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Form **990-PF**
Department of the Treasury
Internal Revenue Service

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.**

OMB No. 1545-0052

2019

Open to Public Inspection

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

Name of foundation
MITSUBISHI ELECTRIC AMERICA FOUNDATION

A Employer identification number
52-1700855

Number and street (or P.O. box number if mail is not delivered to street address)
1300 WILSON BOULEVARD SUITE 210

Room/suite

B Telephone number (see instructions)
(703) 276-8149

City or town, state or province, country, and ZIP or foreign postal code
ARLINGTON, VA 22209

C If exemption application is pending, check here ▶ ☐

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here..... ▶ ☐
2. Foreign organizations meeting the 85% test, check here and attach computation ... ▶ ☐

H Check type of organization: ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ..... ▶ ☐

I Fair market value of all assets at end of year (from Part II, col. (c), *line 16)* ▶$ 26,277,458

J Accounting method: ☐ Cash ☑ Accrual ☐ 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 ..... ▶ ☐

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)	470,497			
	2	Check ▶ ☐ if the foundation is **not** required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	672,871	672,871		
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10	570,406			
	b	Gross sales price for all assets on line 6a 4,118,707				
	7	Capital gain net income (from Part IV, line 2)		570,406		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less: Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	146,080	0	0	
	12	**Total.** Add lines 1 through 11	1,859,854	1,243,277	0	
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc.	165,569	0	0	133,023
	14	Other employee salaries and wages	65,529	0	0	52,648
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)				
	b	Accounting fees (attach schedule)				
	c	Other professional fees (attach schedule)	107,940	94,698	0	13,242
	17	Interest				
	18	Taxes (attach schedule) (see instructions)	91,990	6,823	0	0
	19	Depreciation (attach schedule) and depletion				
	20	Occupancy	25,456	0	0	23,309
	21	Travel, conferences, and meetings	34,801	0	0	34,801
	22	Printing and publications	5,189	0	0	5,189
	23	Other expenses (attach schedule)	76,087	0	0	65,689
	24	**Total operating and administrative expenses.** Add lines 13 through 23	572,561	101,521	0	327,901
	25	Contributions, gifts, grants paid	1,091,334			1,091,334
	26	**Total expenses and disbursements.** Add lines 24 and 25	1,663,895	101,521	0	1,419,235
	27	Subtract line 26 from line 12:				
	a	**Excess of revenue over expenses and disbursements**	195,959			
	b	**Net investment income** (if negative, enter -0-)		1,141,756		
	c	**Adjusted net income** (if negative, enter -0-)			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 (a) Book Value	End of year (b) Book Value	End of year (c) Fair Market Value
Assets	1 Cash—non-interest-bearing	339,998	241,829	241,829
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ 32,614			
	Less: allowance for doubtful accounts ▶		32,614	32,614
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)	1,966,396	2,676,656	2,676,656
	b Investments—corporate stock (attach schedule)	7,256,392	17,267,653	17,267,653
	c Investments—corporate bonds (attach schedule)	2,513,862	1,697,575	1,697,575
	11 Investments—land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	3,737,406	4,351,814	4,351,814
	14 Land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule) ▶			
	15 Other assets (describe ▶)	9,317	9,317	9,317
	16 **Total assets** (to be completed by all filers—see the instructions. Also, see page 1, item I)	15,823,371	26,277,458	26,277,458
Liabilities	17 Accounts payable and accrued expenses		57,972	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)	0	147,044	
	23 **Total liabilities**(add lines 17 through 22)	0	205,016	
Net Assets or Fund Balances	**Foundations that follow FASB ASC 958, check here ▶ ☑ and complete lines 24, 25, 29 and 30.**			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 **Total net assets or fund balances** (see instructions)	15,823,371	26,072,442	
	30 **Total liabilities and net assets/fund balances** (see instructions)	15,823,371	26,277,458	

Part III Analysis of Changes in Net Assets or Fund Balances

1	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)	1	15,823,371
2	Enter amount from Part I, line 27a	2	195,959
3	Other increases not included in line 2 (itemize) ▶	3	10,053,112
4	Add lines 1, 2, and 3	4	26,072,442
5	Decreases 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, column (b), line 29	6	26,072,442

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.)
1 a	PUBLICLY TRADED SECURITIES	P		
b	CAPITAL GAIN DISTRIBUTION	P		
c				
d				
e				

	(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)
a	4,118,707		3,549,940	568,767
b				1,639
c				
d				
e				

	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	
a				568,767
b				1,639
c				
d				
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	570,406
3	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	570,406

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	1,274,486	23,901,520	0.053322
2017	1,159,580	22,881,501	0.050678
2016	1,086,765	21,044,163	0.051642
2015	1,165,090	21,345,010	0.054584
2014	1,141,683	21,560,557	0.052952

2	**Total** of line 1, column (d)	2	0.263178
3	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	0.052636
4	Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	24,171,681
5	Multiply line 4 by line 3	5	1,272,301
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	11,418
7	Add lines 5 and 6	7	1,283,719
8	Enter qualifying distributions from Part XII, line 4	8	1,419,235

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)

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter: _____ **(attach copy of letter if necessary–see instructions)**		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☑ and enter 1% of Part I, line 27b	1	11,418
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2	3	11,418
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	**Tax based on investment income.** Subtract line 4 from line 3. If zero or less, enter -0-	5	11,418
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019 — 6a: 8,909		
b	Exempt foreign organizations—tax withheld at source — 6b:		
c	Tax paid with application for extension of time to file (Form 8868) — 6c: 7,000		
d	Backup withholding erroneously withheld — 6d: 0		
7	Total credits and payments. Add lines 6a through 6d	7	15,909
8	Enter any **penalty** for underpayment of estimated tax. Check here ☑ if Form 2220 is attached.	8	73
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	4,418
11	Enter the amount of line 10 to be: **Credited to 2020 estimated tax** ▶ 4,418 **Refunded** ▶	11	0

Part VII-A Statements Regarding Activities

			Yes	No
1a	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?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition)	1b		No
	*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.*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: **(1)** On the foundation. ▶ $ 0 **(2)** On foundation managers. ▶ $ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ $ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities.*	2		No
3	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? *If "Yes," attach a conformed copy of the changes*	3		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T.*	5		No
6	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?	6	Yes	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col. (c), and Part XV.*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶VA			
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? *If "No," attach explanation* .	8b	Yes	
9	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. If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses.*	10		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
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	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ WWW.MEAF.ORG

14 The books are in care of ▶ THE ORGANIZATION Telephone no. ▶ (714) 220-2500

Located at ▶ 1300 WILSON BOULEVARD SUITE 210 ARLINGTON VA ZIP+4 ▶ 22209

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** —check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the year ▶ 15

16	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?	16		No

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.

1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	☐ Yes	☑	No
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes	☑	No
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☑ Yes	☐	No
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☑ Yes	☐	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)?	☐ Yes	☑	No
	(6) Agree to pay money or property to a government official? (**Exception.** 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.)	☐ Yes	☑	No
b	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	1b		No
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	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		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a	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?	☐ Yes	☑	No
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
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.)	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. ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes	☑	No
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.)*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		No

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

			Yes	No
5a	During the year did the foundation pay or incur any amount to:			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☑ No		
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☑ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☑ No		
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	☐ Yes ☑ 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?	☐ Yes ☑ No		
b	If any answer is "Yes" to 5a(1)–(5), did **any** 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	5b		
	Organizations relying on a current notice regarding disaster assistance check here ▶	☐		
c	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?	☐ Yes ☐ No		
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☑ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☑ No		
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		
8	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?	☐ Yes ☑ No		

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(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
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(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
TARA HAVLICEK 1300 WILSON BOULEVARD SUITE 210 ARLINGTON, VA 22209	PROGRAM OFFICER 40.00	65,529	0	0

Total number of other employees paid over $50,000 ▶ 0

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
MORGAN STANLEY SMITH BARNEY LLC 1 NEW YORK PLAZA 12TH FLOOR NEW YORK, NY 10004	INVESTMENT MANAGEMENT FEES	94,698
Total number of others receiving over $50,000 for professional services. ▶		0

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

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

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
1	
2	
All other program-related investments. See instructions. 3	0
Total. Add lines 1 through 3 ▶	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	24,141,171
b	Average of monthly cash balances	1b	389,290
c	Fair market value of all other assets (see instructions)	1c	9,317
d	**Total** (add lines 1a, b, and c)	1d	24,539,778
e	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	24,539,778
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	368,097
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3. Enter here and on Part V, line 4	5	24,171,681
6	**Minimum investment return.** Enter 5% of line 5	6	1,208,584

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.)

1	Minimum investment return from Part X, line 6			1	1,208,584
2a	Tax on investment income for 2019 from Part VI, line 5	2a	11,418		
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b			
c	Add lines 2a and 2b			2c	11,418
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	1,197,166
4	Recoveries of amounts treated as qualifying distributions			4	146,080
5	Add lines 3 and 4			5	1,343,246
6	Deduction from distributable amount (see instructions)			6	0
7	**Distributable amount** as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1			7	1,343,246

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	1,419,235
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 charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	**Qualifying distributions.** Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,419,235
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions	5	11,418
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	1,407,817

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
1 Distributable amount for 2019 from Part XI, line 7				1,343,246
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			0	
b Total for prior years: 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014. 0				
b From 2015. 0				
c From 2016. 42,063				
d From 2017. 30,399				
e From 2018. 112,080				
f **Total** of lines 3a through e.	184,542			
4 Qualifying distributions for 2019 from Part XII, line 4: ▶ $ 1,419,235				
a Applied to 2018, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				1,343,246
e Remaining amount distributed out of corpus	75,989			
5 Excess distributions carryover applied to 2019.	0			0
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 **Enter the net total of each column as indicated below:**				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	260,531			
b Prior years' undistributed income. Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b. Taxable amount —see instructions		0		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . . .	0			
9 **Excess distributions carryover to 2020.** Subtract lines 7 and 8 from line 6a	260,531			
10 Analysis of line 9:				
a Excess from 2015. . . . 0				
b Excess from 2016. . . . 42,063				
c Excess from 2017. . . . 30,399				
d Excess from 2018. . . . 112,080				
e Excess from 2019. . . . 75,989				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

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)

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
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 alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . .					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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).)

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 e-mail address of the person to whom applications should be addressed:

KEVIN WEBB
1300 WILSON BOULEVARD SUITE 210
ARLINGTON, VA 22209
(703) 276-8240
WWW.MEAF.ORG

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

CONCEPT PAPERS; FORM AND INFORMATION CAN BE FOUND AT WWW.MEAF.ORG

c Any submission deadlines:

NATIONAL GRANTS: JULY 15; MATCHING GRANTS: YEAR ROUND

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

GRANTS LIMITED TO PROGRAMS BENEFITING DISABLED YOUNG PEOPLE

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
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				1,091,334
b *Approved for future payment*				
Total . . . . . ▶ **3b**				0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	672,871	
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			18	570,406	
9 Net income or (loss) from special events:					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a GRANT RECOVERIES					146,080
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0		1,243,277	146,080
13 **Total.** Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)				13	1,389,357

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). (See instructions.)
11A	FOUNDATION RECEIVED GRANT RECOVERIES.

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

			Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of:			
	(1) Cash	1a(1)		No
	(2) Other assets	1a(2)		No
b	Other transactions:			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
	(3) Rental of facilities, equipment, or other assets	1b(3)		No
	(4) Reimbursement arrangements	1b(4)		No
	(5) Loans or loan guarantees	1b(5)		No
	(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

(a) Line No.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

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

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

******	2020-11-13	******
Signature of officer or trustee	Date	Title

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

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
KATHERINE POPPEN				P01696738
Firm's name ▶ DELOITTE TAX LLP				Firm's EIN ▶86-1065772
Firm's address ▶ 50 SOUTH SIXTH STREET MINNEAPOLIS, MN 55402				Phone no. (612) 397-4000

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
MICHAEL CORBO 5900-A KATELLA AVENUE CYPRESS, CA 90630	DIRECTOR 0.50	0	0	0
KEIJIRO HORA 5900-A KATELLA AVENUE CYPRESS, CA 90630	PRESIDENT AND DIRECTOR 1.00	0	0	0
MICHAEL DELANO 15603 CENTENNIAL DRIVE NORTHVILLE, MI 48168	DIRECTOR 0.50	0	0	0
MAKOTO KONO 5900-A KATELLA AVENUE CYPRESS, CA 90630	TREASURER 1.00	0	0	0
PERRY PAPPOUS 5900-A KATELLA AVENUE CYPRESS, CA 90630	DIRECTOR 0.50	0	0	0
DAVID REBMANN 500 CORPORATE WOODS PARKWAY VERNON HILLS, IL 60061	DIRECTOR 0.50	0	0	0
RICHARD WATERS 201 BROADWAY EIGHTH FLOOR CAMBRIDGE, MA 02139	DIRECTOR 0.50	0	0	0
YURI NAKAGAWA 5900-A KATELLA AVENUE CYPRESS, CA 90630	ASSISTANT TREASURER 1.00	0	0	0
KEVIN WEBB 1300 WILSON BOULEVARD SUITE 210 ARLINGTON, VA 22209	SR DIRECTOR 40.00	165,569	0	0
MITSUHARU KIWADA 5900-A KATELLA AVENUE CYPRESS, CA 90630	DIRECTOR 0.50	0	0	0
HELAINE LOBMAN 116 VILLAGE BOULEVARD SUITE 200 PRINCETON, NJ 08540	SECRETARY 1.00	0	0	0
PETER SALAVANTIS 1300 WILSON BOULEVARD SUITE 210 ARLINGTON, VA 22209	ASSISTANT SECRETARY/ TREASURER 1.00	0	0	0
JASON DEMPSEY 4773 BETHANY ROAD MASON, OH 45040	DIRECTOR 0.50	0	0	0
CHRIS GERDES 4773 BETHANY ROAD MASON, OH 45040	DIRECTOR 0.50	0	0	0
BRIAN HEERY 530 KEYSTONE DRIVE WARRENDALE, PA 15086	DIRECTOR 0.50	0	0	0

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week **(b)** devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	Expense account, **(e)** other allowances
MARGIE HARVEY 5900-A KATELLA AVENUE CYPRESS, CA 90630	DIRECTOR 0.50	0	0	0
TAKESHI SUGIYAMA 5900-A KATELLA AVENUE CYPRESS, CA 90630	HONORARY DIRECTOR 0.50	0	0	0

Form 990PF Part XV Line 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
a *Paid during the year*				
4 PAWS FOR ABILITY INC 253 DAYTON AVENUE XENIA, OH 453852831		PC	GENERAL SUPPORT	500
ACCESSURF HAWAII INCPO BOX 15152 HONOLULU, HI 968305152		PC	GENERAL SUPPORT	180
ALEXS LEMONADE STAND FOUNDATION 111 PRESIDENTIAL BOULEVARD STE 203 BALA CYNWYD, PA 190041013		PC	GENERAL SUPPORT	2,350
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
ALEX'S LEMONADE STAND FOUNDATION 111 PRESIDENTIAL BOULEVARD STE 203 BALA CYNWYD, PA 190041013		PC	GENERAL SUPPORT	525
ALZHEIMER'S ASSOCIATION 41 PERIMETER CENTER EAST SUITE 550 ATLANTA, GA 30346		PC	GENERAL SUPPORT	900
ALZHEIMER'S ASSOCIATION 41 PERIMETER CENTER EAST SUITE 550 ATLANTA, GA 30346		PC	GENERAL SUPPORT	250
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION INC 225 N MICHIGAN AVENUE FL 17 CHICAGO, IL 606017652		PC	GENERAL SUPPORT	100
ALZHEIMER'S DISEASE AND RELATED DISORDERS ASSOCIATION INC 225 N MICHIGAN AVENUE FL 17 CHICAGO, IL 606017652		PC	GENERAL SUPPORT	60
AMERICAN ASSOCIATION OF PEOPLE WITH DISABILITIES 2013 H STREET NW 5TH FL WASHINGTON, DC 200064201		PC	GENERAL SUPPORT	20,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
AMERICAN CANCER SOCIETY PO BOX 22718 OKLAHOMA CITY, OK 73123		PC	GENERAL SUPPORT	106
AMERICAN CANCER SOCIETY PO BOX 22718 OKLAHOMA CITY, OK 73123		PC	GENERAL SUPPORT	105
AMERICAN DIABETES ASSOCIATION 2451 CRYSTAL DRIVE ARLINGTON, VA 222024804		PC	GENERAL SUPPORT	100
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVENUE DALLAS, TX 752315129		PC	GENERAL SUPPORT	1,160
AMERICAN HEART ASSOCIATION INC 7272 GREENVILLE AVENUE DALLAS, TX 752315129		PC	GENERAL SUPPORT	150
AMERICAN HEART ASSOCIATION INC 7272 GREENVILLE AVENUE DALLAS, TX 752315129		PC	GENERAL SUPPORT	60
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
AMYOTROPHIC LATERAL SCLEROSIS ASSOCIATION 416 LINCOLN AVENUE MILLVALE, PA 152092670		PC	GENERAL SUPPORT	50
ARC OF THE UNITED STATES 1825 K STREET NW SUITE 1200 WASHINGTON, DC 20006		PC	GENERAL SUPPORT	30,000
ARC OF THE UNITED STATES 1825 K STREET NW SUITE 1200 WASHINGTON, DC 20006		PC	GENERAL SUPPORT	31,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
ATLANTA HUMANE SOCIETY 981 HOWELL MILL ROAD NW ATLANTA, GA 303185512		PC	GENERAL SUPPORT	640
AUTISM SPEAKS INC 1 E 33RD STREET FL 4 NEW YORK, NY 100165011		PC	GENERAL SUPPORT	25
AUTISM SPEAKS INC 1 E 33RD STREET FL 4 NEW YORK, NY 100165011		PC	GENERAL SUPPORT	25
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
AUTISM TREE PROJECT INC 3428 HUGO STREET SAN DIEGO, CA 921062149		PC	GENERAL SUPPORT	524
BE THE MATCH FOUNDATION 500 N 5TH STREET MINNEAPOLIS, MN 554011206		PC	GENERAL SUPPORT	100
BLUE STAR RECYCLERSPO BOX 64435 COLORADO SPRINGS, CO 809624435		PC	GENERAL SUPPORT	1,430
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
BLUE STAR RECYCLERS 100 TALAMINE COURT COLORADO SPRINGS, CO 80907		PC	GENERAL SUPPORT	70,000
BLUE STAR RECYCLERS 100 TALAMINE COURT COLORADO SPRINGS, CO 80907		PC	GENERAL SUPPORT	60,000
BLUE STAR RECYCLERS 100 TALAMINE COURT COLORADO SPRINGS, CO 80907		PC	GENERAL SUPPORT	250
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
BOSTON CHILDREN'S MUSEUM 308 CONGRESS STREET BOSTON, MA 022101016		PC	GENERAL SUPPORT	1,250
BOSTON COLLEGE 220 FULTON HALL 140 COMMONWEALTH AVENUE CHESTNUT HILL, MA 024673819		PC	GENERAL SUPPORT	1,500
BUFFALO TRACE CHILDRENS ADVOCACY CENTER INC 224 LIMESTONE STREET MAYSVILLE, KY 410561246		PC	GENERAL SUPPORT	1,500
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
BUTLER TECH FOUNDATION 3603 HAMILTON MIDDLETOWN ROAD HAMILTON, OH 45011		PC	GENERAL SUPPORT	40,000
BUTLER TECH FOUNDATION 3603 HAMILTON MIDDLETOWN ROAD HAMILTON, OH 45011		PC	GENERAL SUPPORT	35,000
CAMPUS SCHOOL PARENT NETWORK 535 ZACH CURLIN MEMPHIS, TN 381520001		PC	GENERAL SUPPORT	70
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
CANCER FIGHTERS UNITED RESOURCE CENTER INC 4209 US 62 MAYSVILLE, KY 410568527		PC	GENERAL SUPPORT	1,500
CARROLL SCHOOL CORP 25 BAKER BRIDGE ROAD LINCOLN, MA 017733104		PC	GENERAL SUPPORT	1,000
CARRY THE LOADPO BOX 261904 PLANO, TX 750261904		PC	GENERAL SUPPORT	200
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
CASA PROGRAM FOR BRACKEN FLEMING AND MASON COUNTIES INC PO BOX 226 FLEMINGSBURG, KY 410410226		PC	GENERAL SUPPORT	1,500
CEREBRAL PALSY ALLIANCE RESEARCH FOUNDATION INC 142 WEST 57TH STREET FLOOR 11 NEW YORK, NY 10019		PC	GENERAL SUPPORT	1,000
CEREBRAL PALSY ALLIANCE RESEARCH FOUNDATION INC 142 WEST 57TH STREET FLOOR 11 NEW YORK, NY 10019		PC	GENERAL SUPPORT	50
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
CHILD MIND INSTITUTE INC 101 E 56TH STREET NEW YORK, NY 100222661		PC	GENERAL SUPPORT	499
CHILDREN'S HEALTHCARE 1587 NORTHEAST EXPRESSWAY NE BROOKHAVEN, GA 303292401		PC	GENERAL SUPPORT	250
CINCINNATI CHILDREN'S HOSPITAL MEDICAL CENTER 3333 BURNET AVENUE MLC 9002 CINCINNATI, OH 452293039		PC	GENEAL SUPPORT	1,500
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
CIRCLE H INC4075 BRIDLE PATH LANE MAYSVILLE, KY 410567919		PC	GENERAL SUPPORT	2,000
CONCORD ACADEMY 4942 WALNUT GROVE ROAD MEMPHIS, TN 381172724		PC	GENERAL SUPPORT	1,367
CONCORD ACADEMY 4942 WALNUT GROVE ROAD MEMPHIS, TN 381172724		PC	GENERAL SUPPORT	780
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
COOKE SCHOOL21200 TAFT ROAD NORTHVILLE, MI 48167		PC	GENERAL SUPPORT	6,223
COOKE SCHOOL21200 TAFT ROAD NORTHVILLE, MI 48167		PC	GENERAL SUPPORT	300
CRAYONS TO COMPUTERS 1350 TENNESSEE AVENUE CINCINNATI, OH 45229		PC	GENERAL SUPPORT	1,700
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
CROHNS & COLITIS FOUNDATION OF AMERICA 733 THIRD AVENUE NEW YORK, NY 100173204		PC	GENERAL SUPPORT	1,000
CURE SMAFAMILIES OF SMA ELK GROVE VILLAGE, IL 600070000		PC	GENERAL SUPPORT	1,500
CYSTIC FIBROSIS FOUNDATION 4550 MONTGOMERY AVENUE BETHESDA, MD 208143304		PC	GENERAL SUPPORT	210
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
CYSTIC FIBROSIS FOUNDATION 4420 CARVER WOODS DRIVE CINCINNATI, OH 45242		PC	GENERAL SUPPORT	900
CYSTIC FIBROSIS FOUNDATION 3481 OFFICE PARK DRIVE DAYTON, OH 45439		PC	GENERAL SUPPORT	1,100
CYSTIC FIBROSIS FOUNDATION 3481 OFFICE PARK DRIVE DAYTON, OH 45439		PC	GENERAL SUPPORT	225
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
CYSTIC FIBROSIS FOUNDATION 3481 OFFICE PARK DRIVE DAYTON, OH 45439		PC	GENERAL SUPPORT	25
CYSTIC FIBROSIS FOUNDATION HEADQUARTERS 6931 ARLINGTON ROAD STE 200 BETHESDA, MD 208145269		PC	GENERAL SUPPORT	560
CYSTIC FIBROSIS FOUNDATION HEADQUARTERS 6931 ARLINGTON ROAD STE 200 BETHESDA, MD 208145269		PC	GENERAL SUPPORT	1,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
DOWN SYNDROME ASSOCIATION 644 LINN STREET STE 1128 CINCINNATI, OH 452031734		PC	GENERAL SUPPORT	2,000
DREAM PARTNERSHIP 3815 MARKET STREET CAMP HILL, PA 17011		PC	GENERAL SUPPORT	35,000
DREAM PARTNERSHIP 3815 MARKET STREET CAMP HILL, PA 17011		PC	GENERAL SUPPORT	40,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
DREAMS FOR SCHOOLS 4999 CASA LOMA AVENUE YORBA LINDA, CA 92886		PC	GENERAL SUPPORT	35,000
DREAMS FOR SCHOOLS 4999 CASA LOMA AVENUE YORBA LINDA, CA 92886		PC	GENERAL SUPPORT	40,000
EASTER SEALS DUPAGE AND THE FOX VALLEY REGION 830 S ADDISON AVENUE VILLA PARK, IL 601812877		PC	GENERAL SUPPORT	250
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
EASTER SEALS TRISTATE 2901 GILBERT AVENUE CINCINNATI, OH 452061211		PC	GENERAL SUPPORT	8,000
EASTER SEALS TRISTATE 2901 GILBERT AVENUE CINCINNATI, OH 452061211		PC	GENERAL SUPPORT	500
EXCEPTIONAL MINDS 13400 RIVERSIDE DRIVE SUITE 211 SHERMAN OAKS, CA 91423		PC	GENERAL SUPPORT	15,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
EXCEPTIONAL MINDS 13400 RIVERSIDE DRIVE SUITE 211 SHERMAN OAKS, CA 91423		PC	GENERAL SUPPORT	10,000
FAMILIES OF SPINAL MUSCULAR ATROPHY PO BOX 541012 CINCINNATI, OH 45254		PC	GENERAL SUPPORT	1,000
FAMILY PROMISE METROWEST 6 MULLIGAN STREET NATICK, MA 017604606		PC	GENERAL SUPPORT	320
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
FAMILY PROMISE METROWEST 6 MULLIGAN STREET NATICK, MA 017604606		PC	GENERAL SUPPORT	200
FISION NFP814 WICKER AVENUE STREAMWOOD, IL 60107		PC	GENERAL SUPPORT	1,750
FOLDS OF HONOR FOUNDATION 8551 N 125TH EAST AVENUE STE 100 OWASSO, OK 740552292		PC	GENERAL SUPPORT	52
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
FRIENDS OF GWINNETT COUNTY SENIORS PO BOX 1680 LAWRENCEVILLE, GA 300461680		PC	GENERAL SUPPORT	135
FRIENDS OF GWINNETT COUNTY SENIORS PO BOX 1680 LAWRENCEVILLE, GA 300461680		PC	GENERAL SUPPORT	100
FRIENDS OF GWINNETT COUNTY SENIORS PO BOX 1680 LAWRENCEVILLE, GA 300461680		PC	GENERAL SUPPORT	90
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
GALLAUDET UNIVERSITY 800 FLORIDA AVENUE NE WASHINGTON, DC 200023695		PC	GENERAL SUPPORT	35,000
GALLAUDET UNIVERSITY 800 FLORIDA AVENUE NE WASHINGTON, DC 200023695		PC	GENERAL SUPPORT	40,000
GIGI'S PLAYHOUSE INC 2350 W HIGGINS ROAD HOFFMAN ESTATES, IL 60169		PC	GENERAL SUPPORT	40,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
GIGI'S PLAYHOUSE INC 2350 W HIGGINS ROAD HOFFMAN ESTATES, IL 60169		PC	GENERAL SUPPORT	35,000
GIRLS ON THE RUN CHICAGO INC 1415 N DAYTON STREET STE 112 CHICAGO, IL 606422600		PC	GENERAL SUPPORT	200
GREATER CINCINNATI ADAPTED SPORTS CLUB 890 KYLES LANE COVINGTON, KY 410178122		PC	GENERAL SUPPORT	1,700
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
GRID ALTERNATIVES 1338 S FLOWER STREET LOS ANGELES, CA 90015		PC	GENERAL SUPPORT	5,000
GWINNETT CLEAN AND BEAUTIFUL 4300 SATELLITE BOULEVARD DULUTH, GA 300965068		PC	GENERAL SUPPORT	368
GWINNETT CLEAN AND BEAUTIFUL 4300 SATELLITE BOULEVARD DULUTH, GA 300965068		PC	GENERAL SUPPORT	180
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
GWINNETT CLEAN AND BEAUTIFUL 4300 SATELLITE BOULEVARD DULUTH, GA 300965068		PC	GENERAL SUPPORT	140
GWINNETT CLEAN AND BEAUTIFUL 4300 SATELLITE BOULEVARD DULUTH, GA 300965068		PC	GENERAL SUPPORT	140
GWINNETT SYMPHONY AND CHORUS 2847 COUNTRY HOUSE LANE BUFORD, GA 305197647		PC	GENERAL SUPPORT	400
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
HABITAT FOR HUMANITY METROWEST GREATER WORCESTER INC 640 LINCOLN STREET SUITE 100 WORCESTER, MA 016052058		PC	GENERAL SUPPORT	280
HELPING MAMAS 4487 PARK DRIVE SUITE A-1 NORCROSS, GA 30093		PC	GENERAL SUPPORT	1,400
HOPE SCHOOL7901 KNOTT AVENUE BUENA PARK, CA 906202687		PC	GENERAL SUPPORT	10,440
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
HUNTINGTON'S DISEASE SOCIETY OF AMERICA INC 505 8TH AVENUE RM 902 NEW YORK, NY 100186588		PC	GENERAL SUPPORT	500
INSTITUTE ON DISABILITYUCED UNIVERSITY OF NEW HAMPSHIRE 56 OLD SUNCOOK ROAD SUITE 2 CONCORD, NH 03301		PC	GENERAL SUPPORT	1,250
IRREVERENT WARRIORS INC 17061 ACENA DRIVE SAN DIEGO, CA 921282674		PC	GENERAL SUPPORT	360
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
JAGP - PITTSBURGH SAKURA PROJECT 2032 MURRAY AVENUE PITTSBURGH, PA 152172104		PC	GENERAL SUPPORT	1,500
JAMIES DREAM TEAM 2023 CYPRESS DRIVE MCKEESPORT, PA 15132		PC	GENERAL SUPPORT	1,000
JDRF INTERNATIONAL 200 VESSEY STREET 28 FL NEW YORK, NY 10281		PC	GENERAL SUPPORT	1,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
JESSIE REES FOUNDATION PO BOX 80667 RANCHO SANTA MARGARITA, CA 926880667		PC	GENERAL SUPPORT	1,000
JEWISH COMMUNITY CENTER OF STATEN ISLAND INC 1466 MANOR ROAD STATEN ISLAND, NY 103147027		PC	GENERAL SUPPORT	1,000
JOURNEY SCHOOL27102 FOXBOROUGH ALISO VIEJO, CA 92656		PC	GENERAL SUPPORT	1,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
KIDS INCLUDED TOGETHER 2820 ROOSEVELT ROAD STE 202 SAN DIEGO, CA 921066146		PC	GENERAL SUPPORT	10,000
KIDS INCLUDED TOGETHER 2820 ROOSEVELT ROAD STE 202 SAN DIEGO, CA 921066146		PC	GENERAL SUPPORT	15,000
LAWRENCEVILLE CO OP MINISTRY PO BOX 1328 LAWRENCEVILLE, GA 300461328		PC	GENERAL SUPPORT	950
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
LAWRENCEVILLE CO OP MINISTRY PO BOX 1328 LAWRENCEVILLE, GA 300461328		PC	GENERAL SUPPORT	480
LEUKEMIALYMPHOMA SOCIETY OF SW PA 333 EAST CARSON STREET SUITE 441 PITTSBURGH, PA 15219		PC	GENERAL SUPPORT	1,000
LEUKEMIALYMPHOMA SOCIETY OF SW PA 333 EAST CARSON STREET SUITE 441 PITTSBURGH, PA 15219		PC	GENERAL SUPPORT	100
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
LEUKEMIALYMPHOMA SOCIETY OF SW PA 333 EAST CARSON STREET SUITE 441 PITTSBURGH, PA 15219		PC	GENERAL SUPPORT	25
LIFE'SWORK OF WESTERN PA 1323 FORBES AVENUE PITTSBURGH, PA 15219		PC	GENERAL SUPPORT	1,000
LOCAL CIRCLES1523 SEYBURN STREET DETROIT, MI 482144215		PC	GENERAL SUPPORT	100
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
LUPUS FOUNDATION OF AMERICA INC MID SOUTH CHAPTER 4004 HILLSBORO PIKE STE 216B NASHVILLE, TN 372152722		PC	GENERAL SUPPORT	250
LUPUS FOUNDATION OF AMERICA INC MID SOUTH CHAPTER 4004 HILLSBORO PIKE STE 216B NASHVILLE, TN 372152722		PC	GENERAL SUPPORT	75
MADONNA LEARNING CENTER INCORPORATED 7007 POPLAR AVENUE GERMANTOWN, TN 381382632		PC	GENERAL SUPPORT	3,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
MADONNA LEARNING CENTER INCORPORATED 7007 POPLAR AVENUE GERMANTOWN, TN 381382632		PC	GENERAL SUPPORT	300
MAKE A WISH FOUNDATION OF GEORGIA INC 1775 THE EXCHANGE SE STE 200 ATLANTA, GA 303392016		PC	GENERAL SUPPORT	304
MARCH OF DIMES INC 1550 CRYSTAL DRIVE STE 1300 ARLINGTON, VA 222024144		PC	GENERAL SUPPORT	400
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
MARS HOME FOR YOUTHPO BOX 867 MARS, PA 160460867		PC	GENERAL SUPPORT	1,361
MAULI OLA FOUNDATION 1003 S COAST HIGHWAY LAGUNA BEACH, CA 926512966		PC	GENERAL SUPPORT	2,320
MAULI OLA FOUNDATION 1003 S COAST HIGHWAY LAGUNA BEACH, CA 926512966		PC	GENERAL SUPPORT	400
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
MEMORIAL SLOAN KETTERING CANCER CENTER 1275 YORK AVENUE NEW YORK, NY 100656007		PC	GENERAL SUPPORT	50
MID-SOUTH FOOD BANK 239 S DUDLEY STREET MEMPHIS, TN 381043203		PC	GENERAL SUPPORT	585
MID-SOUTH FOOD BANK 239 S DUDLEY STREET MEMPHIS, TN 381043203		PC	GENERAL SUPPORT	120
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
MID-SOUTH FOOD BANK 239 S DUDLEY STREET MEMPHIS, TN 381043203		PC	GENERAL SUPPORT	90
MIRACLE LEAGUE OF PLYMOUTH 40200 PINETREE DRIVE PLYMOUTH, MI 481704513		PC	GENERAL SUPPORT	1,011
MIRACLE LEAGUE OF PLYMOUTH 40200 PINETREE DRIVE PLYMOUTH, MI 481704513		PC	GENERAL SUPPORT	926
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
MUSCULAR DYSTROPHY ASSOCIATION 400 PENN CENTER BOULEVARD SUITE 524 PITTSBURGH, PA 15235		PC	GENERAL SUPPORT	1,000
MUSCULAR DYSTROPHY ASSOCIATION 222 SOUTH RIVERSIDE PLAZA STE 1500 CHICAGO, IL 606060000		PC	GENERAL SUPPORT	1,535
MUSCULAR DYSTROPHY ASSOCIATION 222 S RIVERSIDE PLAZA STE 1500 CHICAGO, IL 606066000		PC	GENERAL SUPPORT	500
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
MUSCULAR DYSTROPHY ASSOCIATION 222 S RIVERSIDE PLAZA STE 1500 CHICAGO, IL 606066000		PC	GENERAL SUPPORT	39
NATIONAL COUNCIL ON INDEPENDENT LIVING 2013 H STREET NW 6TH FLOOR WASHINGTON, DC 20006		PC	GENERAL SUPPORT	2,500
NATIONAL EATING DISORDERS ASSOCIATION 165 W 46TH STREET STE 402 NEW YORK, NY 100362522		PC	GENERAL SUPPORT	100
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
NATIONAL MULTIPLE SCLEROSIS SOCIETY 733 THIRD AVENUE NEW YORK, NY 100173288		PC	GENERAL SUPPORT	1,580
NATIONAL MULTIPLE SCLEROSIS SOCIETY 733 THIRD AVENUE NEW YORK, NY 100173288		PC	GENERAL SUPPORT	120
NATIONAL MULTIPLE SCLEROSIS SOCIETY 733 THIRD AVENUE NEW YORK, NY 100173288		PC	GENERAL SUPPORT	100
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
NATIONAL MULTIPLE SCLEROSIS SOCIETY 733 THIRD AVENUE NEW YORK, NY 100173288		PC	GENERAL SUPPORT	100
NIAGARA HABITAT FOR HUMANITY 1824 MAIN STREET NIAGARA FALLS, NY 14305		PC	GENERAL SUPPORT	240
NORTHERN ILLINOIS FOOD BANK 273 DEARBORN COURT GENEVA, IL 601343587		PC	GENERAL SUPPORT	325
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
NORTHERN ILLINOIS FOOD BANK 273 DEARBORN COURT GENEVA, IL 601343587		PC	GENERAL SUPPORT	300
NORTHERN SUBURBAN SPECIAL EDUCATION DISTRICT 760 RED OAK LANE HIGHLAND PARK, IL 60093		PC	GENERAL SUPPORT	2,250
NORTHERN SUBURBAN SPECIAL EDUCATION DISTRICT 760 RED OAK LANE HIGHLAND PARK, IL 60093		PC	GENERAL SUPPORT	550
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
NORTHERN SUBURBAN SPECIAL EDUCATION DISTRICT 760 RED OAK LANE HIGHLAND PARK, IL 60093		PC	GENERAL SUPPORT	500
NORTHWEST SUBURBAN SPECIAL EDUCATION ORGANIZATION 7N749 ROUTE 59 BARTLETT, IL 60103		PC	GENERAL SUPPORT	4,800
NORTHWEST SUBURBAN SPECIAL EDUCATION ORGANIZATION 7N749 ROUTE 59 BARTLETT, IL 60103		PC	GENERAL SUPPORT	2,500
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
OHIO VALLEY VOICES 6642 BRANCH HILL GUINEA PIKE LOVELAND, OH 451409141		PC	GENERAL SUPPORT	4,000
OLIVIA RAES LOVE YOUR HAPPY DAYS FOUNDATION INC 2118 BRICKTON XING BUFORD, GA 305186042		PC	GENERAL SUPPORT	240
OPERATION SHOEBOX 8360 E HIGHWAY 25 BELLEVIEW, FL 344204788		PC	GENERAL SUPPORT	1,310
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
OUR HEART SONG 5672 WINDCROFT DRIVE HUNTINGTN BCH, CA 926494857		PC	GENERAL SUPPORT	500
PAIGE PRINCESS FOUNDATION 912 MCBURNEY DRIVE LEBANON, OH 450362331		PC	GENERAL SUPPORT	500
PARENTS IN TOTO143 S MAIN STREET ZELIENOPLE, PA 160631149		PC	GENERAL SUPPORT	1,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
PARENTS IN TOTO143 S MAIN STREET ZELIENOPLE, PA 160631149		PC	GENERAL SUPPORT	1,000
PARTNERS FOR YOUTH WITH DISABILITIES 95 BERKELEY STREET SUITE 109 BOSTON, MA 021166229		PC	GENERAL SUPPORT	2,000
PARTNERS FOR YOUTH WITH DISABILITIES INC 5 MIDDLESEX AVENUE SUITE 307 SOMERVILLE, MA 02145		PC	GENERAL SUPPORT	20,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
PAWS WITH PURPOSEPO BOX 7834 LOUISVILLE, KY 402570834		PC	GENERAL SUPPORT	1,500
PERKINS SCHOOL FOR THE BLIND 175 N BEACON STREET WATERTOWN, MA 02472		PC	GENERAL SUPPORT	1,000
PERKINS SCHOOL FOR THE BLIND 175 N BEACON STREET WATERTOWN, MA 02472		PC	GENERAL SUPPORT	35,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
PERKINS SCHOOL FOR THE BLIND 175 N BEACON STREET WATERTOWN, MA 02472		PC	GENERAL SUPPORT	40,000
PINK RIBBON GIRLS INC 15 S 2ND STREET TIPP CITY, OH 453711710		PC	GENERAL SUPPORT	1,000
PROJECT INDEPENDENCE 3505 CADILLAC AVENUE STE 0103 COSTA MESA, CA 926261429		PC	GENERAL SUPPORT	1,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
RACE FOR THE RESCUES 2118 CLUSTER LANE GRAYSON, GA 300174023		PC	GENERAL SUPPORT	760
RAINBOW VILLAGE 3427 DULUTH HIGHWAY 120 DULUTH, GA 300963398		PC	GENERAL SUPPORT	180
REDFORD UNION ORAL PROGRAM FOR CHILDREN WITH HEARING IMPAIRMENTS 18499 BEECHE DALY ROAD REDFORD, MI 48240		PC	GENERAL SUPPORT	10,667
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
REDFORD UNION ORAL PROGRAM FOR CHILDREN WITH HEARING IMPAIRMENTS 18499 BEECHE DALY ROAD REDFORD, MI 48240		PC	GENERAL SUPPORT	349
RISE AGAINST HUNGER (STOP HUNGER NOW) 3733 NATIONAL DRIVE STE 200 RALEIGH, NC 276124845		PC	GENERAL SUPPORT	160
RONALD MCDONALD HOUSE CHARITIES INC 110 N CARPENTER STREET CHICAGO, IL 606072104		PC	GENERAL SUPPORT	30
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
RONALD MCDONALD HOUSE CHARITIES OF SOUTHERN CALIFORNIA 4560 FOUNTAIN AVENUE LOS ANGELES, CA 900291913		PC	GENERAL SUPPORT	100
SCARLETS SMILE8345 DICKERT STREET COMMERCE, MI 483824515		PC	GENERAL SUPPORT	100
SCIENCE BUDDIES560 VALLEY WAY MILPITAS, CA 950354106		PC	GENERAL SUPPORT	40,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
SCIENCE BUDDIES560 VALLEY WAY MILPITAS, CA 950354106		PC	GENERAL SUPPRT	35,000
SHELBY COUNTY SCHOOLS241 MAJUBA MEMPHIS, TN 38109		PC	GENERAL SUPPORT	1,000
SHELBY COUNTY SCHOOLS241 MAJUBA MEMPHIS, TN 38109		PC	GENERAL SUPPORT	990
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
SHELBY COUNTY SCHOOLS241 MAJUBA MEMPHIS, TN 38109		PC	GENERAL SUPPORT	570
SHRINERS' TRANSPORTATION FUND 1705 DOWNING DRIVE MAYSVILLE, KY 41056		PC	GENERAL SUPPORT	1,500
SNAP2IT1575 WHITLEY ROAD DACULA, GA 300191505		PC	GENERAL SUPPORT	1,250
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
SNAP2IT1575 WHITLEY ROAD DACULA, GA 300191505		PC	GENERAL SUPPORT	300
SNAP2IT1575 WHITLEY ROAD DACULA, GA 300191505		PC	GENERAL SUPPORT	140
SPECIAL CHILDREN'S CHARITIES 47 W POLK STREET SUITE 301 CHICAGO, IL 60605		PC	GENERAL SUPPORT	250
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
SPECIAL LEISURE SERVICES FOUNDATION 3000 CENTRAL ROAD STE 205 ROLLING MDWS, IL 600082551		PC	GENERAL SUPPORT	2,500
SPECIAL LEISURE SERVICES FOUNDATION 3000 CENTRAL ROAD STE 205 ROLLING MEADOWS, IL 600082551		PC	GENERAL SUPPORT	1,000
SPECIAL LEISURE SERVICES FOUNDATION 3000 CENTRAL ROAD STE 205 ROLLING MEADOWS, IL 600082551		PC	GENERAL SUPPORT	180
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
SPECIAL RECREATION ASSOCIATION OF CENTRAL LAKE COUNTY 290 OAKWOOD ROAD VERNON HILLS, IL 600612712		PC	GENERAL SUPPORT	2,500
SPECIAL RECREATION ASSOCIATION OF CENTRAL LAKE COUNTY 290 OAKWOOD ROAD VERNON HILLS, IL 600612712		PC	GENERAL SUPPORT	1,000
SPECIAL RECREATION ASSOCIATION OF CENTRAL LAKE COUNTY 290 OAKWOOD ROAD VERNON HILLS, IL 600612712		PC	GENERAL SUPPORT	320
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
SPECIAL RECREATION ASSOCIATION OF CENTRAL LAKE COUNTY 290 OAKWOOD ROAD VERNON HILLS, IL 600612712		PC	GENERAL SUPPORT	125
SPEECH AND LANGUAGE DEVELOPMENT CENTER 8699 HOLDER STREET BUENA PARK, CA 906203614		PC	GENERAL SUPPORT	180
SPEECH AND LANGUAGE DEVELOPMENT CENTER 8699 HOLDER STREET BUENA PARK, CA 906203614		PC	GENERAL SUPPORT	10,440
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
SPEECH AND LANGUAGE DEVELOPMENT CENTER 8699 HOLDER BUENA PARK, CA 90620		PC	GENERAL SUPPORT	330
SPEECH AND LANGUAGE DEVELOPMENT CENTER 8699 HOLDER BUENA PARK, CA 90620		PC	GENERAL SUPPORT	200
SPEECH AND LANGUAGE DEVELOPMENT CENTER 8699 HOLDER BUENA PARK, CA 90620		PC	GENERAL SUPPORT	100
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
SPRINKLES OF HOPE INC 118 CORLIS AVENUE BROOKSVILLE, KY 410048106		PC	GENERAL SUPPORT	1,000
ST JUDE CHILDRENS RESEARCH HOSPITAL INC 262 DANNY THOMAS PLACE MSC 512 MEMPHIS, TN 381053678		PC	GENERAL SUPPORT	2,709
ST JUDE CHILDRENS RESEARCH HOSPITAL INC 262 DANNY THOMAS PLACE MSC 512 MEMPHIS, TN 381053678		PC	GENERAL SUPPORT	1,490
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
ST JUDE CHILDRENS RESEARCH HOSPITAL INC 262 DANNY THOMAS PLACE MSC 512 MEMPHIS, TN 381053678		PC	GENERAL SUPPORT	1,178
ST JUDE CHILDRENS RESEARCH HOSPITAL INC 262 DANNY THOMAS PLACE MSC 512 MEMPHIS, TN 381053678		PC	GENERAL SUPPORT	125
ST BALDRICKS 1333 S MAYFLOWER AVENUE STE 400 MONROVIA, CA 910165268		PC	GENERAL SUPPORT	130
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
ST BALDRICK'S FOUNDATION 1443 E WASHINGTON BOULEVARD 650 PASADENA, CA 91104		PC	GENERAL SUPPORT	544
ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 381053678		PC	GENERAL SUPPORT	1,000
ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105		PC	GENERAL SUPPORT	30,510
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105		PC	GENERAL SUPPORT	4,720
ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105		PC	GENERAL SUPPORT	4,455
ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105		PC	GENERAL SUPPORT	4,225
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105		PC	GENERAL SUPPORT	2,143
ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105		PC	GENERAL SUPPORT	1,030
ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105		PC	GENERAL SUPPORT	1,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105		PC	GENERAL SUPPORT	1,000
ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105		PC	GENERAL SUPPORT	750
ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105		PC	GENERAL SUPPORT	500
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105		PC	GENERAL SUPPORT	300
ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105		PC	GENERAL SUPPORT	50
ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105		PC	GENERAL SUPPORT	50
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
ST JUDE'S CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105		PC	GENERAL SUPPORT	50
SUPPLEMENTARY ASSISTANCE TO THE HANDICAPPED SATH INC 5350 W NEW MARKET ROAD HILLSBORO, OH 451337722		PC	GENERAL SUPPORT	2,000
SUSAN G KOMEN 3 DAYPO BOX 660843 DALLAS, TX 75266		PC	GENERAL SUPPORT	1,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
SUSAN G KOMEN 3 DAYPO BOX 660843 DALLAS, TX 75266		PC	GENERAL SUPPORT	60
THE EARLY LEARNING INSTITUTE 2510 BALDWICK ROAD PITTSBURGH, PA 152054104		PC	GENERAL SUPPORT	6,459
THE EARLY LEARNING INSTITUTE 2510 BALDWICK ROAD PITTSBURGH, PA 152054104		PC	GENERAL SUPPORT	50
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
THE JARED BOX PROJECT 129 FENWICK DRIVE PORT MATILDA, PA 168707533		PC	GENERAL SUPPORT	1,680
THE SEDOL FOUNDATION 18160 W GAGES LAKE ROAD GAGES LAKE, IL 600301819		PC	GENERAL SUPPORT	1,500
THE WOODLANDS FOUNDATION 134 SHENOT ROAD WEXFORD, PA 150907455		PC	GENERAL SUPPORT	1,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
TOM BROWNING BOYS AND GIRLS CLUB 241 E MAPLE LEAF ROAD MAYSVILLE, KY 410569332		PC	GENERAL SUPPORT	1,500
UNIVERSITY OF PITTSBURGH HUMAN ENGINEERING RESEARCH LABORATORIES CATHEDRAL OF LEARNING 4200 FIFTH AVENUE PITTSBURGH, PA 15260		PC	GENERAL SUPPORT	35,000
VILLAGE OF HOPE131 EATON STREET LAWRENCEVILLE, GA 300464960		PC	GENERAL SUPPORT	500
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
VILLAGE OF HOPE131 EATON STREET LAWRENCEVILLE, GA 300464960		PC	GENERAL SUPPORT	420
WOUNDED WARRIOR PROJECT 4899 BELFORT ROAD SUITE 300 JACKSONVILLE, FL 32256		PC	GENERAL SUPPORT	4,335
YES YOU CAN DANCE 666 WASHINGTON ROAD SUITE 201 MT LEBANON, PA 15228		PC	GENERAL SUPPORT	1,000
Total . . . . . ▶ **3a**				1,091,334

Form 990PF Part XV Line 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
a *Paid during the year*				
YOUNG MENS CHRISTIAN ASSOCIATION OF METROPOLITAN LOS ANGELES 625 S NEW HAMPSHIRE AVENUE LOS ANGELES, CA 900051342		PC	GENERAL SUPPORT	160
Total . . . . . ▶ **3a**				1,091,334

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013040

TY 2019 All Other Program Related Investments Schedule

Name: MITSUBISHI ELECTRIC AMERICA FOUNDATION

EIN: 52-1700855

Category	Amount
NONE	0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013040

TY 2019 Investments Corporate Bonds Schedule

Name: MITSUBISHI ELECTRIC AMERICA FOUNDATION

EIN: 52-1700855

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
INVESTMENTS - CORPORATE BONDS	1,697,575	1,697,575

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013040

TY 2019 Investments Corporate Stock Schedule

Name: MITSUBISHI ELECTRIC AMERICA FOUNDATION

EIN: 52-1700855

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
INVESTMENTS - CORPORATE STOCK	17,267,653	17,267,653

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013040

TY 2019 Investments Government Obligations Schedule

Name:	MITSUBISHI ELECTRIC AMERICA FOUNDATION
EIN:	52-1700855
US Government Securities - End of Year Book Value:	2,676,656
US Government Securities - End of Year Fair Market Value:	2,676,656
State & Local Government Securities - End of Year Book Value:	0
State & Local Government Securities - End of Year Fair Market Value:	0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013040

TY 2019 Investments - Other Schedule

Name: MITSUBISHI ELECTRIC AMERICA FOUNDATION

EIN: 52-1700855

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MONEY MARKET FUND	AT COST	2,314,704	2,314,704
EXCHANGE TRADED FUNDS	AT COST	1,718,416	1,718,416
OTHER MUTUAL FUNDS	AT COST	318,694	318,694

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013040

TY 2019 Other Assets Schedule

Name: MITSUBISHI ELECTRIC AMERICA FOUNDATION

EIN: 52-1700855

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
SECURITY DEPOSITS	7,160	7,160	7,160
PREPAID EXPENSE	2,157	2,157	2,157
	0		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013040

TY 2019 Other Expenses Schedule

Name: MITSUBISHI ELECTRIC AMERICA FOUNDATION

EIN: 52-1700855

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
WORKSHOP EXPENSES	55,515	0	0	55,515
OFFICE EXPENSES	9,467	0	0	9,467
MISCELLANEOUS EXPENSES	11,105	0	0	707

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319013040

TY 2019 Other Income Schedule

Name: MITSUBISHI ELECTRIC AMERICA FOUNDATION

EIN: 52-1700855

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
GRANT RECOVERIES	146,080		146,080

TY 2019 Other Increases Schedule

Name: MITSUBISHI ELECTRIC AMERICA FOUNDATION

EIN: 52-1700855

Description	Amount
UNREALIZED GAIN/(LOSS) ON INVESTMENTS	3,356,755
PRIOR YEAR UNREALIZED GAIN/(LOSS)	6,696,357

TY 2019 Other Liabilities Schedule

Name: MITSUBISHI ELECTRIC AMERICA FOUNDATION

EIN: 52-1700855

Description	Beginning of Year - Book Value	End of Year - Book Value
EXCISE TAX PAYABLE	0	5,553
DEFERRED TAX LIABILITY	0	141,491

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491319013040

TY 2019 Other Professional Fees Schedule

Name: MITSUBISHI ELECTRIC AMERICA FOUNDATION

EIN: 52-1700855

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	13,242	0	0	13,242
INVESTMENT MANAGEMENT FEES	94,698	94,698	0	0

TY 2019 Taxes Schedule

Name: MITSUBISHI ELECTRIC AMERICA FOUNDATION

EIN: 52-1700855

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	6,823	6,823	0	0
EXCISE TAX EXPENSE	85,167	0	0	0

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491319013040

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2019

Name of the organization
MITSUBISHI ELECTRIC AMERICA FOUNDATION

Employer identification number
52-1700855

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☑ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: 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

☑ 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

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% 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.

☐ 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 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ 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 *exclusively* 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 *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . . ▶ $ _____

Caution: 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 **must** 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).

Name of organization
MITSUBISHI ELECTRIC AMERICA FOUNDATION

Employer identification number
52-1700855

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

Contributors

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MITSUBISHI ELECTRIC US INC 5900-A KATELLA AVENUE CYPRESS, CA 90630	$ 150,000	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
2	MITSUBISHI ELECTRIC AUTOMATION INC 500 CORPORATE WOODS PARKWAY VERNON HILLS, IL 60061	$ 198,497	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
3	MITSUBISHI ELECTRIC AUTOMOTIVE AMERICA INC 4773 BETHANY ROAD MASON, OH 45040	$ 75,000	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
4	MITSUBISHI ELECTRIC POWER PRODUCTS 530 KEYSTONE DRIVE WARRENDALE, PA 15086	$ 30,000	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
5	MITSUBISHI ELECTRIC RESEARCH LABORATORIES 201 BROADWAY 8TH FLOOR CAMBRIDGE, MA 02139	$ 17,000	☑ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Name of organization
MITSUBISHI ELECTRIC AMERICA FOUNDATION

Employer identification number
52-1700855

Part II **Noncash Property**

(see instructions). Use duplicate copies of Part II if additional space is needed.

(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
MITSUBISHI ELECTRIC AMERICA FOUNDATION

Employer identification number
52-1700855

Part III ***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.) ▶ $ ____________**
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee