

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation The FJK Private Foundation		A Employer identification number 45-2741384	
% Foundation Source			
Number and street (or P.O. box number if mail is not delivered to street address) Foundation Source 501 Silverside Rd	Room/suite	B Telephone number (see instructions)  (800) 839-1754	
City or town, state or province, country, and ZIP or foreign postal code Wilmington, DE 198091377		C If exemption application is pending, check here ▶ <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here..... ▶ <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... ▶ <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ..... ▶ <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 14,816,672	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ..... ▶ <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	600,000			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B . . . . .				
	3 Interest on savings and temporary cash investments . . . . .	10,146	10,146		
	4 Dividends and interest from securities . . . . .	368,887	368,887		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 _____	-14,109			
	b Gross sales price for all assets on line 6a _____ 4,720,247				
	7 Capital gain net income (from Part IV, line 2) . . . . .		0		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less: Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	12 Total. Add lines 1 through 11 . . . . .	964,924	379,033		
	13 Compensation of officers, directors, trustees, etc.	0			
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .	3,843	0	0	3,843
	b Accounting fees (attach schedule) . . . . .	18,098	0	0	18,098
	c Other professional fees (attach schedule) . . . . .	123,122	123,122		
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . . .	4,105	505		
	19 Depreciation (attach schedule) and depletion . . . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	42,216			42,216
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	191,384	123,627	0	64,157
	25 Contributions, gifts, grants paid . . . . .	800,000			800,000
	26 Total expenses and disbursements. Add lines 24 and 25	991,384	123,627	0	864,157
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	-26,460			
	b Net investment income (if negative, enter -0-)		255,406		
c Adjusted net income (if negative, enter -0-) . . . . .					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	<b>1</b> Cash—non-interest-bearing . . . . .			
	<b>2</b> Savings and temporary cash investments . . . . .	202,109	805,371	805,371
	<b>3</b> Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____	1,682		
	<b>4</b> Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U.S. and state government obligations (attach schedule)	3,482,877	3,382,726	3,360,730
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	7,478,193	7,090,272	7,921,928
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .	2,842,738	2,452,770	2,478,643
	<b>11</b> Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .			
	<b>14</b> Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
<b>15</b> Other assets (describe ▶ _____)		250,000	250,000	
<b>16</b> <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)	14,007,599	13,981,139	14,816,672	
Liabilities	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)			
	<b>23</b> <b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
Net Assets or Fund Balances	<b>Foundations that follow FASB ASC 958, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b>			
	<b>24</b> Net assets without donor restrictions . . . . .			
	<b>25</b> Net assets with donor restrictions . . . . .			
	<b>Foundations that do not follow FASB ASC 958, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 26 through 30.</b>			
	<b>26</b> Capital stock, trust principal, or current funds . . . . .			
	<b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund			
	<b>28</b> Retained earnings, accumulated income, endowment, or other funds	14,007,599	13,981,139	
	<b>29</b> <b>Total net assets or fund balances</b> (see instructions) . . . . .	14,007,599	13,981,139	
<b>30</b> <b>Total liabilities and net assets/fund balances</b> (see instructions) .	14,007,599	13,981,139		

Part III Analysis of Changes in Net Assets or Fund Balances		
<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	14,007,599
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	-26,460
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	13,981,139
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	<b>6</b>	13,981,139

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1 a</b> Publicly-traded Securities			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 4,720,247		4,736,207	-15,960
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b>			-15,960
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	2	-15,960
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	864,316	13,747,229	0.062872
2017	858,933	12,974,584	0.066201
2016	864,467	12,345,162	0.070025
2015	900,927	12,657,967	0.071175
2014	34,267	6,637,016	0.005163

<b>2</b> Total of line 1, column (d)	2	0.275436
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.055087
<b>4</b> Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	13,827,635
<b>5</b> Multiply line 4 by line 3	5	761,723
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	6	2,554
<b>7</b> Add lines 5 and 6	7	764,277
<b>8</b> Enter qualifying distributions from Part XII, line 4	8	1,114,157

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	2,554
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	2,554
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	2,554
<b>6</b>	Credits/Payments:		
<b>a</b>	2019 estimated tax payments and 2018 overpayment credited to 2019	<b>6a</b>	9,830
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	9,830
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached.	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . <b>▶</b>	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . <b>▶</b>	<b>10</b>	7,276
<b>11</b>	Enter the amount of line 10 to be: <b>Credited to 2020 estimated tax</b> <b>▶</b> 2,600 <b>Refunded</b> <b>▶</b>	<b>11</b>	4,676

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). . . . . <i>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.</i>		No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .		No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: <b>(1)</b> On the foundation. <b>▶</b> \$ _____ <b>(2)</b> On foundation managers. <b>▶</b> \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <b>▶</b> \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities.</i>		No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .		No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .		
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>		No
<b>6</b> 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 conflict with the state law remain in the governing instrument? . . . . .	Yes	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i> . . . . .	Yes	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <b>▶</b> DE, IL _____		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation .</i>	Yes	
<b>9</b> 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 taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i> . . . . .		No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> . . . . .		No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	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 . . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► _____	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ► Foundation Source _____ Telephone no. ► (800) 839-1754			

Located at ► 501 Silverside Road Suite 123 Wilmington DE ZIP+4 ► 198091377

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . .	<input type="checkbox"/>		
	and enter the amount of tax-exempt interest received or accrued during the year . . . . .	<b>15</b>		
<b>16</b>	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .	<b>16</b>	<b>Yes</b>	<b>No</b>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ► _____			

**Part 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.**

		<b>Yes</b>	<b>No</b>
<b>1a</b>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(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)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" 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.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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 . . . . .	<b>1b</b>	
	Organizations relying on a current notice regarding disaster assistance check here. . . . . <input type="checkbox"/>		
<b>c</b>	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? . . . . .	<b>1c</b>	<b>No</b>
<b>2</b>	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)):		
<b>a</b>	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	If "Yes," list the years ► 20____, 20____, 20____, 20____		
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions.) . . . . .	<b>2b</b>	
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____		
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</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 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 the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.) . . . . .	<b>3b</b>	
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>	<b>No</b>
<b>b</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?	<b>4b</b>	<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

<b>5a</b>	During the year did the foundation pay or incur any amount to:		<b>Yes</b>	<b>No</b>
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions. . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions . . . . .		<b>5b</b>	
	Organizations relying on a current notice regarding disaster assistance check here. . . . .	<input type="checkbox"/>		
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>			
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .		<b>6b</b>	<b>No</b>
	<i>If "Yes" to 6b, file Form 8870.</i>			
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .		<b>7b</b>	
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Mary E Rooney  Foundation Source 501 Silverside Rd Wilmington, DE 198091377	Dir 1.0	0	0	0
Frank J Roth  Foundation Source 501 Silverside Rd Wilmington, DE 198091377	Dir, Sec, Treas 1.0	0	0	0
William W Thorsness  Foundation Source 501 Silverside Rd Wilmington, DE 198091377	Dir 1.0	0	0	0
Gerhardt E Umlauf  Foundation Source 501 Silverside Rd Wilmington, DE 198091377	Dir, Pres 1.0	0	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
<b>Total number of other employees paid over \$50,000.</b> . . . . .				

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Cornerstone National Bank & Trust Co 1 W NORTHWEST HIGHWAY PALATINE, IL 60067	Investment MGMT	123,122
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . . ►		

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
<b>1</b> JOURNEY CARE FOUNDATION - TO PROVIDE SHORT-TERM LIQUIDITY FOR THE OPERATIONS OF PALLIATIVE AND HOSPICE CARE FACILITIES	250,000
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ►	250,000

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	13,426,867
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	611,341
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	14,038,208
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	14,038,208
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	210,573
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	13,827,635
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	691,382

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	691,382
<b>2a</b>	Tax on investment income for 2019 from Part VI, line 5. . . . .	<b>2a</b>	2,554
<b>b</b>	Income tax for 2019. (This does not include the tax from Part VI.). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	2,554
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	<b>3</b>	688,828
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	688,828
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	<b>7</b>	688,828

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	<b>1a</b>	864,157
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	250,000
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	<b>2</b>	0
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	0
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	0
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	1,114,157
<b>5</b>	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. . . . .	<b>5</b>	2,554
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	1,111,603

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 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
<b>1</b> Distributable amount for 2019 from Part XI, line 7				688,828
<b>2</b> Undistributed income, if any, as of the end of 2019:				
<b>a</b> Enter amount for 2018 only. . . . .				
<b>b</b> Total for prior years: 2017, 2016, 2015				
<b>3</b> Excess distributions carryover, if any, to 2019:				
<b>a</b> From 2014. . . . .				
<b>b</b> From 2015. . . . .				
<b>c</b> From 2016. . . . . 237,073				
<b>d</b> From 2017. . . . . 216,432				
<b>e</b> From 2018. . . . . 188,867				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	642,372			
<b>4</b> Qualifying distributions for 2019 from Part XII, line 4: ► \$ 1,114,157				
<b>a</b> Applied to 2018, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2019 distributable amount. . . . .				688,828
<b>e</b> Remaining amount distributed out of corpus	425,329			
<b>5</b> Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)				
<b>6 Enter the net total of each column as indicated below:</b>	1,067,701			
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .				
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions. . . . .				
<b>e</b> Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions. . . . .				
<b>f</b> Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020. . . . .				0
<b>7</b> 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). . . . .				
<b>8</b> Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions). . . . .				
<b>9 Excess distributions carryover to 2020.</b> Subtract lines 7 and 8 from line 6a. . . . .	1,067,701			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2015. . . . .				
<b>b</b> Excess from 2016. . . . . 237,073				
<b>c</b> Excess from 2017. . . . . 216,432				
<b>d</b> Excess from 2018. . . . . 188,867				
<b>e</b> Excess from 2019. . . . . 425,329				

## Part XIV

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. . . . .

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
		(a) 2019	(b) 2018	(c) 2017	(d) 2016	

<b>b</b> 85% of line 2a					
-------------------------	--	--	--	--	--

c Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
--	--	--	--	--	--

<b>d</b>	Amounts included in line 2c not used directly for active conduct of exempt activities					
----------	---	--	--	--	--	--

<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
--	--	--	--	--	--

3	Complete 3a, b, or c for the alternative test relied upon:				

[illegible]

(1) Value of all assets . . . . .					
-----------------------------------	--	--	--	--	--

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
---	--	--	--	--	--

<b>b</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:				
-------------------------------------	--	--	--	--

<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . .						
--	--	--	--	--	--	--

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .						
---	--	--	--	--	--	--

(3) Largest amount of support from an exempt organization					
---	--	--	--	--	--

(4) Gross investment income					
-----------------------------	--	--	--	--	--

**Part XV** **Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

**b** The form in which applications should be submitted and information and materials they should include:

**c** Any submission deadlines:

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b>			<b>▶ 3a</b>	800,000
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>			<b>▶ 3b</b>	

Enter gross amounts unless otherwise indicated.

[illegible]

## Part XVII

- |  |  |     |    |
|--|--|-----|----|
|  |  | Yes | No |
|--|--|-----|----|

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- |       |  |    |
|-------|--|----|
| 1a(1) |  | No |
| 1a(2) |  | No |

--	--	--

- |              |  |           |
|--------------|--|-----------|
| <b>1b(1)</b> |  | <b>No</b> |
| <b>1b(2)</b> |  | <b>No</b> |
| <b>1b(3)</b> |  | <b>No</b> |
| <b>1b(4)</b> |  | <b>No</b> |
| <b>1b(5)</b> |  | <b>No</b> |
| <b>1b(6)</b> |  | <b>No</b> |

1c		No
----	--	----

value  
ue

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

<p><b>Sign Here</b></p> <p>*****</p> <p>_____</p> <p>Signature of officer or trustee</p>	<p>2020-10-26</p> <p>_____</p> <p>Date</p>	<p>*****</p> <p>_____</p> <p>Title</p>
--	--	--

May the IRS discuss this return with the preparer shown below (see instr.) ☒ **Yes** ☐ **No**

<b>Paid Preparer Use Only</b>	Jeffrey D Haskell				
	Firm's name ► Foundation Source				Firm's EIN ►
	Firm's address ► One Hollow Ln Ste 212 Lake Success, NY 11042				Phone no. (800) 839-1754

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ALMOST HOME KIDS7S721 RTE 53 NAPERVILLE, IL 60540	N/A	PC	General & Unrestricted	10,000
ASPIRE OF ILLINOIS1815 S WOLF RD HILLSIDE, IL 60162	N/A	PC	General & Unrestricted	5,000
BARRINGTON AREA COUNCIL ON AGING INC 6000 GARLANDS LN STE 100 BARRINGTON, IL 60010	N/A	PC	General & Unrestricted	7,500
<b>Total . . . . . ▶ 3a</b>				800,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BIG BROTHERS BIG SISTERS OF SOUTH CENTRAL WISCONSI PO BOX 655 DELAVAN, WI 53115	N/A	PC	General & Unrestricted	5,000
BUTTERFIELD COUNTRY CLUB SCHOLARSHIP PROGRAM 16 CHARLESTON RD HINSDALE, IL 60521	N/A	PC	General & Unrestricted	5,000
BY THE HAND CLUB FOR KIDS 1000 N SEDGWICK ST CHICAGO, IL 60610	N/A	PC	General & Unrestricted	100,000
<b>Total . . . . . ▶ 3a</b>				800,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CLEARBROOK1835 W CENTRAL RD ARLINGTON HEIGHTS, IL 60005	N/A	PC	General & Unrestricted	75,000
EMMAUS CORRESPONDENCE SCHOOL- ST LOUIS 6425 COLVER AVE SAINT LOUIS, MO 63123	N/A	PC	General & Unrestricted	25,000
HARVEST BIBLE CHAPEL 800 ROHLWING RD ROLLING MEADOWS, IL 60008	N/A	PC	General & Unrestricted	48,000
<b>Total . . . . . ▶ 3a</b>				800,000



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HOOVED ANIMAL RESCUE & PROTECTION SOCIETY 244 OAK KNOLL RD BARRINGTON, IL 60010	N/A	PC	General & Unrestricted	10,000
JONAHRE FOUNDATION 1000 HART RD STE 300 BARRINGTON, IL 60010	N/A	PC	General & Unrestricted	20,000
JOURNEYCARE FOUNDATION INC 2050 CLAIRE CT GLENVIEW, IL 60025	N/A	PC	General & Unrestricted	50,000
<b>Total . . . . . ▶ 3a</b>				800,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
KENNETH YOUNG CENTER 1001 ROHLWING RD ELK GROVE VLG, IL 60007	N/A	PC	General & Unrestricted	20,000
LUTHERAN CHURCH OF ST LUKE 410 S RUSH ST ITASCA, IL 60143	N/A	PC	General & Unrestricted	7,500
MARKLUND CHILDRENS HOME 1S450 WYATT DR GENEVA, IL 60134	N/A	PC	General & Unrestricted	30,000
<b>Total . . . . . ▶ 3a</b>				800,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
MISERICORDIA HOME 6300 N RIDGE AVE CHICAGO, IL 60660	N/A	PC	General & Unrestricted	100,000
MY CONTAGIOUS GENEROSITY INC 3448 E REDFIELD RD GILBERT, AZ 85234	N/A	PC	General & Unrestricted	5,000
NORTHWEST COMMUNITY HOSPITAL FOUNDATION 3040 W SALT CREEK LN ARLINGTON HTS, IL 60005	N/A	PC	General & Unrestricted	75,000
<b>Total . . . . . ▶ 3a</b>				800,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NORTHWEST CULTURAL COUNCIL INC PO BOX 690 BARRINGTON, IL 60011	N/A	PC	General & Unrestricted	10,000
PADS TO HOPE INC1140 E NW HWY PALATINE, IL 60074	N/A	PC	General & Unrestricted	10,000
PARTNERS FOR OUR COMMUNITIES 1585 N RAND RD PALATINE, IL 60074	N/A	PC	General & Unrestricted	15,000
<b>Total . . . . . ▶ 3a</b>				800,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PHEASANTS FOREVER INC 1783 BUERKLE CIR SAINT PAUL, MN 55110	N/A	PC	General & Unrestricted	6,000
PHI ALPHA DELTA INTERNATIONAL FOUNDATION 606 BALTIMORE AVE STE 303 TOWSON, MD 21204	N/A	PC	General & Unrestricted	5,000
ROSELLE HISTORICAL FOUNDATION 39 E ELM AVE ROSELLE, IL 60172	N/A	PC	General & Unrestricted	10,000
<b>Total . . . . . ▶ 3a</b>				800,000


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SAINT PETER LUTHERAN CHURCH 202 E SCHAUMBURG RD SCHAUMBURG, IL 60194	N/A	PC	General & Unrestricted	7,500
SBAC EMPOWERMENT FOUNDATION 20 S CLARK ST STE 500 CHICAGO, IL 60603	N/A	PC	General & Unrestricted	20,000
SHRINERS HOSPITALS FOR CHILDREN 2900 N ROCKY POINT DR TAMPA, FL 33607	N/A	PC	General & Unrestricted	1,500
<b>Total . . . . . ▶ 3a</b>				800,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SHRINERS HOSPITALS FOR CHILDREN 2900 N ROCKY POINT DR TAMPA, FL 33607	N/A	PC	Patsy's Program: Little Pops of Love	50,000
SOCIETY OF ST VINCENT DE PAUL ARCHDIOCESE OF CHICA 2815 N KIMBALL AVE CHICAGO, IL 60618	N/A	PC	General & Unrestricted	2,500
SPECIAL FORCES FOUNDATION 6885 MESA RIDGE PKWY STE 263 FOUNTAIN, CO 80817	N/A	PC	General & Unrestricted	5,000
<b>Total . . . . . ▶ 3a</b>				800,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SS CYRIL & METHODIUS PARISH & SCHOOL 608 SOBIESKI ST LEMONT, IL 60439	N/A	PC	General & Unrestricted	2,500
THE BEACON PLACE NFP 603 S MCALISTER AVE WAUKEGAN, IL 60085	N/A	PC	General & Unrestricted	5,000
THE CLEVELAND CLINIC FOUNDATION PO BOX 931517 CLEVELAND, OH 44193	N/A	PC	General & Unrestricted	1,000
<b>Total . . . . . ▶ 3a</b>				800,000



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
URBAN NON PUBLIC EDUCATION FUND 1550 S STATE ST STE 107 CHICAGO, IL 60605	N/A	PC	General & Unrestricted	5,000
VETERANS FOUNDATION OF ILLINOIS INC 3300 CONSTITUTION DR SPRINGFIELD, IL 62711	N/A	PC	General & Unrestricted	15,000
WESTERN DUPAGE SPECIAL RECREATION ASSOCIATION FOUN 116 N SCHMALE RD CAROL STREAM, IL 60188	N/A	PC	General & Unrestricted	30,000
<b>Total . . . . . ▶ 3a</b>				800,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YOUNG LIFE EASTERN DUPAGE 836 W HINSDALE HINSDALE, IL 60521	N/A	PC	General & Unrestricted	1,000
<b>Total</b> . . . . .  <b>3a</b>				800,000

**TY 2019 Accounting Fees Schedule****Name:** The FJK Private Foundation**EIN:** 45-2741384

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
AUDIT FEES	18,098			18,098

**TY 2019 Compensation Explanation****Name:** The FJK Private Foundation**EIN:** 45-2741384

Person Name	Explanation
William W Thorsness	*William W Thorsness, Director of the FJK private foundation (the "foundation"), is a partner at the law firm Lillig & Thorsness, Ltd, a disqualified person with respect to the foundation, which provides legal services to the foundation. in the taxable year ending December 31, 2019, the foundation paid \$3,843 for legal services rendered by such disqualified person as reported in Part I, line 16a. such advisory firm billed the foundation at the same rate or below the rate it charges its other clients.

**Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.**

## **TY 2019 Depreciation Schedule**

**Name:** The FJK Private Foundation

**EIN:** 45-2741384

## TY 2019 Investments Corporate Bonds Schedule

**Name:** The FJK Private Foundation

**EIN:** 45-2741384

### Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
AMERICAN EXPRESS CENTRN CD - 2	19,676	20,026
CIT BANK CD - 2.650% - 07/23/2	100,000	101,477
CIT BANK CD - 2.700% - 08/12/2	100,000	101,606
CIT BANK CD - 2.700% - 10/15/2	50,000	50,883
DISCOVER BANK CD - 2.550% - 10	50,000	50,750
DISCOVER BANK CD - 2.700% - 03	100,000	101,224
ENERBANK USA CD - 2.750% - 10/	150,000	153,888
FIRST MERCHANTS CORPORATION CD	200,000	200,922
FIRST UNITED BANK CD - 3.250%	250,000	250,273
GE CAPITAL BK CD - 2.900% - 08	100,000	102,452
GE CAPITAL BK CD - 2.950% - 07	100,000	102,426
GE CAPITAL BK CD - 2.950% - 10	50,000	51,489
GOLDMAN SACHS GROUP CD - 1.850	9,465	9,988
GOLDMAN SACHS GROUP CD - 2.200	19,725	20,147
GOLDMAN SACHS GROUP - 2.3 07/2	200,000	200,606
GOLDMAN SACHS GROUP - 2.3 08/1	50,000	50,165
GOLDMAN SACHS GROUP CD - 2.650	19,942	20,470
GOLDMAN SACHS GROUP CD - 2.800	19,966	20,713
HSBC BANK USA CD - 2.000% - 08	9,314	10,003
HSBC BANK USA CD - 2.000% - 09	235,000	234,429

**Investments Corporate Bonds Schedule**

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
JP MORGAN CHASE CD - 2.750% -	19,682	20,033
MORGAN STANLEY CD - 2.550% - 0	100,000	100,205
MORGAN STANLEY CD - 2.750% - 0	100,000	102,189
SALLIE MAE BANK CD - 2.650% -	100,000	101,759
SYNCHRONY FINANCIAL CD - 2.350	50,000	50,178
TOYOTA MTR CORP CD - 2.750% -	250,000	250,342

TY 2019 Investments Corporate Stock Schedule

Name: The FJK Private Foundation  
 EIN: 45-2741384

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ABBOTT LABS	31,771	62,713
ALEXION PHARMACEUTICALS, INC	43,816	46,937
ALLSTATE CORP	35,792	58,586
BERKSHIRE HATHAWAY INC. CLASS	34,512	54,360
BMY CONTINGENT VALUE RIGHTS	1,146	1,619
BRISTOL-MYERS SQUIBB CO	30,074	34,534
CAUSEWAY INTERNATIONAL VALUE F	440,108	426,796
COMCAST CORP	34,891	50,007
COMMUNICAT SVS SLCT SEC SPDR E	116,768	137,239
CONSUMER DISCRETIONARY SELECT	37,952	52,300
CVS CAREMARK CORP	62,413	88,331
EBAY INC	40,865	38,132
ELI LILLY & CO	54,236	61,509
EXELON CORPORATION	11,965	17,005
FLEXSHARES GLOBAL QUALITY REAL	399,800	418,349
FLEXSHARES GLOBAL UPSTREAM NAT	382,587	421,975
FLEXSHARES IBOXX 3-YEAR TARGET	554,374	563,264
FLEXSHARES STOXX GLOBAL BROAD	393,813	435,835
FLEXSHS MORNINGSTAR DVLP MKT E	579,804	588,331
FLEXSHS MORNINGSTAR EMERGING M	81,285	80,333
GEN DYNAMICS CP	45,077	49,025
INTERCONTINENTAL EXCHANGE, INC	38,363	71,171
JP MORGAN CHASE	36,743	76,112
KLA TENCOR CORP	47,701	80,355
LOWES COMPANIES INC	26,156	42,874
MASCO CORP	46,302	50,198
MATERIALS SELECT SECTOR SPDR	40,664	49,136
MICROCHIP TECHNOLOGY INC	24,236	58,015
MICROSOFT CORP	31,407	85,316
NORFOLK SOUTHERN CORP	22,140	41,932



## Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
NORTHERN FUNDS MID CAP INDEX	435,867	437,942
ORACLE CORP	37,929	50,172
PEPSICO INC	22,046	28,974
PFIZER INC	45,947	41,139
PROCTER GAMBLE CO	22,162	32,974
REAL ESTATE SELECT SECTOR SPDR	47,076	54,718
SALESFORCE.COM	21,564	51,882
SEI CORE FIXED INCOME FUND	374,431	388,142
SEI HIGH YIELD BOND FUND	1,135,164	1,105,373
SELECT SECTOR SPDR ENERGY FUND	65,586	69,406
SELECT SECTOR SPDR INDUSTRIAL	31,130	31,855
THE COCA-COLA CO	32,065	41,679
TJX COMPANIES INC	32,045	56,114
VAN ECK EMERGING MARKETS FUND	72,139	80,954
VANGUARD SM-CAP ETF	229,892	253,264
VANGUARD TOTAL STOCK MARKET ET	286,711	323,640
VISA INC	31,835	66,517
WALT DISNEY HOLDINGS CO	34,973	54,092
WCM FOCUSED INTL GROWTH FUNDS	404,949	510,802

**TY 2019 Investments Government Obligations Schedule****Name:** The FJK Private Foundation**EIN:** 45-2741384**US Government Securities - End  
of Year Book Value:**

3,382,726

**US Government Securities - End  
of Year Fair Market Value:**

3,360,730

**State & Local Government  
Securities - End of Year Book  
Value:****State & Local Government  
Securities - End of Year Fair  
Market Value:**

**TY 2019 Legal Fees Schedule****Name:** The FJK Private Foundation**EIN:** 45-2741384

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
General Consultations	3,843			3,843

## TY 2019 Other Assets Schedule

**Name:** The FJK Private Foundation

**EIN:** 45-2741384

### Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
PRI - JOURNEY CARE FOUNDATION		250,000	250,000

**TY 2019 Other Expenses Schedule****Name:** The FJK Private Foundation**EIN:** 45-2741384**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Administrative Fees	39,097			39,097
Indemnification Insurance	3,069			3,069
State or Local Filing Fees	50			50

**TY 2019 Other Professional Fees Schedule****Name:** The FJK Private Foundation**EIN:** 45-2741384

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Investment Management Services	123,122	123,122		

**TY 2019 Taxes Schedule****Name:** The FJK Private Foundation**EIN:** 45-2741384

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
990-PF Estimated Tax for 2019	3,600			
Foreign Tax Paid	505	505		

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491309013010	
<div>Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small></div>		<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to <a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a> for the latest information.</div>			<div>OMB No. 1545-0047</div> <div>2019</div>
Name of the organization The FJK Private Foundation				Employer identification number 45-2741384	
Organization type (check one):					
Filers of:                      Section:					
Form 990 or 990-EZ		<input type="checkbox"/> 501(c)( ) (enter number) organization			
		<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation			
		<input type="checkbox"/> 527 political organization			
Form 990-PF		<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation			
		<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation			
		<input type="checkbox"/> 501(c)(3) taxable private foundation			
Check if your organization is covered by the <b>General Rule</b> or a <b>Special Rule</b> .					
<b>Note:</b> Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General Rule					
<input checked="" type="checkbox"/> For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules					
<input type="checkbox"/> For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> / <sub>3</sub> % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
<input type="checkbox"/> For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
<input type="checkbox"/> For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ _____					
<b>Caution:</b> An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it <b>must</b> answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					
For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.		Cat. No. 30613X		Schedule B (Form 990, 990-EZ, or 990-PF) (2019)	



Name of organization  
The FJK Private FoundationEmployer identification number  
45-2741384**Part I****Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Frank J Kehoe Trust 1 W Northwest Highway Palatine, IL 60067	\$ 600,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization The FJK Private Foundation	Employer identification number 45-2741384
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions). Use duplicate copies of Part II if additional space is needed.</small>	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	

Name of organization The FJK Private Foundation	Employer identification number 45-2741384
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<b>Part III</b>	<b>Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____</b> Use duplicate copies of Part III if additional space is needed.
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
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	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
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