Department of the Treasury

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

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

| For | caler | idar year 2019 or tax year beginning | | , and ending | | T O DO TI LO TI O DI TI |
|--------------------------------------|------------|---|------------------------------------|---------------------------|--|---|
| Na | me of | foundation | | | A Employer identificatio | n number |
| 9 | сиг | NAHAN FAMILY FOUNDATION | 43-6911537 | 7 | | |
| | | and street (or P O box number if mail is not delivered to street | B Telephone number | | | |
| | 124 | S. WOODSMILL ROAD | 314-336-05 | 560 | | |
| | | own, state or province, country, and ZIP or foreign p | ostal code | 325 | C If exemption application is i | |
| | | STERFIELD,, MO 63017 | | | | |
| G | Check | all that apply: Initial return | Initial return of a fo | ormer public charity | D 1. Foreign organization | s, check here |
| | | Final return | Amended return | | | |
| | | Address change | Name change | | 2 Foreign organizations mocheck here and attach or | eeting the 85% test, omputation |
| H | Check | type of organization: X Section 501(c)(3) ex | | \sim 1 | E If private foundation sta | atus was terminated |
| | Se | | Other taxable private founda | ation | under section 507(b)(1 |)(A), check here |
| | | trket value of all assets at end of year J Accounti | = | Accrual | F If the foundation is in a | 60-month termination |
| | | | her (specify) | | under section 507(b)(1 |)(B), check here |
| <i></i> | <u>-\$</u> | 6,303,909. (Part I, colun | | | | (4) |
| <u>۲</u> | art I | (The total of amounts in columns (b), (c), and (d) may not | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net | (d) Disbursements for charitable purposes |
| <u>_</u> | T . | necessarily equal the amounts in column (a)) | | | N/A | (cash basis only) |
| | 2 | Contributions, gifts, grants, etc., received Check if the foundation is not required to attach Sch B | 50,000. | | IN/A | |
| | 2 | Interest on savings and temporary | 5,231. | 5,231. | | STATEMENT 1 |
| | 4 | cash investments Dividends and interest from securities | 111,254. | 111,254. | | STATEMENT 2 |
| | 5a | Gross rents | | | | |
| | Ι. | Net rental income or (loss) | | | | |
| 7 . | | | 7,273. | | | |
| 2021 Snue | | | | | | |
| 0 3 202 Revenue | 7 | Capital gain net income (from Part IV, line 2) | | 7,273. | | |
| 6 " | 8 | Net short-term capital gain | | _, | REC | BEIVED |
| ≽ | 9 | Income modifications Gross sales less returns | | | - la | 8 |
| MAY | 10a | and allowances | | | NUL & S | 10 3 2020 Ö |
| SCANNED | b | Less Cost of goods sold | | | | <u> </u> |
| 岂 | 11 | Gross profit or (loss) Other income | | | OGI | |
| Z | 12 | Total. Add lines 1 through 11 | 173,758. | 123,758. | | |
| تُ | 13 | Compensation of officers, directors, trustees, etc | 0. | 0. | | 0. |
| (I) | 14 | Other employee salaries and wages | | | | |
| | 15 | Pension plans, employee benefits | | | | |
| ses | | Legal fees | | | | |
| oen | b | Accounting fees STMT 3 | 2,300. | 0. | | 0. |
| Ä | C | Other professional fees STMT 4 | 22,003. | 22,003. | <u></u> | 0. |
| ti Ve | 17 | Interest | | | | |
| Operating and Administrative Expense | 18 | Taxes STMT 5 | 3,140. | 814. | | 0. |
| inis | 19 | Depreciation and depletion | | | <u> </u> | |
| Įb/ | 20 21 | Occupancy Travel, conferences, and meetings | | | | |
| pc / pc | 22 | Printing and publications | | | | |
| <u> </u> | 23 | Other expenses STMT 6 | <320. | > 0. | | 0. |
| atin | 24 | Total operating and administrative | | | | |
| Der | | expenses Add lines 13 through 23 | 27,123. | 22,817. | | |
| Õ | 25 | Contributions, gifts, grants paid | 230,000. | | | 230,000. |
| | 26 | Total expenses and disbursements | | | | |
| | <u> </u> | Add lines 24 and 25 | 257,123. | 22,817. | | 230,000. |
| | ł | Subtract line 26 from line 12: | | | · · · | |
| | 1 | Excess of revenue over expenses and disbursements | <83,365. | | | · |
| | | Net investment income (if negative, enter -0-) | - | 100,941. | 37 / X | · |
| | C | Adjusted net income (if negative, enter -0-) | | | N/A | <u> </u> |

| FORM 990-FF (2019) SHANAHAN FAMILY FOUNDATION 43-6911537 Page | | | | | | | | |
|---|-------|--|-------------------|----------------|---------------------------|--|--|--|
| F | \art | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | End o | | | | |
| 느 | | Balance Sheets column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value | | | |
| | 1 | Cash - non-interest-bearing | | 2. | 2. | | | |
| | 2 | Savings and temporary cash investments | 342,981. | 247,828. | 247,828. | | | |
| | | Accounts receivable | | | | | | |
| | | Less: allowance for doubtful accounts | | - ' - ' | | | | |
| | 4 | Pledges receivable | | | | | | |
| | ' | Less; allowance for doubtful accounts | | | | | | |
| | 5 | Grants receivable | | | | | | |
| | | Receivables due from officers, directors, trustees, and other | | | | | | |
| | " | · | | | | | | |
| | _ | disqualified persons | | | | | | |
| | 7 | Other notes and toans receivable | - · · - | | | | | |
| | ١. | Less; allowance for doubtful accounts ▶ | | | | | | |
| Assets | 1 | Inventories for sale or use | | | | | | |
| 1SS | | Prepaid expenses and deferred charges | 1 100 000 | 1 100 000 | 4 005 004 | | | |
| • | 1 | Investments - U.S. and state government obligations STMT 7 | 1,100,000. | 1,100,000. | 1,095,931. | | | |
| | 1 | Investments - corporate stock STMT 8 | 2,821,248. | 2,832,901. | 4,960,148. | | | |
| | C | Investments - corporate bonds | | | | | | |
| | 11 | Investments - land, buildings, and equipment basis | | | | | | |
| | | Less accumulated depreciation | | | | | | |
| | 12 | Investments - mortgage loans | | ·-· | | | | |
| | 13 | Investments - other | | | | | | |
| | 14 | Land, buildings, and equipment: basis | | . | | | | |
| | | Less accumulated depreciation | | | | | | |
| | 15 | Other assets (describe STATEMENT 9) | <4,628. | <4,495. | <u> </u> | | | |
| | 16 | Total assets (to be completed by all filers - see the | | | | | | |
| | | instructions. Also, see page 1, item I) | 4,259,601. | 4,176,236. | 6,303,909. | | | |
| | 17 | Accounts payable and accrued expenses | | | | | | |
| | 18 | Grants payable | | | | | | |
| Ş | 19 | Deferred revenue | | | | | | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | | | |
| abi | 21 | Mortgages and other notes payable | | | | | | |
| = | 1 | Other liabilities (describe | | | | | | |
| | | | | | | | | |
| | 23_ | Total liabilities (add lines 17 through 22) | 0. | 0. | | | | |
| | | Foundations that follow FASB ASC 958, check here | | | i | | | |
| S | | and complete lines 24, 25, 29, and 30 | | | • | | | |
| ğ | 24 | Net assets without donor restrictions | | | | | | |
| Net Assets or Fund Balances | 25 | Net assets with donor restrictions | | | <u> </u> | | | |
| E D | | Foundations that do not follow FASB ASC 958, check here ▶ 🗶 | | | - 1 | | | |
| 5 | | and complete lines 26 through 30 | | 1 | , | | | |
| ö | 26 | Capital stock, trust principal, or current funds | 0. | 0. | i | | | |
| sts | 27 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | 1 | | | |
| SS | 28 | Retained earnings, accumulated income, endowment, or other funds | 4,259,601. | 4,176,236. | | | | |
| žt A | 29 | Total net assets or fund balances | 4,259,601. | 4,176,236. | | | | |
| ž | | | | | | | | |
| | 30 | Total liabilities and net assets/fund balances | 4,259,601. | 4,176,236. | <u> </u> | | | |
| D | art | Analysis of Changes in Net Assets or Fund Ba | alances | | | | | |
| | | | | | | | | |
| | | net assets or fund balances at beginning of year - Part II, column (a), line 2 | 29 | | | | | |
| | • | t agree with end-of-year figure reported on prior year's return) | | 1 | 4,259,601. | | | |
| | | amount from Part I, line 27a | | 2 | <u><83,365.</u> > | | | |
| | | increases not included in line 2 (itemize) | | | 0. | | | |
| | | ines 1, 2, and 3 | | 4 | 4,176,236. | | | |
| | | eases not included in line 2 (itemize) | | 5 | 0. | | | |
| 6 | Total | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | lumn (b), line 29 | 6 | 4,176,236. | | | |
| | | | | | Form 990-PF (2019) | | | |

| Part IV Capital Gains | and Lo | osses for Tax on In | vestmen | t Income | | | | | |
|--|---------------------|---|-----------------|--|---------------|--|------------------|----------------------------------|---|
| | | s) of property sold (for exam or common stock, 200 shs | | ite, | 1. b | low acquired - Purchase - Donation | (c) Dat (mo., | e acquired day, yr.) | (d) Date sold (mo., day, yr.) |
| 1a THRU PALM TREE | PRT | S LP | | | | P | | | |
| b | | | | | <u> </u> | | | | |
| <u>c</u> | | | | | | | ļ | | |
| _d | | | | | ├ | | | | |
| <u>e</u> | | | | | / | | | | <u> </u> |
| (e) Gross sales price | (f) | (or allowable) | | st or other basis expense of sale | | | (h) (e) pl | Gain or (loss us (f) minus | (g)) |
| a 7,273. | | | | | | | | | 7,273. |
| <u>b</u> | | | | | | | | | |
| <u>c</u> | | | | | | | | | |
| <u>d</u> | | | | | | | | | |
| Complete only for assets showin | a asin in | column (h) and owned by the | he foundation | on 12/31/69 | | | (I) Coupe | (Col. (b) goin | minus |
| Complete only for assets showin | | | | cess of col. (1) | { | | | (Col. (h) gaın t not less tha | |
| (i) FMV as of 12/31/69 | | (j) Adjusted basis as of 12/31/69 | | col. (j), if any | | · | Losse | s (from col. (| (h)) |
| | | | | 55 (3), | f | | | | 7,273. |
| a b | | | | | | | | | 1,213. |
| | | | | | -+ | | | | |
| - c | | | | | | | | | |
| e | | | | | + | | | | |
| | | C 16 nove plan anton | | | 7 | | | | |
| 2 Capital gain net income or (net ca | oital loss | If gain, also enter If (loss), enter -0- | in Part I, line | <i>r</i> 7 | - | 2 | | | 7,273. |
| , - | | • | | • | 7 | | | | |
| 3 Net short-term capital gain or (los If gain, also enter in Part I, line 8, e | | | 1 (6): | | ٦١ | | | | |
| If (loss), enter -0- in Part I, line 8 | COMMINIC | ·). | | | P | 3 | | N/A | |
| Part V Qualification U | nder S | Section 4940(e) for | Reduced | Tax on Net | Inve | estment In | come | | |
| If section 4940(d)(2) applies, leave the Was the foundation liable for the sect If "Yes," the foundation doesn't qualify | ion 4942 under s | tax on the distributable amo | plete this par | t <u>. </u> | | | | | Yes X No |
| 1 Enter the appropriate amount in e | ach colu | mn for each year; see the in | structions be | fore making any e | ntries. | · | | | (4) |
| (a) Base period years Calendar year (or tax year beginnir | ıg ın) | (b) Adjusted qualifying distr | | Net value of no | | | | Distrib (col. (b) div | (d) oution ratio oided by col. (c)) |
| 2018 | | 295 | 5,548. | | | <u>,480,86</u> | | | .053924 |
| 2017 | | | 9,545. | | | <u>,395,20</u> | | | .052226 |
| 2016 | | | 3,057. | | | <u>314,25</u> | | | .054020 |
| 2015 | | | 1,524. | | | <u>,496,48</u> | | | .051490 |
| 2014 | | 209 | 9,500. | | 4 | <u>524,40</u> | 4. | T | .046304 |
| 2 Total of line 1, column (d) | | | | | | | 2 | | .257964 |
| 3 Average distribution ratio for the 5 the foundation has been in existen | - | | n line 2 by 5.0 |), or by the numbe | er of y | ears | 3_ | ļ | .051593 |
| 4 Enter the net value of noncharitable | e-use as | sets for 2019 from Part X, lii | ne 5 | | | | 4 | | 5,788,848. |
| 5 Multiply line 4 by line 3 | | | | 5 | | 298,664. | | | |
| 6 Enter 1% of net investment incom | e (1% of | Part I, line 27b) | | | | | 6 | | 1,009. |
| 7 Add lines 5 and 6 | | | | | | | 7_ | | 299,673. |
| 8 Enter qualifying distributions from | Part XII, | line 4 | | | | | 8 | | 230,000. |
| If line 8 is equal to or greater than See the Part VI instructions. | line 7, ch | eck the box in Part VI, line 1 | 1b, and comp | lete that part using | g a 1% | tax rate. | | | |

| | 990-PF (2019) SHANAHAN FAMILY FOUNDATION rt VI Excise Tax Based on Investment Income (Section 494 | 0(a), 4940(b), | 4940(e), or 4 | | 911537 see instru | | Page 4 |
|------|---|----------------------------|----------------------|-------|--------------------------|-------------------|--------------|
| 10 | Exempt operating foundations described in section 4940(d)(2), check here and e | |) | | | | |
| | Date of ruling or determination letter: (attach copy of letter if nea | | ions) | 1 1 | | | ‡ |
| | Domestic foundations that meet the section 4940(e) requirements in Part V, check here | | , I | 1 | | $\tilde{2}$, 0 |)19. |
| | of Part I, line 27b | | 1 | | | | • |
| C | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 46 | % of Part I, line 12, c | ol. (b) | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; or | thers, enter -0-) | | _ 2 | | - | 0. |
| | Add lines 1 and 2 | | | 3 | | 2,0 | 19. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; of | thers, enter -0-) | | 4 | | | 0. |
| | Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0- | | | 5 | | 2,0 | 19. |
| 6 | Credits/Payments: | | | | | | |
| a | 2019 estimated tax payments and 2018 overpayment credited to 2019 | 6a | _2,000. | | | | į |
| ь | Exempt foreign organizations - tax withheld at source | 6b | 0. |] [| | | ļ |
| C | Tax paid with application for extension of time to file (Form 8868) | 6c | 0. | | | | |
| d | Backup withholding erroneously withheld | 6d | 0. | _ | | | 1 |
| 7 | Total credits and payments. Add lines 6a through 6d | | | 7 | | 2,0 | 00. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta | ched | | 8 | | | 0. |
| 9 | Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed | | > | 9 | | | 19. |
| 10 | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | > | 10 | | | |
| 11 | Enter the amount of line 10 to be: Credited to 2020 estimated tax | | Refunded ▶ | 11 | | | |
| Par | rt VII-A Statements Regarding Activities | | | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legis | lation or did it partic | ipate or intervene | ın | | Yes | No |
| í | any political campaign? | | | | 1a | | X |
| b l | Did it spend more than \$100 during the year (either directly or indirectly) for political purpor | ses? See the instruct | tions for the defin | ition | 1b | | X |
| I | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of | of any materials publ | ished or | | | | 1 |
| (| distributed by the foundation in connection with the activities. | | | | | | |
| c i | Did the foundation file Form 1120-POL for this year? | | | | 1c_ | | X |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the | | | | | | 1 |
| | (1) On the foundation. > \$ 0 . (2) On foundation managers | | 0. | | | | 1 : |
| e i | Enter the reimbursement (if any) paid by the foundation during the year for political expendi | ture tax imposed on | foundation | | | | ! |
| | managers. ► \$ O . | | | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the II | RS? | | | 2 | | X |
| | If "Yes," attach a detailed description of the activities. | | | | | | ! |
| | Has the foundation made any changes, not previously reported to the IRS, in its governing i | nstrument, articles o | of incorporation, o | r | - | | ' |
| | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | | _ 3 | | <u> X</u> |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year | ιs | | • | 4a | | X |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | | | N/. | [| | |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 1 | | | _ 5 | | <u>X</u> |
| | If "Yes," attach the statement required by General Instruction T. | | | | | | ļ |
| | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e | ther: | | | | | l |
| | By language in the governing instrument, or | | | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandator | y directions that con | flict with the state | law | - | | |
| | remain in the governing instrument? | | | | 6 | <u>X</u> | |
| 7 [| Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp | lete Part II, col. (c), a | and Part XV | | 7 | <u>X</u> | |
| | | _ | | - | | | ١. |
| | Enter the states to which the foundation reports or with which it is registered. See instruction | ns. 🕨 | | | | | |
| - | MO | | | | | | |
| | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A | πorney General (or d | esignate) | | - | 77 | - : |
| | of each state as required by General Instruction G? If "No," attach explanation | -1 4040(1/0) : 4 | 040(-)(5) 5 | | 8b | <u>X</u> | i |
| | is the foundation claiming status as a private operating foundation within the meaning of se | | 942(J)(D) for cale | ıuar | - | | · • · · / / |
| | year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," com | | | | 9 | | <u></u> \ |
| 10 [| Did any persons become substantial contributors during the tax year? if "Yes," attach a schedu | le listing their names and | d addresses | | 10 Form 99 0 | DE | (22.42) |

| L P | Ift 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 | | ľ | | | | | | | | |
| | section 512(b)(13)? If "Yes," attach schedule. See instructions | _11 | | X | | | | | | | |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | | | | | | | | | | |
| | If "Yes," attach statement. See instructions | | | | | | | | | | |
| 13 | 3 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | | | | | | | | | | |
| | Website address ► N/A | | | | | | | | | | |
| 14 | The books are in care of ▶ JOHN M HILLHOUSE Telephone no. ▶ 314-33 | 6-0 | 560 | | | | | | | | |
| | Located at ▶424 S. WOODSMILL RD SUITE 325, CHESTERFIELD, M ZIP+4 ▶63 | | | | | | | | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | | | \Box | | | | | | | |
| | and enter the amount of tax-exempt interest received or accrued during the year | N | /A | | | | | | | | |
| 16 | At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No | | | | | | | |
| | securities, or other financial account in a foreign country? | 16 | 1 | X | | | | | | | |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | | | | | | | | | | |
| | foreign country | | - 1 | ; | | | | | | | |
| Pa | ort 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 | | | | | | | |
| 12 | During the year, did the foundation (either directly or indirectly): | | | 1 | | | | | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | | | - 1 | | | | | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | ĺ | | | | | | | | |
| | a disqualified person? | | | • | | | | | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | Ì | İ | i | | | | | | | |
| , | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No | | | , | | | | | | | |
| | | i | 1 | ; | | | | | | | |
| | (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)? Yes X No | | | ' | | | | | | | |
| | · · · · | - 1 | | | | | | | | | |
| | (6) Agree to pay money or property to a government official? (Exception, Check "No" | İ | 1 | ٠. | | | | | | | |
| | if the 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.) Yes X No | | - 1 | | | | | | | | |
| | | | j | | | | | | | | |
| D | *If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | · · · | | | | | | | |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A | 1b | | | | | | | | | |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | İ | | | | | | | |
| | 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 | | <u> X</u> | | | | | | | |
| 2 | *Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | | i | ŀ | | | | | | | |
| | defined in section 4942(j)(3) or 4942(j)(5)): | | 1 | | | | | | | | |
| a | At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines | 1 | | | | | | | | | |
| | 6d and 6e) for tax year(s) beginning before 2019? | | | ; | | | | | | | |
| | If "Yes," list the years | | J | | | | | | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | | | : | | | | | | | |
| | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach | | - | | | | | | | | |
| | statement - see instructions.) N/A | 2b | | | | | | | | | |
| C | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | ĺ | 1 | • | | | | | | | |
| | <u> </u> | Í | i | 1 | | | | | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | į | | | | | | | |
| | during the year? | 1 | 1 | i . | | | | | | | |
| b | If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after | | | ! | | | | | | | |
| | May 2C, 1960; (2) the lapse of the 5 year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose | | - 1 | ; ! | | | | | | | |
| | of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, | | | 1 | | | | | | | |
| | Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A | <u>3b</u> | | | | | | | | | |
| | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X | | | | | | | |
| þ | 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 | | <u>X</u> | | | | | | | |
| | , Fori | n 990 | -PF (| 2019) | | | | | | | |

| Form 990-PF (2019) SHANAHAN FAMILY FOUNDATION | <u>43-6911</u> | L537 Page 7 |
|--|----------------|------------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Hig Paid Employees, and Contractors (continued) | jhly | |
| 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." | | <u> </u> |
| (a) Name and address of each person paid more than \$50,000 (b) Type of | service | (c) Compensation |
| NONE | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | <u> </u> | 0 |
| 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 organizations and other beneficiaries served, conferences convened, research papers produced, etc. | | Expenses |
| 1 <u>N/A</u> | | |
| 2 | | |
| | | |
| 3 | | |
| 4 | | |
| | | |
| Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | | Amount |
| 1 N/A | | - Alloune |
| 2 | | |
| | | |
| All other program-related investments. See instructions. | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | > | 0. |
| • | For | m 990-PF (2019) |

| P | art X Minimum Investment Return (All domestic foundations m | nust complete | this part Foreign fou | ndations, s | ee instructions) |
|----------|--|-------------------|--------------------------|-----------------|------------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable | e, etc., purpose | s: | 141 211 mm | |
| a | Average monthly fair market value of securities | | | 1a | _5,624,373. |
| b | Average of monthly cash balances | | | 1b | 5,624,373. 252,630. |
| C | Fair market value of all other assets | | | 1c | |
| d | Total (add lines 1a, b, and c) | | | 1d | 5,877,003. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | | *! | |
| | 1c (attach detailed explanation) | 1e | 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | | | 2 | 0. |
| 3 | Subtract line 2 from line 1d | | | 3 | 5,877,003. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, | , see instruction | s) | 4 | 88,155. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on | Part V, line 4 | | 5 | 5,788,848. |
| <u>6</u> | Minimum investment return Enter 5% of line 5 | | | 6 | 289,442. |
| P | art:XI Distributable Amount (see instructions) (Section 4942(j)(3) and | | operating foundations ai | nd certain | |
| | foreign organizations, check here and do not complete this part.) |) | | , , | |
| 1 | Minimum investment return from Part X, line 6 | | | 1 | 289,442. |
| 2a | Tax on investment income for 2019 from Part VI, line 5 | 2a | 2,019. | | |
| b | Income tax for 2019. (This does not include the tax from Part VI.) | 2b | | 1.00 | |
| C | Add lines 2a and 2b | | | 2c | <u>2,019.</u> |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | | | 3 | 287,423. |
| 4 | Recoveries of amounts treated as qualifying distributions | | | 4 | |
| 5 | Add lines 3 and 4 | | | 5 | 287,423. |
| 6 | Deduction from distributable amount (see instructions) | | | 6 | 0. |
| <u>7</u> | Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part | XIII, line 1 | | 7 | 287,423. |
| P | art XII Qualifying Distributions (see instructions) | | | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purp | oses; | | _ | |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | | | 1a | 230,000. |
| b | Program-related investments - total from Part IX-B | | | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitab | le, etc., purpos | es | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | | *** | |
| | 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; an | | 4 | 4 | 230,000. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net inves | stment | | | _ |
| | income. Enter 1% of Part I, line 27b | | | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | | | 6 | 230,000. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years will | hen calculating | whether the foundation (| qualifies for t | he section |

Form **990-PF** (2019)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2018 | (c) 2018 | (d) 2019 |
|---|---------------|----------------------------|-------------|--|
| 1 Distributable amount for 2019 from Part XI, line 7 | | | | 287,423. |
| 2 Undistributed income, if any, as of the end of 2019 | | | | <u> </u> |
| a Enter amount for 2018 only | | | 0. | |
| b Total for prior years: | | | | |
| b rotarior prior yours, | | 0. | | |
| 3 Excess distributions carryover, if any, to 2019: | | | | |
| a From 2014 | | | | |
| b From 2015 7,652. | | | | |
| c From 2016 21, 230. | | ļ | | |
| d From 2017 10,695. | | | | |
| | | } | | |
| | 64,986. | | | |
| f Total of lines 3a through e | 04,300. | | | |
| 4 Qualifying distributions for 2019 from | | | | |
| Part XII, line 4: ►\$ 230,000. | | | 0. | |
| a Applied to 2018, but not more than line 2a | | | | |
| b Applied to undistributed income of prior | | <u> </u> | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | 020 000 |
| d Applied to 2019 distributable amount | | | | 230,000. |
| e Remaining amount distributed out of corpus | 0. | | | |
| 5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a)) | 57,423. | | | 57,423. |
| 6 Enter the net total of each column as indicated below. | ļ | | | , |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 7,563. | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously | | 0. | | |
| assessed | | | | |
| d Subtract line 6c from line 6b. Taxable | | . 0. | -, | |
| amount - see instructions e Undistributed income for 2018. Subtract line | | | | |
| 1 | | | 0. | ; |
| 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2019. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2020 | | | | 0. |
| 7 Amounts treated as distributions out of | | | | <u>·</u> |
| | } | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | 0. | | | |
| may be required - see instructions) | | | | |
| 8 Excess distributions carryover from 2014 | 0. | | | |
| not applied on line 5 or line 7 | | | | |
| 9 Excess distributions carryover to 2020 | 7 562 | | | 1 |
| Subtract lines 7 and 8 from line 6a | 7,563. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2015 | | ļ | | |
| b Excess from 2016 | | | • | |
| c Excess from 2017 | 1 | ŀ | | |
| d Excess from 2018 7,563. | | | • | , |
| e Excess from 2019 | | | | <u> </u> |

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| | N FAMILY FO | | | 43-69 | 11537 Page 10 |
|--|--------------------------|------------------------------|--|------------------------------|---------------------------|
| Part XIV Private Operating F | | | I-A, question 9) | N/A | |
| 1 a If the foundation has received a ruling of | | | | | |
| foundation, and the ruling is effective fo | | | ▶ | = | |
| b Check box to indicate whether the foun | | ng foundation described | | 49 <u>42(j)(3)</u> or4 | 942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum | (a) 2019 | (b) 2018 | (c) 2017 | (d) 2016 | (e) Total |
| investment return from Part X for | | | | • | } |
| each year listed | | <u> </u> | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4, for each year listed | | | <u> </u> | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | ` | | | |
| Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the | | | | T | |
| alternative test relied upon: a "Assets" alternative test - enter: | | İ | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying | | | | | |
| under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter | | | | | |
| 2/3 of minimum investment return shown in Part X, line 6, for each year listed | | | | | |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross | | | | | |
| investment income (interest, | | | | | |
| dividends, rents, payments on | } | | } | | |
| securities loans (section 512(a)(5)), or royalties) | | | | ` | |
| (2) Support from general public | | | | | |
| and 5 or more exempt | | | | | |
| organizations as provided in | | İ | 1 | | |
| section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | - | | - | |
| Part XV Supplementary Info | rmation (Comple | te this part only | if the foundation | n had \$5 000 or me | ore in assets |
| at any time during t | | | ii tiio iodiidatio | | oro iii dodoto |
| 1 Information Regarding Foundation | | • | | | |
| a List any managers of the foundation wh | - | than 2%, of the total cont | ributions received by th | e foundation before the clo | se of any tax |
| year (but only if they have contributed n | | | 11561101101101101101101 | | oo or any tan |
| MICHAEL F SHANAHAN S | | | | | |
| b List any managers of the foundation wh other entity) of which the foundation ha | | | or an equally large port | tion of the ownership of a p | artnership or |
| NONE | | | | | |
| 2 Information Regarding Contribut | ion, Grant, Gift, Loan, | Scholarship, etc., Pr | ograms: | | |
| Check here ► X if the foundation of the foundation makes gifts, grants, etc., | nly makes contributions | to preselected charitable | organizations and does | | ests for funds. If |
| a The name, address, and telephone num | | | | | |
| b The form in which applications should b | e submitted and informa | tion and materials they sl | nould include: | | |
| c Any submission deadlines: | | <u> </u> | | | |
| d Any restrictions or limitations on awards | o, such as by geographic | al arcas, charitable fields. | kınds of institutions, or | other factors: | |
| , and the state of | ., | | | | |
| 923601 12-17-19 | | | | | Form 990-PF (2019) |

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Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated. | Unrelated | business income | | d by section 512, 513, or 514 | (e) |
|--|-------------------|-----------------|---------------|-------------------------------|-------------------|
| - | (a) | (b) | (C) Exclu- | (d) | Related or exempt |
| 1 Program service revenue: | Business code | Amount | code | Amount | function income |
| a | | | | | |
| b | | | 1 | | |
| c | | | | | |
| d | | | | | |
| · · | 1 | | | | |
| e | - - | | 1 | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | 14 | 5,231. | |
| 4 Dividends and interest from securities | | | 14 | 5,231. 111,254. | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | - | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | 1 1 | | 18 | 7,273. | |
| 9 Net income or (loss) from special events | | | | | |
| O Gross profit or (loss) from sales of inventory | | | | | |
| 1 Other revenue: | | | | | |
| a | | |)) | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 2 Subtotal. Add columns (b), (d), and (e) | | 0 | | 123,758. | 0 . |
| 3 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 123,758 |
| See worksheet in line 13 instructions to verify calculations.) | 1 | | | | |

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

| Line No. | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). | | | | | | | |
|----------|---|--|--|--|--|--|--|--|
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Form **990-PF** (2019)

| Form 990-P Part XV | | AHAN FAMILY FOUR egarding Transfers to a nizations | | and Relations | 43-6911 hips With Nonchar | | age 13 |
|-----------------------|--|---|-------------------------------|--------------------------|-----------------------------------|---------------------------------------|--------|
| | e organization directly or indi | rectly engage in any of the following | | | ion 501(c) | Yes | No |
| | | nizations) or in section 527, relatir lation to a noncharitable exempt o | | • | | | 1 |
| (1) Ca | • • | iation to a noncharitable exempt o | i yanization oi. | | | 1a(1) | x |
| | ther assets | | | | | 1a(2) | X |
| b Other t | | | | | | | |
| (1) Sa | ales of assets to a noncharita | able exempt organization | | | | 1b(1) | X |
| | | oncharitable exempt organization | | | | 1b(2) | X |
| | ental of facilities, equipment, | | | | | 1b(3) | X |
| | eimbursement arrangements oans or loan guarantees | 5 | | | | 1b(4) 1b(5) | X |
| | ·= | embership or fundraising solicitati | ons | | | 1b(6) | X |
| | | ailing lists, other assets, or paid en | | | | 1c | X |
| | | "Yes," complete the following sch | | ways show the fair n | narket value of the goods, o | ther assets, | |
| | | foundation. If the foundation receiv | | ue in any transaction | or sharing arrangement, sh | iow in | |
| | | other assets, or services received | | | | | |
| (a) Line no | (b) Amount involved | (c) Name of noncharitable | e exempt organization | (0) Description | of transfers, transactions, and s | haring arrangeme | ents |
| | | N/A | | | | | |
| | | | | | | · · · · · · · · · · · · · · · · · · · | |
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| | | | | | | | |
| | | tly affiliated with, or related to, one on 501(c)(3)) or in section 527? | e or more tax-exempt organi | zations described | Г | Yes X | No |
| | " complete the following sch | | | | | 103 2 | 7 140 |
| | (a) Name of org | | (b) Type of organization | | (c) Description of relationsh | р | |
| | N/A | | | | | | |
| | | | <u> </u> | | | | |
| | | | | | | | |
| | | | | | | | |
| Ún | der penalties of perjury, I declare | that I have examined this return, including | ng accompanying schedules and | statements, and to the i | best of my knowledge | the IRS discuss t | hio |
| Sign | d belief, it is true, correct, and con | mplete Declaration of preparer (other that | | nation of which preparer | nas any knowledge return | with the prepare n below? See in: | er |
| Here | 11/4 DH | | 3/21/26 | | | Yes 🗀 | No |
| S | ignature of officer or trustee | | Date | Title | Ob 1 (0 - 1) | | |
| | Print/Type preparer's na | ame Preparer's s | signature | Date | Check X if PTIN self- employed | | |
| Paid | ILLY AND | norke low | 11.00 Down | 2/10/20 | , , , | 389158 | |
| Prepare | Firm's name ► JOH | N M. HILLHOUSE | CPA LLC | ×110140 | Firm's EIN ► 20-03 | | |
| Use Onl | | | | | 1 20 03 | | |
| | Firm's address ▶ 42 | 4 S. WOODSMILL | RD SUITE 3 | 25 | | | |
| | СН | ESTERFIELD, MO | 63017 | | Phone no. 314-33 | | |
| | | | | | For | m 990-PF (| (2019) |

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Foundation Purpose of grant or show any relationship to **Amount** status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor FRANCISCAN WORKS PUBLIC CHARITY GENERAL PURPOSES NONE P.O. BOX 56007 CHICAGO IL 60656 15,000. ANGELS ARMS NONE PUBLIC CHARITY GENERAL PURPOSES 12819 TESSON FERRY ST_LOUIS MO 63128 1,000. ANNIES HOPE NONE PUBLIC CHARITY GENERAL PURPOSES 1333 W LOCKWOOD KIRKWOOD MO 63122 1,000. PROMISE CHRISTIAN ACADEMY PUBLIC CHARITY GENERAL PURPOSES NONE MARYVILLE CENTER DR #227 CHESTERFIELD MO 63017 28,000. THE CHURCH OF THE IMMACOLATA PUBLIC CHARITY GENERAL PURPOSES NONE 8910 CLAYTON RD CHESTERFIELD MO 63117 10,000, NONE PUBLIC CHARITY GENERAL PURPOSES ST GENEVIEVE DU BOIS CHURCH 1575 N WOODLAWN 16,500. ST, LOUIS, MO 63122 ST JOESEPH'S ACADEMY NONE PUBLIC CHARITY GENERAL PURPOSES 2307 S LINDBERGH 5,000. ST, LOUIS MO 63131 CRISIS NURSERY PUBLIC CHARITY GENERAL PURPOSES NONE 11710 ADMINISTRATIVE DR#18 ST LOUIS, MO 63146 1,000. GENERAL PURPOSES FATHER DEMPSEYS CHARITIES PUBLIC CHARITY GENERAL PURPOSES NONE 3427 WASHINGTON ST ST LOUIS, MO 63103 1,000. ST JUDE CHILDRENS RESEARCH NONE PUBLIC CHARITY GENERAL PURPOSES 22 DANNY THOMAS PL 3,250, MEMPHIS TN 38105 Total from continuation sheets 215 500.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient MARY GROVE NONE PUBLIC CHARITY GENERAL PURPOSES 2705 MULLANPHY RD FLORRISANT MO 63031 1,000. MISSOURI STATE TROOPERS NONE PUBLIC CHARITY 1729 E ELM GENERAL PURPOSES JEFFERSON CITY MO 65109 1,000. VILLA DUCHENSNE SCHOOL NONE PUBLIC CHARITY GENERAL PURPOSES 801 SPOEDE ROAD ST LOUIS MO 63131 9,500, NURSES FOR NEWBORNS PUBLIC CHARITY GENERAL PURPOSES NONE 7259 LANDSDOWNE 1,000. ST_LOUIS MO 63119 PILLAR CHURCH NONE PUBLIC CHARITY GENERAL PURPOSES 401 S LINDBERGH 1,000. ST LOUIS MO 63131 PUBLIC CHARITY GENERAL PURPOSES SUNNY HILL NONE 14 SOCCER PARK 1,000. FENTON MO 63026 PUBLIC CHARITY VANCE MILLER MEMORIAL GOLF BENEFIT NONE 14001 DALLAS PKWY 11TH FLOOR GENERAL PURPOSES DALLAS TX 75240 3,000. PUBLIC CHARITY GENERAL PURPOSES DELTA DUNKFEST SANGUINIT CAMP NONE 2929 CARLISLE #355 DALLAS TX 75204 1,000. DELTA GAMMA FOUNDATION NONE PUBLIC CHARITY GENERAL PURPOSES 3250 RIVERSIDE 500. COLMBUS OH 43221 CATCH 22 FOUNDATION NONE PUBLIC CHARITY GENERAL PURPOSES 460 OLD WOLFRUM RD 5,000, WELDON SPRING MO 63304 GENERAL PURPOSES Total from continuation sheets

- 5

SHANAHAN FAMILY FOUNDATION

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of any foundation manager contribution Name and address (home or business) or substantial contributor recipient ANNUAL CATHOLIC APPEAL NONE PUBLIC CHARITY GENERAL PURPOSES 20 ARCHBISHOP MAY DR ST_LOUIS MO 63119 500. COMMUNITY CANCER FUND NONE PUBLIC CHARITY GENERAL PURPOSES 510 RIVERSIDE SPOKANE WA 99201 10,000. CHAMINADE SCHOOL NONE PUBLIC CHARITY GENERAL PURPOSES 425 S LINDBERGH ST LOUIS MO 63131 15,750. PUBLIC CHARITY GENERAL PURPOSES GREAT CIRCLE NONE 1220 N LINDBERGH 500. ST LOUIS MO 63132 AMERICAN FOUNDATION FOR SUICIDE NONE PUBLIC CHARITY GENERAL PURPOSES 199 WATER ST 11TH FLOOR 5,000, NEW YORK NY 10038 PUBLIC CHARITY NONE HUMANE SOCIETY OF MISSOURI GENERAL PURPOSES 1201 MACKLIND 5,000. ST LOUIS MO 63110 PUBLIC CHARITY TOYS FOR TOTS NONE 18251 QUANTICO GATEWAY DRIVE GENERAL PURPOSES 7,000. TRIANGLE, VA 22172 PUBLIC CHARITY GENERAL PURPOSES ACTION FOR AUTISM NONE 265 STEAMBOAT LANE GENERAL PURPOSES 5,000. BALWIN MO 63011 NONE PUBLIC CHARITY GENERAL PURPOSES ST PATRICKS CENTER 800 TUCKER 11,000. ST LOUIS MO 63101 CHESTERFIELD HOCKEY ASSOCIATION PUBLIC CHARITY GENERAL PURPOSES NONE PO BOX 335 50,000. CHESTERFIELD, MO 63006 Total from continuation sheets

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

SHANAHAN FAMILY FOUNDATION

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Employer identification number

43-6911537

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

| Organi | zation type (check o | one) | | | | | | | | | | |
|-----------------|---|------------------------------|--|--|---|--|--------------------------------------|--|---|---|---------------|--------|
| Filers o | of: | Sect | tion: | | | | | | | | | |
| Form 9 | 90 or 990-EZ | | 501(c)(|) (enter numbe | er) organizatio | n | | | | | | |
| | | | 4947(a)(1) |) nonexempt cha | arıtable trust n | ot treated as | a private fo | undation | | | | |
| | | | 527 politic | cal organization | | | | | | | | |
| Form 99 | 90-PF | $\overline{\mathbf{x}}$ | 501(c)(3) | exempt private fo | oundation | | | | | | | |
| | | | 4947(a)(1) |) nonexempt cha | arıtable trust tr | eated as a pr | ıvate found | ation | | | | |
| | | | 501(c)(3) t | taxable private fo | oundation | | | | | | | |
| | f your organization is Only a section 501(c) | | | | - | | neral Rule a | nd a Speci | al Rule Se | ee instruc | ctions. | |
| Genera | ıl Rule | | | | | | | | | | | |
| X | For an organization property) from any | - | | | | | | | | | | y or |
| Special | l Rules | | | | | | | | | | | |
| · 🗀 | For an organization sections 509(a)(1) any one contributo or (ii) Form 990-EZ, | and 17 or, durir | '0(b)(1)(A)(v ng the year | n), that checked in the chartest of the contribution of the contribution of the chartest of th | Schedule A (F | orm 990 or 9 | 90-EZ), Parl | t II, line 13, | 16a, or 16 | Sb, and th | nat received | d from |
| | For an organization year, total contribution of cruels | itions o | of more that | n \$1,000 <i>exclusi</i> i | vely for religiou | us, charitable | | | | | | |
| | For an organization year, contributions is checked, enter hourpose Don't conreligious, charitable | exclus nere the mplete | sively for rel e total cont any of the | igious, charitable ributions that we parts unless the | e, etc , purpos ere received d General Rule | ses, but no su uring the yea e applies to th | ich contribu r for an <i>exci</i> | ıtıons totale <i>lusıvely</i> relig | ed more th gious, chai se it receiv | nan \$1,00 ritable, et ved <i>nonex</i> | 00 If this bo | эx |
| but it m | n: An organization thi ust answer "No" on hat it doesn't meet th | Part IV | /, line 2, of | its Form 990, or | check the box | on line H of | its Form 99 | | | | | |

Name of organization

Employer identification number

SHANAHAN FAMILY FOUNDATION

43-6911537

| DIIVIA | HAN FAMILI FOUNDATION | | 1-0311337 |
|------------|---|----------------------------|---|
| Part I | Contributors (see instructions). Use duplicate copies of Part I if additional | al space is needed | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | MARY ANN SHANAHAN 10 TRENT DRIVE ST LOUIS, MO 63124 | \$50,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | . (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Onncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash (Complete Part II for noncash contributions) |

| FORM 990-PF INTERE | ST ON SAVI | NGS A | ND TEM | PORA | RY | CASH IN | VESTMENTS | S | PATEMENT | 1 |
|---|------------------|-----------------------------|----------------------------|------------|----------------|------------------------------|-------------------------------|-------------------------------|----------------------------|----|
| SOURCE | | (A) REVENUE PER BOOKS | | | | (B) IVESTMENT ICOME | ŀ | (C) ADJUSTED NET INCOME | | |
| REGIONS BANK THRU PALM TREE PART | NERS | | 4, | | | | 4,924. | | | |
| TOTAL TO PART I, LI | NE 3 | | ! | 5,23 | 1. | ==== | 5,231. | | | |
| FORM 990-PF | DIVIDEND | S AND | INTER | EST | FRO | M SECUR | ITIES | SI | TATEMENT | 2 |
| SOURCE | GROSS AMOUNT | (| APITAL GAINS VIDENDS | S | RE | (A) VENUE BOOKS | (B) NET INVES MENT INCO | | (C) ADJUSTI NET INCO | |
| PALM TREE PARTNERS REGIONS BANK | 15,096 96,158 | | | 0. 0. | | 15,096. 15,0 96,158. 96,1 | | | | |
| TO PART I, LINE 4 111,254. | | • | 0. 11 | | 11,254. 111,25 | | 54. | | | |
| FORM 990-PF | | ACC | COUNTI | NG F | EES | | | SI | TATEMENT | 3 |
| DESCRIPTION | | EXPE | A) NSES BOOKS | NET MEN | |) VEST- NCOME | (C) ADJUSTEI NET INCOM | | (D) CHARITAI PURPOSI | |
| TAX RETURN PREPARAT | ION - | | 2,300. 0. | | 0. | | | | 0. | |
| TO FORM 990-PF, PG | 1, LN 16B = | | 2,300. | | | 0. | | <u> </u> | | 0. |
| FORM 990-PF | 0 | THER I | PROFES | SION | AL I | FEES | | SI | TATEMENT | 4 |
| DESCRIPTION | | EXPE | A) NSES BOOKS | | |) VEST- NCOME | (C) ADJUSTED NET INCOM | | (D) CHARITAI PURPOSI | |
| CUSTODIAN FEES REGIONAL REFERENCE PAIN TREE | ONS | 11 | 1,289. | | 1 | 1,289. | | | | 0. |
| MGT FEES PALM TREE PARTNERS | | 10 | 714. | | 1 | 0,714. | | | | 0: |
| TO FORM 990-PF, PG | 22 | 2,003. | | 2 | 2,003. | | | | 0. | |

| FORM 990-PF | TAX | ES | <u> </u> | STATEMENT | | | |
|-------------------------------|------------------------------|-----------------------------|----------|------------------------------|---------------------|-----|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVE MENT INC | | (C) ADJUSTED NET INCOM | | | |
| FOREIGN TAXES EXCISE TAXES | 814. 2,326. | | | | | 0. | |
| TO FORM 990-PF, PG 1, LN 18 | 3,140. | 814. | | | 0 | | |
| FORM 990-PF | OTHER E | XPENSES | | | STATEMENT | 6 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVE MENT INC | | (C) ADJUSTED NET INCOM | | | |
| TAX DIV>BOOK DIV | <320. | > | 0. | | | 0. | |
| TO FORM 990-PF, PG 1, LN 23 | <320. | > | 0. | | | 0. | |
| FORM 990-PF U.S. AND S | STATE/CITY G | OVERNMENT | OBL | GATIONS | STATEMENT | 7 | |
| DESCRIPTION | U.S GOV'' | | вос | OK VALUE | FAIR MARKE VALUE | T | |
| VANGUARD SHORT TERM GOVT FD | X | - | 1 | ,100,000. | 1,095,9 | 31. | |
| TOTAL U.S. GOVERNMENT OBLIGAT | TIONS | • | 1 | ,100,000. | 1,095,9 | 31. | |
| TOTAL STATE AND MUNICIPAL GOV | VERNMENT OBL | IGATIONS | | | | | |
| TOTAL TO FORM 990-PF, PART II | I, LINE 10A | • | 1 | ,100,000. | 1,095,9 | 31. | |

| FORM 990-PF C | ORPORATE STOCK | | STATEMENT | 8 | |
|---|-------------------------------|--|----------------------|----|--|
| DESCRIPTION | | BOOK VALUE | FAIR MARKE | r | |
| ISHARES GROWTH ISHARES VALUE ISHARES MSCI EAFE VG INDEX 500 | • | 356,782. 555,731. 226,242. 873,582. | 209,639 1,425,460 | | |
| PALM TREE PARTNERS LP TOTAL TO FORM 990-PF, PART II, LI | NE 10B | 820,564. | 1,012,879 | | |
| FORM 990-PF | OTHER ASSETS | | STATEMENT | 9 | |
| DESCRIPTION | BEGINNING OF YR BOOK VALUE | END OF YEAR BOOK VALUE | FAIR MARKET | ני | |
| UNRECONCILED BOOK TAX DIFFERENCES | <4,628.> | <4,495.> | | 0. | |
| TO FORM 990-PF, PART II, LINE 15 | <4,628.> | <4,495.> | 5.> | | |

| FORM 990-PF | | VIII RUSTEE! | | | | | |
|---|-----|-----------------|--------|--------------------------|------|---------------------------------|---------|
| NAME AND ADDRESS | | | | TITLE AND AVRG HRS/WK | | EMPLOYEE BEN PLAN CONTRIB | EXPENSE |
| MARY ANN SHANAHAN % 424 S. WOODMSILL ST LOUIS MO | | SUITE | 325 | TRUSTEE 0.00 | 0. | 0. | 0. |
| MEGAN MATTERN % 424 S. WOODMSILL ST LOUIS MO | RD | SUITE | 325 | TRUSTEE 0.00 | . 0. | 0. | 0. |
| MICHAEL F SHANAHAN % 424 S. WOODMSILL ST LOUIS MO | | | | TRUSTEE 0.00 | 0. | . 0. | 0. |
| MAUREEN TWARDOWSKI % 424 S. WOODMSILL ST LOUIS MO | | | | TRUSTEE 0.00 | . 0. | 0. | 0. |
| MICHAEL F SHANAHAN % 424 S. WOODMSILL ST LOUIS MO | | | | TRUSTEE 0.25 | 0. | 0. | 0. |
| TOTALS INCLUDED ON | 990 | -PF, P <i>I</i> | AGE 6, | PART VIII | 0. | 0. | 0. |