	75,000
INHERSHOES INC 8311 WESTMINSTER BLVD STE 330	N/A	PC	GENERAL OPERATING SUPPORT	2,000

1,411,658

WESTMINSTER, CA 92683

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 Detail alcosing the account

a Paid during the year				
INTERFAITH WORKSPO BOX 1221 OLYMPIA, WA 98507	N/A	PC	GENERAL OPERATING SUPPORT	5,000
LANGLEY SCHOOL INC 1411 BALLS HILL RD	N/A	PC	BUILDING CAMPAIGN ENDOWMENT	10,000

LANGLEY SCHOOL INC 1411 BALLS HILL RD MCLEAN, VA 22101	N/A	PC	ENDOWMENT	10,000
MAMATOTO VILLAGE INC 311 47TH ST NE WASHINGTON DC 20019	N/A	PC	GENERAL OPERATING	2,500

MCLEAN, VA 22101				
MAMATOTO VILLAGE INC 311 47TH ST NE WASHINGTON, DC 20019	N/A	PC	GENERAL OPERATING	2,500
Total			▶ 3a	1,411,658

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

N/A

NAMI INC

3803 N FAIRFAX DR SUITE 100 ARLINGTON, VA 22203			SENERALE OF ERVITING SOFT SIXT	10,000
PITTSBURGH CARES 3505 BUTLER STREET PITTSBURGH, PA 15201	N/A	PC	YOUTH ENGAGED IN SERVICE (YES)	20,000

PC

GENERAL OPERATING SUPPORT

10 000

PITTSBURGH CARES 3505 BUTLER STREET PITTSBURGH, PA 15201	N/A	PC	YOUTH ENGAGED IN SERVICE (YES)	20,000
PITTSBURGH PUBLIC THEATER CORPORATION 621 PENN AVENUE PITTSBURGH, PA 15222	N/A	PC	2019 GENERAL OPERATING	25,000
Total			<b>&gt;</b> 3a	1.411.658

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 PITTSBURGH PUBLIC THEATER N/A PC GENERAL OPERATING SUPPORT 5,000 CORPORATION 2019 **621 PENN AVENUE** PITTSBURGH, PA 15222

PITTSBURGH SYMPHONY ORCHESTRA HEINZ HALL 600 PENN AVENUE PITTSBURGH, PA 15222	N/A	PC	IN HONOR OF JEAN HORNE	5,000
POSTPARTUM SUPPORT INTERNATIONAL 6706 SW 54TH AVENUE	N/A	PC	GENERAL OPERATING SUPPORT 2019	1,000

3a

1,411,658

HEINZ HALL 600 PENN AVENUE PITTSBURGH, PA 15222				
POSTPARTUM SUPPORT INTERNATIONAL 6706 SW 54TH AVENUE PORTLAND, OR 97219	N/A	PC	GENERAL OPERATING SUPPORT 2019	1,00

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, 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 REAL FOOD FOR KIDSPO BOX 1521 N/A PC GENERAL OPERATING SUPPORT 50,000

GREAT FALLS, VA 22066				
SIERRA CLUB FOUNDATION 2101 WEBSTER ST SUITE 1250 OAKLAND, CA 94612	N/A	PC	PENNSYLVANIA CHAPTER 100% CLEAN ENERGY	50,000
THE EDED BODGERG COMPANY	NI/A	DC.	2010 CENERAL OPERATING	30,000

OAKLAND, CA 94612			OLD WE ENERGY	
THE FRED RODGERS COMPANY 2100 WHARTON STREET SUITE 700 PITTSBURGH, PA 15203	N/A	PC	2019 GENERAL OPERATING	20,000

■ 3a

1,411,658

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 status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE MIDWIFE CENTER FOR BIRTH & N/A PC COMMUNITY WELLNESS 75,000 WOMEN'S HEALTH **PROGRAM** 2831 PENN AVENUE

PITTSBURGH, PA 15222				
THE SOLAR FOUNDATION 1110 VERMONT AVE NW SUITE 930 WASHINGTON, DC 20005	N/A	PC	GENERAL OPERATING SUPPORT 2019	2,000
TREVOR PROJECT INC 8704 SANTA MONICA BOULEVARD 600 WEST HOLLYWOOD, CA 90069	N/A	PC	GENERAL OPERATING SUPPORT	7,500

Total . .

1,411,658

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 TSPC DBA A PLACE TO BE N/A PC GENERAL OPERATING SUPPORT 5,000

9 NORTH 1AV CEREET

Total .

MIDDLEBURG, VA 20117			2019	
TSPC DBA A PLACE TO BE 8 NORTH JAY STREET MIDDLEBURG, VA 20117	N/A	PC	GENERAL OPERATING SUPPORT 2019	5,000
TWENTY-FIVE CLUB (AT MAGEE	N/A	PC	2019 TWENTY-FIVE CLUB	2,500

2010

1,411,658

8 NORTH JAY STREET MIDDLEBURG, VA 20117			2019	-,
TWENTY-FIVE CLUB (AT MAGEE WOMEN'S RESEARCH INSTITUTION) 3339 WARD STREET PITTSBURGH, PA 15213	N/A	PC	2019 TWENTY-FIVE CLUB	2,500

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 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 UNITY OF FAIRFAXOAKTON VA 22124 N/A PC GENERAL OPERATING 1,000 OAKTON, VA 22124 l PC 100.000 UNIVERSITY OF ARIZONA FOUNDATION | N/A DEVELOPING INTEGRATIVE

FOR THE BENEFIT OF AZ CENTER FOR INTEGRATI 1111 N CHERRY AVE TUCSON, AZ 85721			MEDICINE (IM) LEADERS AND IM APPROACHES TO CARE OF CHILDREN WITH ADHD/AUTISM	
UPMC CANCERCENTER CANCER CENTER 3RD FLOOR 5115 CENTRE AVENUE PITTSBURGH, PA 15232	N/A	PC	UPMC WELLNESS AND INTEGRATIVE ONCOLOGY PROGRAM (WIOP)	150,000

▶ 3a

1,411,658

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 status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year YMCA OF GREATER PITTSBURGH N/A PC SAMPSON FAMILY YMCA 45,000 FOSTER PLAZA 10 680 ANDERSEN TEACHING KITCHEN DDTVE

SUITE 400 PITTSBURGH, PA 15220				
YOGA IN SCHOOLS6818 SIMONTON ST PITTSBURGH, PA 15208	N/A	PC	2019 GENERAL OPERATING SUPPORT	5,000
YOKID STRETCH YOUR LIMITS 108 NORTH PAYNE STREET ALEXANDRIA, VA 22314	N/A	PC	GENERAL OPERATING BUDGET	10,000

Total . .

1,411,658

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<b>TY 2019 Accounting Fees Sc</b>	hedule			
		TIONC/O INTENTIC	N FAMILY FOUNDAT NAL PHILANTHROP	
Category A	mount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREPARATION	8,250	0		8,250

TY 2019 Investments Corporate Stock Schedule
--

Name: MYLES D & J FAYE SAMPSON FAMILY FOUNDATI FOUNDATIONC/O INTENTIONAL PHILANTHROPHY

25 (407270

7,499.00 SH OF S&T BANCORP STOCK

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

<b>EIN:</b> 25-640/3/9		
Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value

nd of Year Fair

302,135

DLN: 93491105003070

206,096

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491105003070
<u>.                                      </u>		<u> </u>

## **TY 2019 Investments - Other Schedule**

Name: MYLES D & J FAYE SAMPSON FAMILY FOUNDATI

FOUNDATIONC/O INTENTIONAL PHILANTHROPHY

**TN:** 25-6407370

<b>EIN:</b> 25-6407379	9		
Investments Other Schedule 2			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
287,223.833 SH OF BLACKSTONE ALTERNATIVE MULTI-STRAT INTS	AT COST	3,102,619	3,067,551
124,621.877 SH OF WALDEN MIDCAP FUND	AT COST	2,183,589	2,331,675
75,079.559 SH OF CALVERT EMERGING MARKETS EQUITY	AT COST	1,251,929	1,343,924
356,251.978 SH OF QUALIFIED INVESTMENT FUND INSTUTIONAL CLASS	AT COST	3,776,342	3,779,833
93,450.087 SH OF GATEWAY FUND CLASS Y	AT COST	3,031,006	3,239,915
112,206.165 SH OF HARDING LOEVNER INTERNATIONAL EQUITY PORTFOLIO	AT COST	2,357,718	2,670,507
169,567.367 SH OF LAZARD INTERNATIONAL STRATEGIC EQUITY PORTFOLIO	AT COST	2,404,713	2,607,946
58,287.350 SH OF PARNASSUS CORE EQUITY FUND INSTITUTIONAL CL	AT COST	2,393,969	2,745,334
98,971.787 SH OF PAX GLOBAL ENVIRONMENTAL MARKETS FUND INST CL	AT COST	1,580,579	1,679,551
190,055.180 SH OF TIAA-CREF SOCIAL CHOICE BOND FUND CL I	AT COST	1,953,945	2,006,983
166,639.711 SH OF TEMPLETON GLOBAL BOND FUND ADVISOR	AT COST	2,033,528	1,778,046
37,834.000 SH OF ISHARES TR MSCI KLD 400 SOCIAL	AT COST	3,963,490	4,544,998

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491105003070
TY 2019 Other Assets Schedule		

Name: MYLES D & J FAYE SAMPSON FAMILY FOUNDATI

FOUNDATIONC/O INTENTIONAL PHILANTHROPHY

	<b>EIN:</b> 25-6407379	€		
(	Other Assets Schedule			
	Description	Beginning of Year -	End of Year - Book	End of

Book Value Value

250,000

Year - Fair Market Value

250,000

PROGRAM RELATED INVESTMENT

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491105003070		
TY 2019 Other Expenses Sche	dule			_		
Name:	MYLES D & J FA	YE SAMPSON FA	MILY FOUNDATI			
	FOUNDATIONC/O INTENTIONAL PHILANTHROPHY					
EIN:	25-6407379					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
BANK FEES	70	0		70		

other Expenses Schedule									
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes					
BANK FEES	70	0		70					
PAYROLL SERVICE FEE	693	0		693					

1,375

338

750

1,375

338

750

DUES AND SUBSCRIPTIONS

OFFICE SUPPLIES

INSURANCE

ta - DLN: 93491105003070
<u>Da</u>

Name: MYLES D & J FAYE SAMPSON FAMILY FOUNDATI

FOUNDATIONC/O INTENTIONAL PHILANTHROPHY

**ETN:** 25-6407379

Other	Income	Schedule	

	 	 -	-	-		_		
dule								
						Т		

21,158

Net Investment

Income

Description

GRANT REFUND

Revenue And Expenses Per Books

Adjusted Net Income

21,158

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLI	N: 93491105003070				
TY 2019 Other Professiona	al Fees Schedu	le						
Name: MYLES D & J FAYE SAMPSON FAMILY FOUNDATI FOUNDATIONC/O INTENTIONAL PHILANTHROPHY EIN: 25-6407379								
Category	ategory Amount Net Investment Adjusted Net Disbursements Income Income for Charitable Purposes							
S&T BANCORP, INC INVESTMENT MANAGEMENT FEES	8	8		0				
SYNTRINSIC - INVESTMENT MANAGEMENT	77,284	77,284		0				

142,140

142,140

FEES

INTENTIONAL PHILANTHROPY LLC -

FOUNDATION MANAGEMENT

efile GRAPHIC print - DO	NOT PROCESS As Filed Data	-		DLN: 93491105003070			
Schedule B	Sched	lule of Contributors		OMB No. 1545-0047			
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		ach to Form 990, 990-EZ, or 990-PF. <u>i.irs.gov/Form990</u> for the latest information.					
Name of the organization MYLES D & J FAYE SAMPSO FOUNDATIONC/O INTENTION			<b>Employer</b> id 25-6407379	dentification number			
Organization type (chec			23-040/3/9				
Filers of:	Section:						
Form 990 or 990-EZ	501(c)( ) (enter number)	organization					
	☐ 4947(a)(1) nonexempt ch	aritable trust <b>not</b> treated as a	private foundation				
	☐ 527 political organization						
Form 990-PF	<b>☑</b> 501(c)(3) exempt private	foundation					
	4947(a)(1) nonexempt ch	aritable trust treated as a priva	ate foundation				
	501(c)(3) taxable private	foundation					
	ion filing Form 990, 990-EZ, or 990 property) from any one contributor.						
Special Rules							
under sections 50 received from any	on described in section 501(c)(3) fili 9(a)(1) and 170(b)(1)(A)(vi), that ch one contributor, during the year, to 1h, or (ii) Form 990-EZ, line 1. Col	necked Schedule A (Form 990 otal contributions of the greate	or 990-EZ), Part II, line 13,	, 16a, or 16b, and that			
during the year, to	on described in section 501(c)(7), (8 stal contributions of more than \$1,0 se prevention of cruelty to children	00 <i>exclusively</i> for religious, ch	aritable, scientific, literary, o				
during the year, could be during the year.	on described in section 501(c)(7), (8 contributions <i>exclusively</i> for religious ked, enter here the total contribution mplete any of the parts unless the 6 le, etc., contributions totaling \$5,00	s, charitable, etc., purposes, but ns that were received during the General Rule applies to this o	ut no such contributions tota he year for an <i>exclusively</i> re rganization because it rece	aled more than \$1,000. eligious, charitable, etc., ived <i>nonexclusively</i>			
990-EZ, or 990-PF), but it	that isn't covered by the General F must answer "No" on Part IV, line rt I, line 2, to certify that it doesn't n	2, of its Form 990; or check the	ne box on line H of its Form				
For Paperwork Reduction Ac	t Notice, see the Instructions	Cat. No. 30613X	Schedule B (Form 990	), 990-EZ, or 990-PF) (2019)			

for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Page 2 Name of organization Employer identification number MYLES D & J FAYE SAMPSON FAMILY FOUNDATI 25-6407379 FOUNDATIONC/O INTENTIONAL PHILANTHROPHY Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Contributors (a) (c) (d) (b) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution SAMPSON MORRIS GROUP Person 2500 ELDO ROAD SUITE 1 Payroll \$ 27,890 Noncash MONROEVILLE, PA 15146 (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (c) (a) (b) (d) **Total contributions** Name, address, and ZIP + 4 Type of contribution No. Person **Payroll** \$ Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** \$ Noncash (Complete Part II for noncash contributions.)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)			Page <b>4</b>
MYLES D & J FAYE SAMPSON FAMILY FOUNDATI				Employer identification number 25-6407379
Part III	than \$1,000 for the year from any one contrib	d in section 501(c)(7), (8), or (10) that total more ugh <b>(e) and</b> the following line entry. For itable, etc., contributions of <b>\$1,000 or less</b> for		
(a) No. from Part I	(b) Purpose of gift	(	c) Use of gift	(d) Description of how gift is held
		( )		
	(e) Transfer of Transferee's name, address, and ZIP 4		•	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and ZIF	ationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	c) Use of gift		(d) Description of how gift is held
	(e) Transfer of Transferee's name, address, and ZIP 4		Transfer of gift Rel	of gift Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	- (	c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift Transferee's name, address, and ZIP 4			ationship of transferor to transferee
				Schedule B (Form 990, 990-EZ, or 990-PF) (2019)