Form 990-PF

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OMB No 1545-0047 2019

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
not enter social security numbers on this form as it may be made public

			ment of the Treasury I Revenue Service			//Form990PF for instri		•		en to Public Inspection		
	F	or c	alendar year 2019	9 or tax year beginn				and ending		, 20		
			of foundation			<u> </u>	-		A Employer identifi	cation number		
		MICHAEL E. AND JACQUELYN I. HANSO				N FAMILY FDN			35-6664423			
	N	umbe	r and street (or P O b	ox number if mail is not de	livered to s	treet address)	j,	Room/suite	B Telephone number	er (see instructions)		
							ļ		- L(1	3-8479		
		934	4 SWEETGRASS	S WAY]		(317) 252 5562			
	ō	ity or	town, state or province	e, country, and ZIP or foreig	gn postal c	ode						
									C If exemption applica pending, check here	tion is		
		NAI	PLES, FL 3410	08-3328					ponding, oncer nere	· · · · · · · · · · · · · · · · · · ·		
	ē	Ch	eck all that apply	Initial return		Initial return of	of a former p	ublic charity	D 1 Foreign organizat	rons, check here		
				Final return		Amended ret	urn	_	2 Foreign organiza	tions meeting the		
				Address cha	inge	Name change	•		85% test, check h			
	F	I Ch	eck type of organi			(3) exempt private for		OU	☐ ·			
	ĺ		Section 4947(a)(1)	nonexempt charitable t	trust	Other taxable pri	vate foundat	tion	E If private foundation)(1)(A), check here .		
	1		r market value o			nting method X Ca		rual	1	ın a 60-month termination		
		end	d of year (from Pa	l f	_	er (specify)			· ·	(1)(B) check here . >		
						olumn (d), must be on ca						
1	1	Part		venue and Expense	s (The	(a) Revenue and	-			(d) Disbursements		
ク	/ -			in columns (b), (c), and arily equal the amounts		èxpenses per	(b) Net inve		(c) Adjusted net income	for charitable purposes		
1	ĺ		column (a) (see ii		11.1	books			moomo	(cash basis only)		
·	٦ -	1	Contributions, gifts, gran	nts, etc., received (attach sched	dule) .							
		2	Check ► X if the	ne foundation is not requir	ed to							
		3		and temporary cash investr								
		4	Dividends and inte	erest from securities .		40,903.	4	0,903.		· · · · · · · · · · · · · · · · · · ·		
20	SCANNED JUL 1 % 2020 Revenue	5 a	Gross rents							į		
20,		t	Net rental income or	(loss)					RE	CEIVED		
•	4 4	6 a	Net gain or (loss) fro	om sale of assets not on lin	ie 10	18,338.				POSTE PROPERTY AND ADDRESS OF THE PARTY AND AD		
-	L 1 %		Gross sales pnce for assets on line 6a	all 78,	790.				6	SC		
-	בֿ וַ			ncome (from Part IV, lin	e 2)		1	8,338.	B APR	0 6 2020		
=	<u> </u>	8	Net short-term ca	pital gain	L							
p	9	9		ons	· · ·					LN. UT		
ŭ	ĺ	lina	Gross sales less retur and allowances			•			<u> </u>			
7		t	Less Cost of goods s	sold .		-				<u> </u>		
•	2	0	•	ss) (attach schedule) .								
(3	11		ach schedule)		59,241.		9,241.	0.			
22	<i>9</i>) _	12		through 11		0.		3,241.				
2020	U	13		ficers, directors, trustees, e		· · · · · · · · · · · · · · · · · · ·			-			
	ď	14		alaries and wages					_	-		
0	Fxnense	15		nployee benefits								
NO	X	16a		schedule)		4,233.				4,233		
	٥	<u> </u>		attach schedule)ATCH	. 1	6,615.		6,615.		ļ- 		
È	Administrative	ء ا	•	al fees (attach schedule)				,				
T C	1 /	17		adula) (aga instructions		3,224.		 				
Batchled/	<u>.</u>	18 19	•	edule) (see instructions		-,						
EQ.	<u> </u>	130	•	ach schedule) and depl						<u>'</u>		
Rec I				es and meetings								
86	ב	21 22	•	es, and meetings				<u> </u>				
IX.	7	722	= :	ications		501.		-		73		
	į	23 24 25 25	• •	and administrative expe	· · · -							
	Ž	3 - 3		ugh 23	1	14,573.		6,615.		4,306		
	<u>ک</u>	25		ts, grants paid		63,550.				63,550		
	•	26		sbursements Add lines 24		78,123.		6,615.	0.	67,856		
	-	27	Subtract line 26 fr									
		L		ver expenses and disburs	ements	-18,882.			•			
		Į.		ncome (if negative, ente			5	2,626.				
		1		ome (if negative, enter -	· -				0.			

JSA For Paperwork Reduction Act Notice, see instructions. $^{9\text{E}1410\ 1\ 000}$ 5UG5NR 1274

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Form **990-PF** (2019)

PAGE 3

Page 2

Part II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	E	End of	·
		amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
1 (Cash - non-interest-beari	ing	14,915.	18,8		18,837
		cash investments	56,870.	38,9	47.	38,947
	Accounts receivable			····	-	
		btful accounts ▶				
		btful accounts ▶				
		 				
6 1	Receivables due from	officers, directors, trustees, and other				
		tach schedule) (see instructions)				
		receivable (attach schedule)				
		btful accounts >				
		e				<u> </u>
וע		eferred charges				
102	•	e government obligations (attach schedule).				
		stock (attach schedule) ATCH 5	1,284,213.	1,279,3	32.	1,700,359
		bonds (attach schedule)		· · · · · · · · · · · · · · · · · · ·	-+	<u> </u>
111 1	Investments - land, buildings					
1 1	and equipment basis Less accumulated deprecia	ition -				1866 Carren Brans, 1866 - 1875 - 1876 - 1876 - 1876 - 1876
	(attach schedule)		, - +			
		loans	,	·	- 	<u> </u>
14 1	Land, buildings, and	scri scriedule)				
	equipment basis Less accumulated deprecia	ation			~~~	
((attach schedule)	-		_		
	Other assets (describe				-	
		completed by all filers - see the	1 255 000	1,337,1	16	1 750 143
 		age 1, item I)	1,333,330.	1,337,1	10.	1,758,143
17 /	Accounts payable and a	ccrued expenses		·-··-		
_ I	Grants payable					
<u>g</u> 19 (Deferred revenue					.
20 □		ors, trustees, and other disqualified persons				
≖ I		otes payable (attach schedule) L				
- 22 (Other liabilities (describe	•▶)				
_		es 17 through 22)	0.		0.	
g ı		w FASB ASC 958, check here ▶ 🔠				•
	and complete lines 24,	25, 29, and 30.				
24	Net assets without done	or restrictions				
0 25	Net assets with donor re	estrictions · · · · · · · · · · · · · · · · · · ·				
<u> </u>	Foundations that do not f	ollow FASB ASC 958, check here ► X				
	and complete lines 26 thre	ough 30				
5 26	Capital stock, trust princ	cipal, or current funds				
27 1	Paid-in or capital surplus, or	r land, bldg , and equipment fund				
28	Retained earnings, accumi	ulated income, endowment, or other funds [1,355,998.	1,337,1		
^ I	_	balances (see instructions)	1,355,998.	1,337,1	16.	
<u>र्</u> घ 30 ·		net assets/fund balances (see				
z ,	instructions)		1,355,998.	1,337,1	16.	
Part III	Analysis of Cha	nges in Net Assets or Fund Bala	nces			
		palances at beginning of year - Part I		nust agree with		
		ed on prior year's return)			1	1,355,998
		line 27a		Г	2	-18,882
		ded in line 2 (itemize) ▶			3	
					4	1,337,116
5 Decr	reases not included in	n line 2 (itemize) ▶			5	
		palances at end of year (line 4 minus	line 5) - Part II, column (h) line 29	6	1,337,116

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	scribe the kind(s) of property sold (for rick warehouse, or common stock, 200		(b) How acquired P - Purchas D - Donatio	sel (mo.dav.vr) l	(d) Date sold (mo , day, yr)
a SEE PART IV SCHE			ט - טonatio		<u>.</u>
b					
<u>c</u>					
d					
<u>e</u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (los ((e) plus (f) minu	
<u>a</u> b					
C					
<u>d</u>					
e					
Complete only for assets s	howing gain in column (h) and owned	by the foundation on 12/31/69) Gains (Col (h) ga	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any	со	l (k), but not less the Losses (from col	
a					
<u> </u>					
<u></u>			-		
d e			 		
<u> </u>	. If a	ain, also enter in Part I, line 7			<u> </u>
Capital gain net income	or (not conital lace)	loss), enter -0- in Part I, line 7	2		18,338.
Net short-term capital o	ain or (loss) as defined in sections		-		
	Part I, line 8, column (c) See ins				
_		· · · · · · · · · · · · · · · · · · ·			0.
ranti, line 0	<u> </u>	<u> </u>	3		<u> </u>
art V Qualification to optional use by domestic	Under Section 4940(e) for Recprivate foundations subject to the	duced Tax on Net Investment I e section 4940(a) tax on net invest		ome)	
or optional use by domestic section 4940(d)(2) applies, as the foundation liable for	Under Section 4940(e) for Reception private foundations subject to the leave this part blank	duced Tax on Net Investment I e section 4940(a) tax on net invest outable amount of any year in the b	ment inc		Yes X N
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Form **990-PF** (2019)

MICHAEL E. AND JACQUELYN I. HANSON FAMILY FDN Form 990-PF (2019) Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a *Exempt operating foundations described in section 4940(d)(2), check here
and enter "N/A" on line 1 . . . Date of ruling or determination letter (attach copy of letter if necessary - see instructions) 526. b Domestic foundations that meet the section 4940(e) requirements in Part V, check c All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 526. 3 0. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 526. Credits/Payments a 2019 estimated tax payments and 2018 overpayment credited to 2019. . . . Tax paid with application for extension of time to file (Form 8868) 6c 2,362. Total credits and payments Add lines 6a through 6d \dots Enter any penalty for underpayment of estimated tax Check here X if Form 2220 is attached \dots 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 1,836. 10 Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. 1,836. Refunded ▶ Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ Part VII-A Statements Regarding Activities Yes_ Nο 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it Х 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the Х 1h If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities Χ c Did the foundation file Form 1120-POL for this year? 1c Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year ___0 . (2) On foundation managers ▶ \$_ (1) On the foundation > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed 0. on foundation managers > \$ Χ If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles Χ of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes X 4a N∤A 4b Х If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that Х conflict with the state law remain in the governing instrument?................. X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV Enter the states to which the foundation reports or with which it is registered. See instructions

Form 990-PF (2019)

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b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(J)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes,"

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their Form 990-PF (2019)

Par	t VII-A: Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
•	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
12	person had advisory privileges? If "Yes," attach statement See instructions	12		Х
42	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
13	NONE		1	
	Website address ► NONE The books are in care of ► MICHEAL E. HANSON Telephone no ► 317-252-	-5562	>	
14	Located at 3470 LIMELIGHT LANE WHITESTOWN, IN ZIP+4 46075			
				ТТ
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here N/A		🏲	Ш
	and enter the amount of tax-exempt interest received or accrued during the year	N/A	V	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of	,		1
	the foreign country ▶			-
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		,	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	ì		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		,	
	the benefit or use of a disqualified person)?			
			, ,	
	(6) Agree to pay money or property to a government official? (Exception Check "No" if the		Ì	
	foundation agreed to make a grant to or to employ the official for a period after termination of government service if terminating within 90 days.)			
	termination of government out vice, in terminating within our stayer,			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in		N	/ n
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	14,	
	Organizations relying on a current notice regarding disaster assistance, check here		-	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2019?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines]	
	6d and 6e) for tax year(s) beginning before 2019? Yes	-		
	If "Yes," list the years		,	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	1		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b	N,	ľΑ
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	`		
Ja	at any time during the year?	-		
.	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or	1.		
D		ľ		
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			;
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of		ļ	
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the		- N	<u></u>
	foundation had excess business holdings in 2019)	3b	IN/	-
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			.,
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	1	X

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Pai	rt VII-B	Statements Regarding Activities	tor Which Form	<u>4/20 May Be Req</u>	uirea (cont	inuea)			
5a -	During the	e year, did the foundation pay or incur any amo	unt to					Yes	No
	(1) Carry	on propaganda, or otherwise attempt to influe	nce legislation (sectio	n 4945(e))?	Yes	X No	İ		1
	(2) Influe	nce the outcome of any specific public ele	ction (see section 4	1955), or to carry on					ĺ
	dırect	ly or indirectly, any voter registration drive?	<i></i>		Yes	X No			.
	(3) Provid	de a grant to an individual for travel, study, or o	her similar purposes?		Yes	X No			Ì
		de a grant to an organization other than a							1
	٠,,	on 4945(d)(4)(A)? See instructions				X No	.		- 1
	(5) Provid	de for any purpose other than religious, ch	arıtable, scientific, l	iterary, or educationa	al .				
		ses, or for the prevention of cruelty to children				X No			4
b	If any ar	iswer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the ex	ceptions des	scribed in			
		ns section 53 4945 or in a current notice regard					5b	N,	'A
	Organizat	ions relying on a current notice regarding disas	ter assistance, check	here	Ņ/Ā	▶			ĺ
С	If the an	swer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the ta	ax	_			Ì
	because i	t maintained expenditure responsibility for the g	ırant ⁹		Yes	No	1		
	If "Yes," a	attach the statement required by Regulations se	ection 53 4945-5(d)						
6a		foundation, during the year, receive any fun		ectly, to pay premiun	ns				
	on a perse	onal benefit contract?			. L Yes	X No			
b		undation, during the year, pay premiums, dire			ct?		6b		X
	If "Yes" to	6b, file Form 8870							į
7a	At any tim	ne during the tax year, was the foundation a pa	arty to a prohibited tax	x shelter transaction?	. Yes	X No			
b	If "Yes," o	did the foundation receive any proceeds or hav	re any net income attr	ibutable to the transacti	on?		7 b	N/	<u>A</u>
8		ndation subject to the section 4960 tax on pay			_				Ì
		tion or excess parachute payment(s) during the	year?	<u> </u>	. Yes	X No			
Pa	rt VIII	Information About Officers, Director and Contractors	rs, Trustees, Fou	indation Managers	s, Highly P	aid Empl	oyees,		
1	List all of	fficers, directors, trustees, and foundati	on managers and	their compensation.	See instruc	tions.			
1	List all of		(b) Title, and average	(c) Compensation	(d) Contributemployee ben	tions to	(e) Expen		
1	List all of	fficers, directors, trustees, and foundati (a) Name and address			(d) Contribu	tions to efit plans	(e) Expendent		
			(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contribu employee ben	tions to efit plans mpensation			:s
			(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contribu employee ben	tions to efit plans			
ATC:			(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contribu employee ben	tions to efit plans mpensation			:s
			(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contribu employee ben	tions to efit plans mpensation			:s
			(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contribu employee ben	tions to efit plans mpensation			:s
			(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contributemployee ben	tions to efit plans mpensation			:s
			(b) Title, and average hours per week	(c) Compensation (if not paid, enter -0-)	(d) Contributemployee ben	tions to efit plans mpensation			:s
	Н 6		(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contribu	tions to effit plans appensation	other al	lowance	0.
ATC:	H 6 Compens "NONE."	(a) Name and address sation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those)	(c) Compensation (if not paid, enter -0-) 0.	(d) Contribu	instruction	ns). If n	one,	0.
ATC:	H 6 Compens "NONE."	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contribuend (d) Contribuen	instructio	other al	one,	O.
ATC:	H 6 Compens "NONE."	(a) Name and address sation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those that the second	(c) Compensation (if not paid, enter -0-) 0.	(d) Contribuently (d) Contribuently (d) Contribuently (d) Contribuently (d) Contribuently (d) Contribuently (e) (d) Contribuently (e)	instructio	ns). If n	one,	O.
ATC:	H 6 Compens "NONE."	(a) Name and address sation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those that the second	(c) Compensation (if not paid, enter -0-) 0.	(d) Contribuend (d) Contribuen	instructio	ns). If n	one,	O.
ATC:	Compens "NONE."	(a) Name and address sation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those that the second	(c) Compensation (if not paid, enter -0-) 0.	(d) Contribuend (d) Contribuen	instructio	ns). If n	one,	0.
ATC:	Compens "NONE."	(a) Name and address sation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those that the second	(c) Compensation (if not paid, enter -0-) 0.	(d) Contribuend (d) Contribuen	instructio	ns). If n	one,	0.
ATC:	Compens "NONE."	(a) Name and address sation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those the course per week hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) 0. ce included on line (c) Compensation	(d) Contribuend (d) Contribuen	instructio	ns). If n	one,	0.
ATC:	Compens "NONE."	(a) Name and address sation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those the course per week hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) 0. ce included on line (c) Compensation	(d) Contribuend (d) Contribuen	instructio	ns). If n	one,	O.
ATC:	Compens "NONE."	(a) Name and address sation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those the course per week hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) 0. ce included on line (c) Compensation	(d) Contribuend (d) Contribuen	instructio	ns). If n	one,	0.
ATC:	Compens "NONE."	(a) Name and address sation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those the course per week hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) 0. ce included on line (c) Compensation	(d) Contribuend (d) Contribuen	instructio	ns). If n	one,	O.
ATC:	Compens "NONE."	(a) Name and address sation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those the course per week hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) 0. ce included on line (c) Compensation	(d) Contribuend (d) Contribuen	instructio	ns). If n	one,	0.
ATC:	Compens "NONE."	(a) Name and address sation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those the course per week hours per week hours per week hours per week hours per week	(c) Compensation (if not paid, enter -0-) 0. ce included on line (c) Compensation	(d) Contribuend (d) Contribuen	instructio	ns). If n	one,	O.
2 (a)	Compens "NONE." Name and a	(a) Name and address sation of five highest-paid employees	(b) Title, and average hours per week devoted to position (other than those (b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter-0-) 0. (c) Compensation (c) Compensation	(d) Contribuend and deferred contribuen and deferred contribuent (d) Contribuent (employee plans and docompens	instruction O. instruction instruction itions to benefit eferred ation	ns). If n	one,	0.

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orm 990-PF (2019) Part VIII Information About Officers, Directors, Trustees, Fo	undation Managers, Highly Paid Emp	lovees.
and Contractors (continued)	undulon managoro, mgmy r ara amp	,,
3 Five highest-paid independent contractors for professional ser	vices. See instructions. If none, enter "NO	NE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE		
		0
		-
otal number of others receiving over \$50,000 for professional services	· · · · · · · · · · · · · · · · · · ·	
Star right ber of others receiving over 400,000 for professional correct		_
Part IX-A Summary of Direct Charitable Activities		of I
	relevant statistical information such as the number of	
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include	relevant statistical information such as the number of	of I
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include organizations and other beneficianes served, conferences convened, research papers produced.	relevant statistical information such as the number of	of I
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Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include organizations and other beneficianes served, conferences convened, research papers prod 1 NONE 2	relevant statistical information such as the number of uced, etc	of I
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include organizations and other beneficianes served, conferences convened, research papers produced in NONE 2 3 4 Part IX-B Summary of Program-Related Investments (see in	relevant statistical information such as the number of uced, etc	of I
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include organizations and other beneficianes served, conferences convened, research papers produced in NONE 2 4	relevant statistical information such as the number of uced, etc	Expenses
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include organizations and other beneficianes served, conferences convened, research papers produced in NONE 2 3 4 Part IX-B Summary of Program-Related Investments (See In Describe the two largest program-related investments made by the foundation during the	relevant statistical information such as the number of uced, etc	Expenses
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include organizations and other beneficianes served, conferences convened, research papers produced in NONE 2 3 4 Part IX-B Summary of Program-Related Investments (See In Describe the two largest program-related investments made by the foundation during the	relevant statistical information such as the number of uced, etc	Expenses

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3 NONE

All other program-related investments. See instructions

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Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign foundations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities		1,619,319.
b	Average of monthly cash balances	1b	60,889.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,680,208.
е	,		
	1c (attach detailed explanation)	-	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,680,208.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	25,203.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	L	1,655,005.
6	Minimum investment return. Enter 5% of line 5	6	82,750.
Pai	Table Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part)	ndations	
_	Minimum investment return from Part X, line 6	1	82,750.
1	Tay on investment income for 2010 from Part VI line 6	·	,
2 a	tax on investment income for 2019 from Part VI, line 5]	
	Income tax for 2019 (This does not include the tax from Part VI) 2b	2 _C	526.
C			82,224.
3	Distributable amount before adjustments Subtract line 2c from line 1		,
4	Recoveries of amounts treated as qualifying distributions	5	82,224.
5	Add lines 3 and 4	6	
6	Deduction from distributable amount (see instructions)		
7	line 1	7	82,224.
Pa	rt XII Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	-	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	67,856.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes,	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	67,856.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions	5	526.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	67,330.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	alculating whether	the foundation
	qualifies for the section 4940(e) reduction of tax in those years		

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Part XIII Undistributed Income (see Inst	ructions)			
,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,	Corpus	rears prior to 2010	2010	
line 7				82,224.
2 Undistributed income, if any, as of the end of 2019		-	60 751	1
a Enter amount for 2018 only			60,751.	1
b Total for pnor years 20_17_,20_16_,20_15_		· -		
3 Excess distributions carryover, if any, to 2019	!			
a From 2014				•
b From 2015				İ
c From 2016	_]	
d From 2017				,
e From 2018				
f Total of lines 3a through e	0.			<u> </u>
4 Qualifying distributions for 2019 from Part XII,				1
line 4 ▶ \$67,856.				1
a Applied to 2018, but not more than line 2a			60,751.	j
b Applied to undistributed income of prior years				ł
(Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2019 distributable amount				7,105.
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))				
6 Enter the net total of each column as				
indicated below:				
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				ļ
amount - see instructions e Undistributed income for 2018 Subtract line				
4a from line 2a Taxable amount - see				
Instructions		·		<u></u>
f Undistributed income for 2019 Subtract lines				
4d and 5 from line 1 This amount must be	}		}	75,119.
distributed in 2020				,0,223.
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	1		}	,
applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2020.	0.			ι
Subtract lines 7 and 8 from line 6a		-		
10 Analysis of line 9				ı
a Excess from 2015	1			r I
b Excess from 2016	1			
c Excess from 2017	-		[
d Excess from 2018	-			
e Excess from 2019	<u> </u>		<u> </u>	

Pa	rt XIV · Private Op	erating Foundations	(see instructions ai	nd Part VII-A, questi	on 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter that	t it is a private opera	ating	
	foundation, and the rulin	g is effective for 2019, e	nter the date of the ruling			
b	Check box to indicate v	whether the foundation	is a private operating		section 494	12(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	T	(e) Total
	justed net income from Part 1 or the minimum investment	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
	return from Part X for each				/	
	year listed					_
b	85% of line 2a					
С	Qualifying distributions from Part					
d	XII, line 4, for each year listed . Amounts included in line 2c not	-	<u> </u>			
ŭ	used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line					
3	2d from line 2c					
	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying under section					
ь	4942(j)(3)(B)(i)					
	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test - enter					
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on securities loans (section 512(a)(5))					
	or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup- port from an exempt					
	organization					-:
_	(4) Gross investment income.		 	and if the found	tion had \$5 000	n or more in eccets of
Pa	rt XV Supplemen	ntary information (luring the year - see	Complete this part instructions \	only if the found	ation nad \$5,000	or more in assets at
1	Information Regardin					<u> </u>
				e than 2% of the total	al contributions re	ceived by the foundation
_	before the close of any	y tax year (but only if the	ney have contributed r	more than \$5,000) (S	ee section 507(d)(2	2))
	MICHAEL E.					
			own 10% or more o	f the stock of a corp	oration (or an equ	ually large portion of the
_	ownership of a partne					, , ,
	N/A					
2	Information Regardin	g Contribution, Grant	, Gift, Loan, Scholarsh	nip, etc., Programs:		
	Check here ▶ ☐ If	the foundation only	makes contributions	to preselected char	itable organization	s and does not accep
		or funds If the found	ation makes gifts, gra			s under other conditions
а	The name, address, a	and telephone number	or email address of the	he person to whom ap	plications should be	addressed
ь	The form in which app	olications should be su	bmitted and information	on and materials they	should include	
	NO SPECIFIC	C FORM REQUIRE	D			
С	Any submission deadl			· -		
	NONE					
d	Any restrictions or I factors	imitations on awards	s, such as by geogr	aphical areas, charit	able fields, kinds	of institutions, or othe
	MUST BE A	501 (C)(3) ORG	ANTZATTON			

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3 Grants and Contributions Paid Du	If recipient is an individual	Foundation	i utuie rayinent	
3 Grants and Contributions Paid Du Recipient Name and address (home or business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		······
a Paid during the year				
ATCH 8				
			:	
T-A-1		<u> </u>	N 20	63,550
Total	T		▶ 3a	03,330
NONE				
	<u> </u>		l	MANIE
Total	<u> </u>		► 3b	NONE

Form 990-PF (2019)
Part XVI-A

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded b	y section 512, 513, or 514	(e) Related or exempt	
1 Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)	
•							
f							
g Fees	and contracts from government agencies		<u>-</u>	<u> </u>			
2 Member	ship dues and assessments						
3 Interest of	on savings and temporary cash investments -		<u>-</u> .	_			
4 Dividend	ds and interest from securities			14	40,903.		
5 Net rent	al income or (loss) from real estate					<u> </u>	
	-financed property			ļ			
b Not o	debt-financed property			 		· <u> </u>	
6 Net renta	al income or (loss) from personal property			<u> </u>			
7 Other in	vestment income			18	18,338.		
8 Gain or (loss) from sales of assets other than inventory			10	10,336.	 _	
	ome or (loss) from special events · · ·			 -			
	rofit or (loss) from sales of inventory						
	venue a						
							
e							
	Add columns (b), (d), and (e)				59,241.		
	dd line 12, columns (b), (d), and (e)				`	59,241.	
	heet in line 13 instructions to verify calc						
Part XVI-	B Relationship of Activitie	s to the A	ccomplishment of E	xempt Pur	poses		
Line No.	Explain below how each activit	v for which	n income is reported i	ın column (e) of Part XVI-A contribu	ited importantly to the	
▼	accomplishment of the foundation	•				·	
		<u>.</u>			. <u> </u>		
-	N/A				 		
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			<u></u>				

Form 99	0-PF (2	019)	MICHAEL	E. AND JA	CQUELYN I	HANSO	N FAMILY F	'DN	35-6664	4423	Pa	ge 13
Part	XVII	Information Re Organizations	egarding Trai	nsfers to a	nd Transact	ons and	Relationshi	ps With	Noncha	ritabl	е Ех	empt
ir 0 a T ('	sec rganiz ransfe I) Cas	organization direct tion 501(c) (other tations? ers from the reportin	than section	501(c)(3) o	rganizations) ble exempt or	or in se ganization	ction 527, re	elating to	political		Yes	No X
b C (2 (3 (4 (4 (6 (8 6 (8 6	other to the total (1) Salida (1) Pur (1) Rei (1) Rei (1) Loa (1) Per (1) the a	er assets ransactions es of assets to a no chases of assets fro ntal of facilities, equi mbursement arrange ins or loan guarantee formance of service g of facilities, equipm answer to any of th	ncharitable exector a noncharitation pment, or other ements	mpt organization able exempt or assets	onganizationganization	on the state of th			······································	1b(1) 1b(2) 1b(3) 1b(4) 1b(5) 1b(6) 1c	fair m	X X X X X X
		of the goods, other										
(a) Line	$\overline{}$	n any transaction or (b) Amount involved		gement, show			e of the good					
		N/A			-, -	N/F	<u> </u>					
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		<u>-</u>		-								
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	-		<u> </u>									
				.	· · ·							
d	escrib	foundation directly ped in section 501(c) " complete the follo) (other than se					_	i i	Y	es X] No
		(a) Name of organizatio		(b) T	ype of organization	1		(c) Descript	ion of relation:	ship		
Sign Here	correc	penalties of perjury, I declar t, and complete Declaration of						to the best of	May the IR	S discus	s this	return
									L			
	٠	Print/Type preparer's na	ame	Preparer's s	signature, A	, .	Date	Che	eck If	РПИ		
Paid		JENNIFER D RH		Jenny	in Dehi	deric	L 03/25/2	on i		P003	9573	35
Prepa	arer		RNST & YOUN					Firm's EIN				
								 				

Form **990-PF** (2019)

Phone no

317-681-7000

Use Only

46204

▶ 111 MONUMENT CIRCLE, STE 4000

IN

INDIANAPOLIS,

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	4,233.	4,233.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	4,233.	4,233.
		TOTALS
DESCRIPTION	TAX PREPARATION FEES	

74
12
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2

FEES
PROFESSIONAL
- OTHER
il.
PART
990PF,
FORM

CHARITABLE		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	6,615.	6,615.
REVENUE AND EXPENSES PER BOOKS	6,615.	6,615.
		TOTALS
DESCRIPTION	INVESTMENT MGMT FEES	

FORM 990PF, PART I - TAXES

CHARITABLE		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	3,224.	3,224.
		TOTALS
DESCRIPTION	TAXES PAID	

XPENSES
OTHER EX
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990PF,
FORM

CHARITABLE PURPOSES 73.	73.
ADJUSTED NET INCOME	
NET INVESTMENT INCOME	
REVENUE AND EXPENSES PER BOOKS 73.	501.
	TOTALS
DESCRIPTION BANK FEE OTHER EXPENSES	

ATTACHMENT 5 PAGE 21

5UG5NR 1274

STOCK	
CORPORATE	
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ΙI	
PART	
990PF,	
FORM	

ENDING BOOK VALUE FMV	68,477. 58,483. 62,572. 62,572. 205,547. 226,383. 39,600. 39,000. 31,349. 31,570. 31,570. 32,521. 33,500. 33,500. 34,027. 33,500.
BEGINNING BOOK VALUE	59,977. 58,483. 56,294. 205,547. 52,883. 254,323. 39,600. 38,000. 38,000. 38,000. 38,000. 204,500. 204,500. 21,300. 29,506.
DESCRIPTION	CAUSEWAY INTERNATIONAL ADV ELI LILLY ARTISAN INTL EQUITY FUND DODGE & COX INCOME JPMORGAN INFLATION MANAGED BON VANGUARD TOTAL STOCK MARKET PZENA EMERGING MRKTS FOCUSED DFA GLOBAL REAL ESTATE SEC DFA US TARGETED VALUE PRTF INS DFA US LARGE CAP VALUE PRTF IN GMO RESOURCES SERIES FUND CL HARDING LOEVNER INST EMERGING TORTOISE MLP & PIPELINE FD INS CARILLON REAMS CORE PLUS BOND PIMCO LOW DURATION INSTITUTION ISHARES EDGE MSCI USA MOMENTUM AQR LARGE CAP DEFENSIVES

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

FORM 990PF, PART VIII

ATTACHMENT 6 PAGE 22

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FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

THE HANSON FAMILY FOUNDATION 3470 LIMELIGHT LANE WHITESTOWN, IN 46075

> 5UG5NR 1274 V 19-4F PAGE 23

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ELCA YOUTH GATHERINGG PC RICA YOUTH GATHERINGG PC RICA YOUTH GATHERINGG RICA YOUTH GAT	RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
MONE PC				
NONE NONE NONE NONE CGBNERAL SUPPORT CGBNERAL SUPPORT PC NONE PC NONE PC CGBNERAL SUPPORT PC CGBNERAL SUPP	UEL LUTHERAN CHURCH	NONE	ELCA YOUTH GATHERINGG	16,500
NONE PC NONE NONE NONE NONE PC GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT PC G	MOORING DRIVE	PC		
# NONE NONE	NAPLES, FL 34102			
### CENERAL SUPPORT NONE	FRANCISCAN HEALTH FOUNDATION	NONE	NSG SCHOLARSHIP FUND SUPPORT	5,000
MONE PC ROWE NONE NONE PC GENERAL SUPPORT DEVELOPMENT FUND AND SUDRO SOCIETY PC GENERAL SUPPORT PC	5255 EAST STOP 11 ROAD	PC		
HONE CENERAL SUPPORT PC NONE NONE PC GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT PC	2 245			
MONE PC NONE PC NONE PC REMEILS SUPPORT PC GENERAL SUPPORT PC GENERAL SUPPORT PC GENERAL SUPPORT PC GENERAL SUPPORT PC PC PC PC PC PC PC PC PC PC PC PC PC	NAPOLIS, IN 46237			
# FAMILY SERVICE NONE NONE CENERAL SUPPORT # FAMILY SERVICE NONE GENERAL SUPPORT SUPP	-NAPLES	NONE	GENERAL SUPPORT	1,500
* FAMILY SERVICE NONE DEVELOPMENT FUND AND SUDRO SOCIETY GENERAL SUPPORT PC GENERAL SUPPORT GENERAL SUPPORT PC GENERAL SUPPORT PC GENERAL SUPPORT PC	PELICAN BAY BOULEVARD	PC		
MONE PC GENERAL SUPPORT PC GENERAL SUPPORT PC GENERAL SUPPORT PC GENERAL SUPPORT PC PC GENERAL SUPPORT PC PC GENERAL SUPPORT PC	S, FL 34108			
* FAMILY SERVICE NONE GENERAL SUPPORT CENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT GENERAL SUPPORT FO.	DEVELOPMENT FOUNDATION	NONE	DEVELOPMENT FUND AND SUDRO SOCIETY	1,000
NONE PC GENERAL SUPPORT A FAMILY SERVICE NONE GENERAL SUPPORT PC	X 5144	PC		
MONE PC GENERAL SUPPORT & FAMILY SERVICE NONE PC GENERAL SUPPORT PC	, ND 58105-5144			
PC GENERAL SUPPORT PC PC	REN'S MUSEUM OF INDIANAPOLIS	NONE	GENERAL SUPPORT	2,000
ERAN CHILD & FAMILY SERVICE NONE GENERAL SUPPORT PC	x 3000	PC		
ERAN CHILD & FAMILY SERVICE NONE GENERAL SUPPORT PC	NAPOLIS, IN 46206			
	OUNDATION FOR LUTHERAN CHILD & FAMILY SERVICE	NONE	GENERAL SUPPORT	2,000
NAPOLIS. IN 46219	NORTH RIVER AVENUE	PC		
	INDIANAPOLIS, IN 46219			

ATTACHMENT 8 (CONT'D)

MICHAEL E AND JACQUELYN I HANSON FAMILY FDN 2019 FORM 990-PF

THE YEAR	
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AND CONTRIBUTIONS	
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PART	
990PE,	
FORM	

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ST JOHN THE EVANGELIST 5655 STADIUM PARKWAY MELBOURNE, FL 32940	NONE PC	CAPITAL CAMPAIGN SUPPORT	8,800
NEIGHBORHOOD CLINIC 121 GOODLETTE-FRANK RD NAPLES, FL 34102	NONE PC	GENERAL SUPPORT	1,000
HOSPICE OF THE RED RIVER VALLEY 1701 38TH ST S #101 FARGO, ND 58103	NONE PC	GENERAL SUPPORT	200
CAPUCHIN SOUP KITCHEN 1264 MELDRUM ST DETROIT, MI 48207	NONE PC	GENERAL SUPPORT	0008
OVARIAN CANCER RESEARCH FUND 14 PENNSYLVANIA PLAZA NEW YORK, NY 10122	NONE PC	GENERAL SUPPRI	1,000
COLLEGE MENTORS FOR KIDS 212 W 10TH STREET INDIANAPOLIS, IN 46202	NONE PC	GENERAL SUPPORT	200

ATTACHMENT 8 (CONT'D)

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MICHAEL E AND JACQUELYN I HANSON FAMILY FDN 2019 FORM 990-PF

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
KAPPA PSI FOUNDATION 7801 E 88TH STREET INDIANAPOLIS, IN 46256	NONE PC	GENERAL SUPPORT	200
CATHOLIC FAITH APPEAL 1000 PINEBROOK ROAD VENICE, FL 34285	NONE PC	GENERAL SUPPORT	2,000
NAPLES 200, INC 1590 GOODLETTE-FRANK RD NAPLES, FL 34102	NONE PC	GENEŖAL SUPPORT	1,000
AMERICAN ACADEMY OF NURSE ANESTHETISTS FOUNDATION 222 S PROSPECT AVENUE PARK RIDGE, IL 60068	NONE PC	GENERAL SUPPORT	250
CHRIST LUTHERAN CHURCH 600 NORTH FORD ROAD ZIONSVILLE, IN 46077	NONE PC	GENERAL SUPPORT	7,000
CONCORDIA COLLEGE 801 8TH ST S MOORHEAD, MN 56562	NONE PC	GENERAL SUPPORT	2,500

ATTACHMENT 8 PAGE 26

ATTACHMENT 8 (CONT'D)

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		٠
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ESPIRIT -PFI	NONE	GENERAL SUPPORT	1,000
1550 FALMOUTH RD, UNIT 4A	PC		
CENTERVILLE, MA 02632			
FUN TIME EARLY CHILDREN'S ACADEMY	NONE	GENERAL SUPPORT	200
102 12TH ST N	PC		
NAPLES, FL 34102			
MAKE-A-WISH FOUNDATION	NONE	GENERAL SUPPORT	1,000
3655 BONITA BEACH ROAD	PC		
BONITA SPRINGS, FL 34134			
MIDWEST ACADEMY CARMEL	NONE	GENERAL SUPPORT	2,500
1420 CHASE CT	PC		
CARMEL, IN 46032			
NAPLES BOTANICAL GARDEN	NONE	GENERAL SUPPORT	1,000
4820 BAYSHORE DR	PC		
NAPLES, FL 34112			
RIVERVIEW SCHOOL	NONE	GENERAL SUPPORT	1,000
551 ROUTE 6A,	PC		
EAST SANDWICH, MA 02537			

1,000

AMOUNT

PURPOSE OF GRANT OR CONTRIBUTION

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

MICHAEL E AND JACQUELYN I HANSON FAMILY FDN 2019 FORM 990-PF

FOUNDATION STATUS OF RECIPIENT

NONE

SPECIAL OLYMPICS OF MASSACHUSETTS

RECIPIENT NAME AND ADDRESS

S

NONE

ST JUDE CHILDREN'S RESEARCH HOSPITAL

501 ST JUDE PLACE

MEMPHIS, TN 38105

MARLBOROUGH, MA 01752

512 FOREST ST

NONE

ST MATTHEW'S HOUSE

2001 AIRPORT RD S NAPLES, FL 34112

GENERAL SUPPORT

ATTACHMENT 8 (CONT'D)

1,000

GENERAL SUPPORT

1,000

GENERAL SUPPORT

63,550

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 8 PAGE 28

2019 FORM 990-PF MICHAEL E. AND JACQUELYN I. HANSON FAMILY FDN FORM 990-PF - PART IV

Kınd of P	roperty		Desc	cription		or D	Date acquired	Date sold
Gross sale price less xpenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		PUBLICLY-TR	ADED SECURI	TIES			VAR	VA
78,790.		60,452.					18,338.	
		•						
TAL GAIN(LC)SS)		• • • • • • • • • • • • •				18,338.	
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