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2019

Inspection

Return of Private Foundation

Department of the Treasury Internal Revenue Service

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

Open to Public

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

For calendar year 2019, or tax year beginning 01-01-2019 , and ending 12-31-2019 A Employer identification number FRED AND ELLI ISELIN FOUNDATION 74-2521631 Number and street (or P.O. box number if mail is not delivered to street address) 350 MARKET STREET 311 B Telephone number (see instructions) (970) 925-4290 City or town, state or province, country, and ZIP or foreign postal code BASALT, CO 81621 ${f C}$ If exemption application is pending, check here ☐ Initial return ☐ Initial return of a former public charity G Check all that apply: **D 1.** Foreign organizations, check here....... 2. Foreign organizations meeting the 85% test, check here and attach computation ... Amended return ☐ Final return Address change ☐ Name change If private foundation status was terminated ☑ Section 501(c)(3) exempt private foundation **H** Check type of organization: under section 507(b)(1)(A), check here \square Section 4947(a)(1) nonexempt charitable trust \square Other taxable private foundation I Fair market value of all assets at end **J** Accounting method: ☐ Cash If the foundation is in a 60-month termination of year (from Part II, col. (c), under section 507(b)(1)(B), check here ☐ Other (specify) line 16) ▶\$ 2,462,424 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The total Disbursements Revenue and (b) Net investment (c) Adjusted net for charitable of amounts in columns (b), (c), and (d) may not necessarily expenses per books equal the amounts in column (a) (see instructions).) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) Check \blacktriangleright lacksquare if the foundation is **not** required to attach 2 3 Interest on savings and temporary cash investments Dividends and interest from securities 80,055 80,055 Gross rents 5a b Net rental income or (loss) 63,539 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 63,539 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications . 10a Gross sales less returns and allowances Less: Cost of goods sold Gross profit or (loss) (attach schedule) c Other income (attach schedule) 11 Total. Add lines 1 through 11 143,594 143,594 13 Compensation of officers, directors, trustees, etc. 23,978 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees (attach schedule) . . . 5,455 3,273 2,182 Accounting fees (attach schedule) 9 Other professional fees (attach schedule) 31,126 31.126 [چە 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 21 Travel, conferences, and meetings 22 Printing and publications . . 23 Other expenses (attach schedule) 2.944 1.250 1,694 24 Total operating and administrative expenses. Add lines 13 through 23 64,203 36,349 3,876 125,250 125,250 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 189,453 36,349 129,126 27 Subtract line 26 from line 12: Excess of revenue over expenses and -45,859 disbursements Net investment income (if negative, enter -0-) 107,245 Adjusted net income (if negative, enter -0-) . . .

Cat. No. 11289X

Form **990-PF** (2019)

| Form | า 990- | PF (2019) | | | Page 2 |
|-----------------|--------|--|------------------------|------------------------|--------------------------|
| Pai | rt II | Balance Sheets Attached schedules and amounts in the description column | Beginning of year | | f year |
| | 1 | should be for end-of-year amounts only. (See instructions.) Cash—non-interest-bearing | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | | Savings and temporary cash investments | 93,356 | 107,486 | 107,486 |
| | 2 | | 93,330 | 107,460 | 107,460 |
| | 3 | Accounts receivable ► Less: allowance for doubtful accounts ► | | | |
| | | | | | |
| | 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 ▶ | | | |
| St | 8 | Inventories for sale or use | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | 1,100 | 1,100 |
| Ř | 10a | Investments—U.S. and state government obligations (attach schedule) | | _ | |
| | b | Investments—corporate stock (attach schedule) | 2,053,442 | 2,351,232 | 2,351,232 |
| | C | Investments—corporate bonds (attach schedule) | | | |
| | 11 | Investments—land, buildings, and equipment: basis ▶ | | | |
| | | Less: accumulated depreciation (attach schedule) ▶ | | | |
| | 12 | Investments—mortgage loans | | | |
| | 13 | Investments—other (attach schedule) | | | |
| | 14 | Land, buildings, and equipment: basis ▶ | | | |
| | | Less: accumulated depreciation (attach schedule) ▶ | | | |
| | 15 | Other assets (describe) | • | J 2,606 | 2,606 |
| | 16 | Total assets (to be completed by all filers—see the | | | |
| | | instructions. Also, see page 1, item I) | 2,146,798 | 2,462,424 | 2,462,424 |
| | 17 | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| es | 19 | Deferred revenue | | | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| iab | 21 | Mortgages and other notes payable (attach schedule) | | | |
| | 22 | Other liabilities (describe •) | | | |
| | 23 | Total liabilities(add lines 17 through 22) | | 0 | |
| es | | Foundations that follow FASB ASC 958, check here | | | |
| 2 | | and complete lines 24, 25, 29 and 30. | | | |
| ala | 24 | Net assets without donor restrictions | | | |
| 3 B | 25 | Net assets with donor restrictions | | | |
| r Fund Balances | | Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. | | | |
| or or | 26 | Capital stock, trust principal, or current funds | 2,146,798 | 2,462,424 | |
| ايد | 27 | Paid-in or capital surplus, or land, bldg., and equipment fund | _, | _, ·, · _ · | |
| 15.5 | 28 | Retained earnings, accumulated income, endowment, or other funds | | | |
| | 29 | Total net assets or fund balances (see instructions) | 2,146,798 | 2,462,424 | |
| Ž | 30 | Total liabilities and net assets/fund balances (see instructions) . | 2,146,798 | 2,462,424 | |
| | t III | · · · · · · · · · · · · · · · · · · · | ,, | , <u>. ,</u> . <u></u> | |
| 1 | | I net assets or fund balances at beginning of year—Part II, column (a), line | 29 (must agree with er | nd-l | |
| _ | | ear figure reported on prior year's return) | | . 1 | 2,146,798 |
| 2 | Ente | er amount from Part I, line 27a | | . 2 | -45,859 |
| 3 | Othe | er increases not included in line 2 (itemize) | % _J | 3 | 371,707 |
| 4 | Add | lines 1, 2, and 3 | _ | . 4 | 2,472,646 |
| 5 | | reases not included in line 2 (itemize) | | 5 | 10,222 |
| 6 | Tota | l net assets or fund balances at end of year (line 4 minus line 5)—Part II, o | column (b), line 29 | . 6 | 2,462,424 |
| | | | | F | orm 990-PF (2019) |

Page **3**

| | ee the kind(s) of property sold (e.g., arehouse; or common stock, 200 shs | | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
|---|--|---|--|--|---|
| 1 a ST PUBLICLY TRADED SE | ECURITIES | | Р | | |
| b LT PUBLICLY TRADED SE | CURITIES | | Р | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| (e) | (f) | | (g) | (| h) |
| | Grace calco price Depreciation allowed Cost of other basis Gain of (los | | | | |
| · | (or allowable) plus expense of sa 212,320 | | | | f) minus (g) |
| | | | 224,933 | | -12,613 |
| | 66,255 | | 591,157 | | 75,098 |
| <u>c</u> | | | | | |
| d | | | | | |
| e | | | | | |
| Complete only for assets | s showing gain in column (h) and ow | | | | <u>(1)</u> |
| (i) | (j) Adjusted basis | | (k) s of col. (i) | | h) gain minus less than -0-) or |
| F.M.V. as of 12/31/69 | as of 12/31/69 | | l. (j), if any | | om col.(h)) |
| | | | (3), | - | -12,613 |
| b | | | | | 75,098 |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 2 Capital gain net income | e or (net capital loss) | If gain, also enter in F If (loss), enter -0- in | | | 62.526 |
| • Not also the bound of the l | | 1222(5) (6) | , | 2 | 63,539 |
| · | gain or (loss) as defined in sections : | . , . , | , | | |
| in Part I, line 8 | rt I, line 8, column (c) (see instructi | ons). If (loss), enter -0 | } | 3 | |
| Part V Qualification I | Under Section 4940(e) for Re | educed Tax on Net | Investment Inc | come | |
| | private foundations subject to the sec | | | | |
| (rer optional ase by demestic p | | otion is ro(a) tax on in | | c., | |
| If section 4940(d)(2) applies, le | eave this part blank. | | | | |
| Was the foundation liable for th | ne section 4942 tax on the distributal | ble amount of any year | r in the base period? | , | es 🗹 No |
| If "Yes," the foundation does no | ot qualify under section 4940(e). Do | not complete this part | • | | |
| 1 Enter the appropriate an | nount in each column for each year; | see instructions before | e making any entries | 5. | |
| (a) Base period years Calendar | (b) | (c) | | (d) Distribution rat | io |
| year (or tax year beginning in) | Adjusted qualifying distributions | Net value of noncharitab | ole-use assets | (col. (b) divided by | |
| 2018 | 109,923 | | 2,416,049 | | 0.045497 |
| 2017 | 143,412 | | 2,414,267 | | 0.059402 |
| 2016 | 131,777 | | 2,259,307 | | 0.058326 |
| 2015 | 127,050 | | 2,444,729 | | 0.051969 |
| 2014 | 134,917 | | 2,562,481 | | 0.052651 |
| 2 Total of line 1, column (| • | | | | 0.267845 |
| | o for the 5-year base period—divide | | | | 0.053569 |
| | ndation has been in existence if less Incharitable-use assets for 2019 from | | 3 | | 2,385,145 |
| 5 Multiply line 4 by line 3 | | • | 5 | | 127,770 |
| • | ent income (1% of Part I, line 27b) | | 6 | | 1,072 |
| | ent income (1 % of Part 1, line 27b) | | 7 | | 128,842 |
| | ions from Part XII, line 4 , | | 8 | | 129,126 |
| | eater than line 7, check the box in Pa | | | l g a 1% tax rate. Se | |
| instructions. | | | .r | | |
| | | | | F | orm 990-PF (2019) |

(b)

| Form | 990-PF (2019) | | | | | | | | F | age 6 |
|---------------------|---|---|---------------------------------------|---------------------------|------------------------|----------|----------|---------------|--------------------|--------------|
| Pa | rt VIII-B Statements Regar | ding | Activities for Which | Form 4720 May Be | Required (continue | d) | | | | |
| 5a | During the year did the foundation | pay o | r incur any amount to: | | | | | | Yes | No |
| | (1) Carry on propaganda, or other | wise a | ttempt to influence legisl | ation (section 4945(e))? | ☐ Yes | ~ | Nο | | | |
| | (2) Influence the outcome of any | specifi | c public election (see sect | ction 4955); or to carry | | | | | | |
| | on, directly or indirectly, any v | oter re | egistration drive? | | · · 🔲 Yes | ✓ | No | | | |
| | (3) Provide a grant to an individua | l for t | ravel, study, or other sim | ilar purposes? | Yes | ~ | No | | | |
| | (4) Provide a grant to an organiza | vide a grant to an organization other than a charitable, etc., organization described | | | | | | | | |
| | in section 4945(d)(4)(A)? See | · · · Yes | ✓ | No | | | | | | |
| | (5) Provide for any purpose other | | • | * ** | | | | | | |
| | educational purposes, or for th | • | • | | ∟ Yes | ✓ | No | | | |
| b | If any answer is "Yes" to 5a(1)-(5) | | | | | | | | | |
| | Regulations section 53.4945 or in a | | | | _ | • | | 5b | | |
| | Organizations relying on a current | | - | | • | | | | | |
| С | If the answer is "Yes" to question! | | | • | | | | | | |
| | tax because it maintained expendit | | . , | | · · Yes | | No | | | |
| | If "Yes," attach the statement requ | | - | | | | | | | |
| 6a | Did the foundation, during the yea | • | | | | | | | | |
| | a personal benefit contract? | | | | ⊔ Yes | ✓ | No | ٠. | | l <u>.</u> . |
| b | Did the foundation, during the yea | r, pay | premiums, directly or ind | irectly, on a personal be | nerit contract? | • | | 6 b | | No |
| | If "Yes" to 6b, file Form 8870. | | £ | | | _ | | | | |
| 7a | At any time during the tax year, w | | | | ∟ Yes | ✓ | No | - | | |
| | If "Yes", did the foundation receive | | · | | | • | | 7b | | |
| 8 | Is the foundation subject to the se | | , , , , , | . , , | | _ | | | | |
| | excess parachute payment during | | | | <u></u> | | | | | <u></u> |
| Pa | rt VIIII Information About and Contractors | Offic | ers, Directors, Trust | tees, Foundation Ma | nagers, Highly Pai | d En | nplo | yees, | • | |
| 1 | List all officers, directors, trusto | oe fo | undation managers ar | nd their compensation | See instructions | | | | | |
| | List an officers, uncetors, trust | $\overline{}$ | b) Title, and average | (c) Compensation (If | | 0 | Ι,, | _ | | |
| | (a) Name and address | ` | hours per week | not paid, enter | employee benefit plans | and | | | ise acc Ilowani | |
| | | | devoted to position | -0-) | deferred compensati | | <u> </u> | | | |
| | S K DAGGS | 5.00 | IDENT | 23,978 | | 0 | | | 0 | |
| | MARKET STREET SUITE 311 LT, CO 81621 | | | | | | | | | |
| RICH | ARD A KNEZIVICH | | RETARY | 0 | | 0 | | | | 0 |
| | HOPKINS AVE | 0.50 | | | | | | | | |
| | N, CO 81611 | DIDE | CTOR | | | | | | | |
| | N GAE DAGGS | 2.00 | CTOR | 0 | | 0 | | | | 0 |
| | 1EADOW CT LT, CO 81621 | | | | | | | | | |
| KRIS | TEN HENRY | DIRE | CTOR | 0 | | 0 | | | | 0 |
| | OX 3077 | 72.00 | | | | | | | | |
| <u>ASPEI</u> | N, CO 816123077 Compensation of five highest-p | l aid an | unlavaas (athar than t | hasa included on line 1 | coo instructions) 1 | f no | | ntor" | NONE | " |
| | compensation of five highest-p | aiu ei | Γ΄, | | (d) Contributions t | | ie, ei | iitei | HONL | |
| (a) | Name and address of each employed | paid | (b) Title, and average hours per week | (c) Compensation | employee benefit | | (e) | Expens | se acco | ount, |
| | more than \$50,000 | | devoted to position | (c) Compensation | plans and deferred | 1 | ot | her all | owanc | es |
| | | | | | compensation | | | | | |
| NON | <u> </u> | | | | | | | | | |
| | | | | | + | - | | | | |
| | | | | | | | | | | |
| | | | | | + | \dashv | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | _ | | | | |
| | | | | | | | | | | |
| T | I mumban at alban amalana | | 0.000 | | | _ | | | | |
| lota | I number of other employees paid o | ver \$5 | 0,000 | | · · · · · · <u> </u> | | | 000 | 0 5= | (2010) |
| | | | | | | | For | m yy l | U-PF (| (2019) |

| Form 990-PF (2019) | | Page 7 |
|---|--|--------------------|
| Part VIII Information About Officers, Directors, Trustees, and Contractors (continued) | Foundation Managers, Highly Pa | aid Employees, |
| 3 Five highest-paid independent contractors for professional service | ces (see instructions). If none, enter | "NONE". |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | • |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include rel organizations and other beneficiaries served, conferences convened, research papers produ | evant statistical information such as the numbe uced, etc. | r of 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 t | | Amount |
| 1 N/A | | |
| 2 | | |
| | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| | | |
| Total. Add lines 1 through 3 | | • |
| Iotal. Add lines 1 through 3 | | Form 900 PE (2010) |

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

1a

1b

2

За 3h

4

5

129,126

129,126

1.072

128.054

Form 990-PF (2019)

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Amounts set aside for specific charitable projects that satisfy the:

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

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

1

2

3

4

5

b

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2020.

Subtract lines 7 and 8 from line 6a.

10 Analysis of line 9:

a Excess from 2015.

b Excess from 2016. .

c Excess from 2017. . d Excess from 2018. . e Excess from 2019. .

b Prior years' undistributed income. Subtract c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. **d** Subtract line 6c from line 6b. Taxable amount —see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount-see instructions f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2014 not

Undistributed Income (see instructions)

Part XIII

Form **990-PF** (2019)

Page 9

| | | (a) Corpus | (b) Years prior to 2018 | (c) 2018 | (d) 2019 |
|---|---|---------------|-----------------------------------|-------------|---------------------|
| 1 | Distributable amount for 2019 from Part XI, line 7 | | | | 118,185 |
| 2 | Undistributed income, if any, as of the end of 2019: | | | | |
| а | Enter amount for 2018 only | | | | |
| b | Total for prior years: 20 | | | | |
| 3 | Excess distributions carryover, if any, to 2019: | | | | |
| а | From 2014 | | | | |
| b | From 2015 6,170 | | | | |
| С | From 2016 | | | | |
| d | From 2017 | | | | |
| e | From 2018 | 55.000 | | | |
| | Total of lines 3a through e | 55,332 | | | |
| 4 | Qualifying distributions for 2019 from Part | | | | |
| | XII, line 4: ► \$129,126 | | | | |
| а | Applied to 2018, but not more than line 2a | | | | |
| b | Applied to undistributed income of prior years (Election required—see instructions) | | | | |
| С | Treated as distributions out of corpus (Election required—see instructions) | | | | |
| d | Applied to 2019 distributable amount | | | | 118,185 |
| е | Remaining amount distributed out of corpus | 10,941 | | | |
| 5 | Excess distributions carryover applied to 2019. | | | | |
| | (If an amount appears in column (d), the same amount must be shown in column (a).) | | | | |

| 4 | Qualifying distributions for 2019 from Part | | | |
|---|---|--------|--|---------|
| | XII, line 4: ► \$129,126 | | | |
| а | Applied to 2018, but not more than line 2a | | | |
| b | Applied to undistributed income of prior years (Election required—see instructions) | | | |
| С | Treated as distributions out of corpus (Election required—see instructions) | | | |
| d | Applied to 2019 distributable amount | | | 118,185 |
| е | Remaining amount distributed out of corpus | 10,941 | | |
| 5 | Excess distributions carryover applied to 2019. | | | |
| | (If an amount appears in column (d), the same amount must be shown in column (a).) | | | |
| 6 | Enter the net total of each column as indicated below: | | | |

66,273

2.429

63,844

6.170

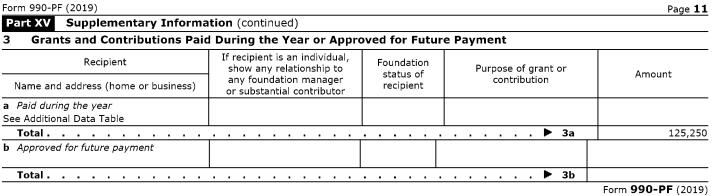
20,982

25,751

10.941

Page **10**

| - | art XIV Pri | vate Operating Found | ations (see instru | ctions and Part V | II-A, question 9) | | |
|----|---|---|---------------------------|-----------------------|--------------------------|----------------------|---------------|
| 1a | | has received a ruling or det he ruling is effective for 20 | | | rating | | |
| b | Check box to indi | cate whether the organizati | on is a private opera | ting foundation des | cribed in section \Box | 4942(j)(3) or | 4942(j)(5) |
| 2a | | of the adjusted net | Tax year | | Prior 3 years | | (e) Total |
| | | t I or the minimum n from Part X for each | (a) 2019 | (b) 2018 | (c) 2017 | (d) 2016 | (e) Total |
| | year listed | | | | | | |
| b | 85% of line 2a . | | | | | | |
| C | | utions from Part XII, ar listed | | | | | |
| d | Amounts included directly for active | in line 2c not used conduct of exempt | | | | | |
| е | for active conduc | utions made directly t of exempt activities. rom line 2c | | | | | |
| 3 | Complete 3a, b, or alternative test re | | | | | | |
| а | "Assets" alternati | ve test—enter: | | | | | |
| | (1) Value of all a | | | | | | |
| | (2) Value of ass under sectio | n 4942(j)(3)(B)(i) | | | | | |
| b | "Endowment" alto of minimum inve | ernative test— enter 2/3 stment return shown in each year listed. | | | | | |
| С | "Support" alterna | | | | | | |
| | | t other than gross | | | | | |
| | | ncome (interest, ents, payments | | | | | |
| | | loans (section | | | | | |
| | | or royalties) | | | | | |
| | (2) Support from and 5 or mo | | | | | | |
| | | ns as provided in | | | | | |
| | | (j)(3)(B)(iii) | | | | | |
| | (3) Largest amo | unt of support npt organization | | | | | |
| | (4) Gross invest | · • | | | | | |
| | Supple | mentary Information | (Complete this | part only if the f | oundation had | 5,000 or more i | n |
| | assets | at any time during the | e year—see insti | uctions.) | | | |
| 1 | | garding Foundation Mana s of the foundation who hav | | han 2% of the total | contributions receiv | ed by the foundation | n |
| | | of any tax year (but only if | | | | | |
| b | | s of the foundation who own | | | | rge portion of the | |
| 2 | | artnership or other entity) or garding Contribution, Gra | | | | | |
| | _ | if the foundation only make | | ••• | - | d | |
| | | sts for funds. If the foundat | | | | | |
| | | complete items 2a, b, c, ar | | | 3 | | |
| a | The name, addre | ss, and telephone number o | r e-mail address of | he person to whom | applications should | be addressed: | |
| | JAMES K DAGGS | | | | | | |
| | 350 MARKET ST | | | | | | |
| | BASALT, CO 816 (970) 925-4290 | 21 | | | | | |
| | | SSASSOCIATES.COM | | | | | |
| b | The form in which | n applications should be sub | mitted and informat | ion and materials th | ney should include: | | |
| | APPLICATIONS S USE OF PROCEED | HOULD BE SUBMITTED IN V PS | VRITING AND INCLU | DE PROOF OF EXEM | IPT STATUS OF APPL | YING ORGANIZATIO | N AND PRECISE |
| С | Any submission d | eadlines: | | | | | |
| | OCTOBER 31ST | | | , , , , , , , , | | | |
| d | factors: | r limitations on awards, suc | th as by geographica | I areas, charitable f | ields, kinds of institu | itions, or other | |
| | NONE | | | | | | |



| er gross | amounts unless otherwise indicated. | | usiness income | Excluded by section | | (e) Related or exem |
|-----------------------------|---|---|--------------------------------------|---|----------------------|------------------------------------|
| _ | n service revenue: | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function incom (See instruction |
| | | | | | | |
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| _ | and contracts from government agencies rship dues and assessments | | | | | |
| Interes | t on savings and temporary cash | | | | | |
| investm | | | | | | |
| | nds and interest from securities | | | | | 80 |
| | ntal income or (loss) from real estate: | | | | | |
| | financed property | | | | | |
| | ebt-financed property | | | | | |
| | nvestment income. | | | | | |
| | (loss) from sales of assets other than | | | | | |
| nvento | ` , | | | | | 63 |
| let inc | ome or (loss) from special events: | | | | | 05 |
| | profit or (loss) from sales of inventory | | | | | |
| | revenue: a | | | | | |
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| | | | | | | + |
| | | | | | | |
| ı | | | | | | |
| Subtati | al Add columns (b) (d) and (e) | | | | | 143 |
| ! ! | al Add columns (b) (d) and (e) | | | 1 | 3 | |
| Subtota | al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu - B Relationship of Activities to the | lations.) ne Accomplisi | hment of Exem | pt Purposes | | 143, |
| Subtota Fotal. See wo | al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations.) le Accomplisi income is report | hment of Exem ted in column (e) o | pt Purposes f Part XVI-A contribu | uted importantly to | 143, |
| Gubtota Fotal. See wo | al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which | lations.) le Accomplisi income is report | hment of Exem ted in column (e) o | pt Purposes f Part XVI-A contribu | uted importantly to | 143, |
| Subtotal. See work XVI | al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which | lations.) le Accomplisi income is report | hment of Exem ted in column (e) o | pt Purposes f Part XVI-A contribu | uted importantly to | 143, |
| Subtotal. See wo | al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which | lations.) le Accomplisi income is report | hment of Exem ted in column (e) o | pt Purposes f Part XVI-A contribu | uted importantly to | 143 |
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| ubtotal. otal. See wo | al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which | lations.) le Accomplisi income is report | hment of Exem ted in column (e) o | pt Purposes f Part XVI-A contribu | uted importantly to | 143 |
| ubtotal. iee wo | al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which | lations.) le Accomplisi income is report | hment of Exem ted in column (e) o | pt Purposes f Part XVI-A contribu | uted importantly to | 143 |
| ubtotal. iee wo | al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which | lations.) le Accomplisi income is report | hment of Exem ted in column (e) o | pt Purposes f Part XVI-A contribu | uted importantly to | 143 |
| ubtotal. iee wo | al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which | lations.) le Accomplisi income is report | hment of Exem ted in column (e) o | pt Purposes f Part XVI-A contribu | uted importantly to | 143 |
| otal. See wo | al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which | lations.) le Accomplisi income is report | hment of Exem ted in column (e) o | pt Purposes f Part XVI-A contribu | uted importantly to | 143 |
| otal. See wo | al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which | lations.) le Accomplisi income is report | hment of Exem ted in column (e) o | pt Purposes f Part XVI-A contribu | uted importantly to | 143 |
| Subtotal. See wo | al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which | lations.) le Accomplisi income is report | hment of Exem ted in column (e) o | pt Purposes f Part XVI-A contribu | uted importantly to | 143 |
| Subtotal. See wo | al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which | lations.) le Accomplisi income is report | hment of Exem ted in column (e) o | pt Purposes f Part XVI-A contribu | uted importantly to | 143 |
| Subtotal. See work XVI | al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which | lations.) le Accomplisi income is report | hment of Exem ted in column (e) o | pt Purposes f Part XVI-A contribu | uted importantly to | 143, |
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|----|----------------|---|-------|---|
| | | Information Regarding Transfers To and Transactions and Relationships With Noncharit | able | |
| j | art XVII | Exempt Organizations | .ubic | |
| L | | nization directly or indirectly engage in any of the following with any other organization described in section 501 | | V |

| | | Exempt Org | ganizations | | | | | | | | | | |
|-------------|----------------------|---|--|-----------------|------------------------|---------------------------|-----------------|--|--|-------------------|----------|----------|------|
| | | janization directly than section 501(c | | | | | | | n described in secti s? | on 501 | | Yes | No |
| a Tra | ansfers f | rom the reporting | foundation to a r | oncha | aritable ex | empt organizat | ion o | f: | | Ī | | | |
| (1 |) Cash. | | | | | | | | | . [| 1a(1) | | No |
| (2 |) Other | assets | | | | | | | | . [| 1a(2) | | No |
| b Ot | her trans | sactions: | | | | | | | | Γ | | | |
| (1 |) Sales | of assets to a nor | ncharitable exemp | t orga | nization. | | | | | : | 1b(1) | | No |
| - | - | ases of assets fro | • | _ | | | | | | | 1b(2) | | No |
| | | l of facilities, equi | | | | | | | | | 1b(3) | | No |
| - | - | oursement arrange | • | | | | | | | | 1b(4) | | No |
| - | - | or loan guarante | | | | | | | | | 1b(5) | | No |
| • | - | mance of services | | | | | | | | | 1b(6) | | No |
| • | - | | · | | - | | | | | | 1c | | No |
| | - | | - · · | | | | | | ways show the fair i | | | | NO |
| of | the good any tran | ds, other assets, o | or services given b g arrangement, sh | y the low in | reporting column (c | foundation. If t | the fo the g | oundation receive loods, other asse | d less than fair mar ts, or services recei transfers, transactions | ket value ved. | | ngemen | ts |
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| 2a Is | the foun | dation directly or | indirectly affiliate | d with | or relate | d to one or mo | ore ta | y-evemnt organi | izations | | | | |
| | | n section 501(c) (| • | | • | , | | | | ~ | No | | |
| | | | | 11 301 | (0)(0)) 01 | III Section 527: | | | | es E | NO | | |
| D II | res, co | mplete the follow (a) Name of orga | - | | 1 0 | b) Type of organiz | zation | 1 | (c) Description | of relation | shin | | |
| | | (a) Name or orga | IIIZation | | ļ , | b) Type of Organiz | Zation | | (C) Description | 1 Of Telacion | ыпр | | |
| | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | |
| | of m whicl | | belief, it is true, c | | | | | | ng schedules and st than taxpayer) is b | | | | |
| Sigr Her | | **** | | | | 2020-11-13 | | ***** | | return | | scuss th | |
| | │▶ - | | | | | _ | | —) | | with the below | e prepai | er shov | vn |
| | ' S | Signature of office | r or trustee | | | Date | | ' Title | | (see ins | str.) 🔽 | Yes [| No |
| | | Print/Type prepa | arer's name | Prep | arer's Sigr | nature | | Date | Check if self- | PTIN | | | |
| | | | | | | | | | employed ▶ □ | F | 00924 | 527 | |
| Paic | | JAMES K DAG | igs cpa | | | | | 2020-11-13 | | | | | |
| _ | parer | F: 1 | 141450 24222 | 1000 | | | | | | | | | |
| _ | Only | Firm's name ► | JAMES DAGGS & | ASSO | CIATES PO | L | | | | Firm's EI | N ▶84· | -08305 | 71 |
| | / | Firm's address ▶ | 350 MARKET S | TREET | Г 311 | | | | | | | | |
| | | | BASALT CO 9 | 1621 | | | | | | Phone no | . (970 | 925-4 | 1290 |
| | | | BASALT, CO 8 | 1021 | | | | | | | - ' | | |
| | | • | | | | | | | | | | | |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| | or substantial continuation | | | |
|--|-----------------------------|---------|-----------------|-------|
| a Paid during the year | | | | |
| ENGLISH IN ACTIONPO BOX 4856 BASALT, CO 81621 | NONE | 501(C)3 | PROGRAM SUPPORT | 2,000 |

1,000

125,250

| COMPASSPO BOX 336 WOODY CREEK, CO 81656 | NONE | 501(C)3 | FAMILY HOEDOWN SPONSORSHIP | |
|--|------|---------|-------------------------------|--|
| ASPEN HISTORICAL SOCIETY | NONE | 501(C)3 | PROGRAM SUPPORT | |

Total .

| WOODY CREEK, CO 81656 | | | SPONSORSHIP | |
|---|------|---------|-----------------|-------|
| ASPEN HISTORICAL SOCIETY 620 W BLEEKER ST ASPEN, CO 81611 | NONE | 501(C)3 | PROGRAM SUPPORT | 9,000 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| ASPEN SCHOOL DISTRICT 0235 HIGH SCHOOL ROAD ASPEN, CO 81611 | NONE | GOV'T | PROGRAM SUPPORT | 1,000 |
|---|------|---------|---------------------|--------|
| ASPEN VALLEY SKI CLUB | NONE | 501(C)3 | SCHOLARSHIP SUPPORT | 15,000 |

| 300 AVSC DRIVE ASPEN, CO 81611 | NONE | 501(C)3 | SCHOLARSHIP SUPPORT | 15,000 |
|-----------------------------------|------|---------|-------------------------|--------|
| ASPEN YOUTH CENTERPO BOX 8266 | NONE | 501(C)3 | AFTER-SCHOOL AND SUMMER | 12,000 |

125,250

■ 3a

| 300 AVSC DRIVE ASPEN, CO 81611 | | | | |
|--|------|---------|----------------------------------|-----|
| ASPEN YOUTH CENTERPO BOX 8266 ASPEN, CO 81612 | NONE | 501(C)3 | AFTER-SCHOOL AND SUMMER PROGRAMS | 12, |

Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| FAMILY VISITOR PROGRAM OF GARFIELD PO BOX 1845 GLENWOOD SPRINGS, CO 81602 | NONE | 501(C)3 | PARTNERS FOR A HEALTHY BABY PROGRAM | 5,000 |
|--|------|---------|--|-------|

| GLENWOOD SPRINGS, CO 81602 | | | | |
|--|------|---------|--------------------------|-------|
| INDEPENDENCE PASS FNDT PO BOX 1700 ASPEN, CO 81612 | NONE | 501(C)3 | PROGRAM SUPPORT | 4,500 |
| DIVED BRIDGE REGIONAL CENTER | NONE | F01(C)3 | CENERAL PROCESAM CURRORT | F 000 |

| INDEPENDENCE PASS FNDT PO BOX 1700 ASPEN, CO 81612 | NONE | 501(C)3 | PROGRAM SUPPORT | 4,500 |
|--|------|---------|-------------------------|-------|
| RIVER BRIDGE REGIONAL CENTER 520 21ST STREET GLENWOOD SPRINGS, CO. 81601 | NONE | 501(C)3 | GENERAL PROGRAM SUPPORT | 5,000 |

| PO BOX 1700 ASPEN, CO 81612 | | | | ., |
|---|------|---------|-------------------------|-------|
| RIVER BRIDGE REGIONAL CENTER 520 21ST STREET GLENWOOD SPRINGS, CO 81601 | NONE | 501(C)3 | GENERAL PROGRAM SUPPORT | 5,000 |

Total .

| RIVER BRIDGE REGIONAL CENTER 520 21ST STREET GLENWOOD SPRINGS, CO 81601 | NONE | 501(C)3 | GENERAL PROGRAM SUPPORT | 5,000 |
|---|------|---------|-------------------------|-------|
| | | | | |

125,250

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | | |
|--|------|---------|------------------|-------|
| ROARING FORK FAMILY RESOURCE CENTER | NONE | 501(C)3 | PROGRAM SUPPPORT | 5,000 |
| PO BOX 1833 | | | | |

| CARBONDALE, CO 81623 | | | | |
|--|------|----------|-----------------|-------|
| ROARING FORK OUTDOOR VOLUNTEERS PO BOX 1341 BASALT, CO 81621 | NONE | 501 C(3) | PROGRAM SUPPORT | 2,500 |

| PO BOX 1341 BASALT, CO 81621 | NONE | 501 C(3) | PROGRAM SUPPORT | 2,500 |
|---|------|----------|-----------------------------|-------|
| SHINING STARS FOUNDATION PO BOX 1308 | NONE | 501 C(3) | ANNUAL WINTER GAMES SUPPORT | 3,500 |

| PO BOX 1341 BASALT, CO 81621 | | | | |
|--|------|----------|-----------------------------|-------|
| SHINING STARS FOUNDATION PO BOX 1308 ASPEN, CO 81612 | NONE | 501 C(3) | ANNUAL WINTER GAMES SUPPORT | 3,500 |

| DADALI, CO 01021 | | | | 1 |
|--|------|----------|--------------------------------|-------|
| SHINING STARS FOUNDATION PO BOX 1308 ASPEN, CO 81612 | NONE | 501 C(3) | ANNUAL WINTER GAMES SUPPORT | 3,500 |
| | | | | |

125,250

| SHINING STARS FOUNDATION | NONE | 501 C(3) | ANNUAL WINTER GAMES | 3,5 |
|--------------------------|------|----------|---------------------|-----|
| PO BOX 1308 | | | SUPPORT | |
| ASPEN, CO 81612 | | | | |

Total .

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | | |
|--|------|---------|-----------------|-------|
| BASALT EDUCATION FOUNDATION PO BOX 1278 BASALT, CO 81621 | NONE | 501(C)3 | PROGRAM SUPPORT | 2,500 |
| | | | | |

| WILDERNESS WORKSHOPPO BOX 1442 CARBONDALE, CO 81623 | NONE | 501 C(3) | PROGRAM SUPPORT | |
|--|------|----------|-----------------|--|
| BASALI, CO 81621 | | | | |

| CARBONDALE, CO 81623 | NONE | 501 C(3) | PROGRAM SUPPORT | 2,50 |
|-----------------------------|------|----------|---------------------|------|
| YOUTH ZONE803 SCHOOL STREET | NONE | 501(C)3 | RESTORATIVE JUSTICE | 3,00 |

| CARBONDALE, CO 81623 | | , | | , |
|---|------|---------|---------------------|-------|
| YOUTH ZONE803 SCHOOL STREET GLENWOOD SPRINGS, CO 81601 | NONE | 501(C)3 | RESTORATIVE JUSTICE | 3,000 |

| U. 11. 12. 11. 12. 12. 12. 12. 12. 12. 12 | | | | |
|---|------|---------|--------------------------------|-------|
| YOUTH ZONE803 SCHOOL STREET GLENWOOD SPRINGS, CO 81601 | NONE | 501(C)3 | RESTORATIVE JUSTICE PROGRAM | 3,000 |

| GLENWOOD SPRINGS, CO 81601 | NONE | 301(0)3 | PROGRAM | 3,000 |
|----------------------------|------|---------|---------|---------|
| Total | | | ▶ 3a | 125,250 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

| EDUC FNDT FOR THE COLO NAT'L GUARD PO BOX 440889 AURORA, CO 800440889 | NONE | 501(C)3 | TUITION ASSISTANCE PROGRAM | 5,000 |
|--|----------------------------|---------|----------------------------|-------|
| a Paid during the year | | | | |
| , | or substantial contributor | | | |

| PO BOX 440889 AURORA, CO 800440889 | | | | |
|--|------|----------|-----------------|--------|
| FRIENDS OF CEDAR MESAPO BOX 338 BLUFF, UT 84512 | NONE | 501 C(3) | PROGRAM SUPPORT | 5,000 |
| GRANDSTAIRCASE ESCALANTE NAT'L MONU PO BOX 53 KANAB, UT 84741 | NONE | 501 C(3) | PROGRAM SUPPORT | 10,000 |

| BLUFF, UT 84512 | NONE | 501 C(3) | PROGRAM SUPPORT | 5,000 |
|--|------|----------|-----------------|---------|
| GRANDSTAIRCASE ESCALANTE NAT'L MONU PO BOX 53 KANAB, UT 84741 | NONE | 501 C(3) | PROGRAM SUPPORT | 10,000 |
| Total | | | ▶ 3a | 125,250 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

or substantial contributor

Name and address (home or business)

| | or substantial contributor | | | |
|--|----------------------------|---------|---|--------|
| a Paid during the year | | | | |
| LA PUENTE HOME INCPO BOX 1235 ALAMOSA, CO 81101 | NONE | 501(C)3 | FOOD BANK NETWORK OF THE SAN LUIS VA | 4,000 |
| STEADMAN DHILIDDON DESEARCH | NONE | 501/C)3 | PROGRAM SUPPORT | 10.000 |

| STEADMAN PHILIPPON RESEARCH INSTITU 181 W MEADOW DR STE 1000 VAIL, CO 81657 | NONE | 501(C)3 | PROGRAM SUPPORT | 10,0 |
|--|------|---------|-----------------|------|
| | | | | |

| INSTITU 181 W MEADOW DR STE 1000 VAIL, CO 81657 | | 331(3)3 | | 20,000 |
|---|------|---------|-----------------|--------|
| MUSIC ASSOC OF ASPEN 2 MUSIC SCHOOL RD | NONE | 501(C)3 | PROGRAM SUPPORT | 5,000 |

| | | | | 105.050 |
|--|------|---------|-----------------|---------|
| MUSIC ASSOC OF ASPEN 2 MUSIC SCHOOL RD ASPEN, CO 81611 | NONE | 501(C)3 | PROGRAM SUPPORT | 5,000 |
| VAIL, CO 81657 | | | | |

| MUSIC ASSOC OF ASPEN 2 MUSIC SCHOOL RD ASPEN, CO 81611 | NONE | 501(C)3 | PROGRAM SUPPORT | 5,000 |
|--|------|---------|-----------------|---------|
| Total | | | ▶ 3a | 125,250 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | | |
|---|------|---------|-----------------|-------|
| BEST FRIENDS ANIMAL SOCIETY 5001 ANGEL CANON RD | NONE | 501(C)3 | PROGRAM SUPPORT | 2,000 |

| KNAB, UT 84741 | | | | |
|--|------|---------|-----------------|-------|
| FRIENDS OF THE ASPEN ANIMAL SHELTER | NONE | 501(C)3 | PROGRAM SUPPORT | 3,500 |
| PO BOX 733 ASPEN.CO 81612 | | | | |

| SHELTER PO BOX 733 ASPEN, CO 81612 | | | | |
|--|------|---------|-----------------|-------|
| HABITAT FOR HUMANITY OF THE RF VALL | NONE | 501(C)3 | PROGRAM SUPPORT | 2,000 |

| PO BOX 733 ASPEN, CO 81612 | | | | |
|--|------|---------|-----------------|-------|
| HABITAT FOR HUMANITY OF THE RF VALL PO BOX 277 CARBONDALE, CO 81623 | NONE | 501(C)3 | PROGRAM SUPPORT | 2,000 |

| , | | | | |
|--|------|---------|-----------------|---------|
| HABITAT FOR HUMANITY OF THE RF VALL PO BOX 277 CARBONDALE, CO 81623 | NONE | 501(C)3 | PROGRAM SUPPORT | 2,000 |
| Total | | | > 3a | 125,250 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | | |
|--|------|---------|-----------------|-------|
| HUMANE SOCIETY OF THE US 2100 L ST NW WASHINGTON, DC 20037 | NONE | 501(C)3 | PROGRAM SUPPORT | 1,000 |

| WASHINGTON, DC 20037 | | | | |
|------------------------------------|------|---------|-----------------|-----|
| MARCH OF DIMES 1275 MAMARONECK AVE | NONE | 501(C)3 | PROGRAM SUPPORT | 500 |

| TITLE TOTAL ECOST | | | | |
|---|------|---------|-----------------|-----|
| MARCH OF DIMES 1275 MAMARONECK AVE WHITE PLAINS, NY 10605 | NONE | 501(C)3 | PROGRAM SUPPORT | 500 |
| | | | | 1 |

| 1275 MAMARONECK AVE WHITE PLAINS, NY 10605 | NONE | 301(0)3 | TROGRAM SOLLOW | 300 |
|---|------|---------|-----------------|-------|
| SALVATION ARMYPO BOX 2369 | NONE | 501(C)3 | PROGRAM SUPPORT | 1,500 |

| WHITE PLAINS, NY 10605 | | | | |
|---|------|---------|-----------------|-------|
| SALVATION ARMYPO BOX 2369 DENVER, CO 80201 | NONE | 501(C)3 | PROGRAM SUPPORT | 1,500 |

125,250

| SALVATION ARMYPO BOX 2369 DENVER, CO 80201 | NONE | 501(C)3 | PROGRAM SUPPORT | 1,50 |
|---|------|---------|-----------------|------|
| | | | | |

Total .

Recipient If recipient is an individual, show any relationship to status of contribution Amount

recipient

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

any foundation manager

or substantial contributor

NONE

Name and address (home or business)

WORLD WILDLIFE FUNDPO BOX 97180

WASHINGTON, DC 20090

Total .

| a Paid during the year | | | | |
|---|------|---------|-----------------|-----|
| COLORADO SKI & SNOWBOARD MUSEUM PO BOX 1976 VAIL, CO 81658 | NONE | 501(C)3 | PROGRAM SUPPORT | 500 |
| US COMMITTEE FOR UNICEF 333 E38TH ST NEW YORK NY 10016 | NONE | 501(C)3 | PROGRAM SUPPORT | 500 |

501(C)3

PROGRAM SUPPORT

▶ 3a

750

125,250

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

| Name and address (home or business) | or substantial contributor | recipient | | |
|-------------------------------------|----------------------------|-----------|-----------------|-----|
| a Paid during the year | | | | |
| PHYS COMMITTEE FOR RESPO | NONE | 501(C)3 | PROGRAM SUPPORT | 500 |

| PHYS COMMITTEE FOR RESPO | NONE | 501(C)3 | PROGRAM SUPPORT |
|--------------------------|------|---------|-----------------|
| 5100 WISCONSIN AVE NW | | | |
| WASHINGTON, DC 20016 | | | |

Total.

| PROGRAM SUPPORT | |
|-----------------|--|
| | |

125,250

| 0-1 | | | | A 41 - 4 - 4 B1 - 4 | | | |
|---------------------------------------|--------|-----------------|--|---------------------|--------------------|--|--|
| EIN: 74-2521631 | | | | | | | |
| Name: FRED AND ELLI ISELIN FOUNDATION | | | | | | | |
| TY 2019 Accounting Fees Schedule | | | | | | | |
| efile GRAPHIC print - DO NOT P | ROCESS | As Filed Data - | | D | LN: 93491318020750 | | |

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | |
|--------------------|--------|--------------------------|------------------------|---|--|--|
| ACCOUNTING AND TAX | 5,455 | 3,273 | | 2,182 | | |

PREPARATION

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | |
|--------------------------------------|-----------------|------|
| | | |
| TY 2019 Investments Corporat | e Stock Sched | tule |

DLN: 93491318020750

791,130

791,130

Name: FRED AND ELLI ISELIN FOUNDATION

EIN: 74-2521631

| | | _ | | | | |
|--|--|---|--|--|--|--|

SPECTRUM PFD 51V-02462

| investments corporation stock schedule | | | |
|--|---|--------------------------|----------------------------------|
| Name of Stock | E | nd of Year Book Value | End of Year Fair Market Value |
| NWQ-SM CAP 51V-04036 | | 171,394 | 171,394 |
| NWQ-LG CAP 51V-04039 | | 421,275 | 421,275 |
| LAZARD 51V-04216 | | 415,221 | 415,221 |
| LONDON DIV 51V-02405 | | 266,665 | 266,665 |
| SANTA BARBARA DIV 51V-02406 | | 285,547 | 285,547 |

DLN: 93491318020750

End of Year - Fair

Market Value

As Filed Data -

Name: FRED AND ELLI ISELIN FOUNDATION

EIN: 74-2521631

Other Assets Schedule Description Beginning of Year -End of Year - Book

Book Value

Value

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: 93491318020750 |
|--|-----------------|---------------------|--|
| TY 2019 Other Decreases Sch | edule | | |
| | | | |
| Name: | FRED AND ELL | I ISELIN FOUNDATION | |
| EIN: | 74-2521631 | | |
| | | | i |
| De | escription | | Amount |
| ADJUSTMENT TO BOOK VALUE OF INVES | STMENTS | | 5,804 |
| 2040 FEDERAL EVOICE TAV | | | |
| 2018 FEDERAL EXCISE TAX | | | 3,144 |
| 2019 FEDERAL EXCISE TAX 2019 FEDERAL EXCISE TAX | | | 1,072 |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN | l: 93491318020750 |
|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|
| TY 2019 Other Expenses Sche | dule | | | |
| Name: | FRED AND ELLI | ISELIN FOUNDA | TION | |
| EIN: | 74-2521631 | | | |
| Other Expenses Schedule | | | | |
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
| EVDENCEC | | | | |

| Other Expenses Schedule | 1 | 1 | 1 | |
|-------------------------|--------------------------------------|--------------------------|------------------------|---|
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
| EXPENSES | | | | |
| BANK SERVICE CHARGES | 150 | | | 150 |

1,548

ADR BANK FEES

RENT STORAGE

CLERICAL EXPENSE

INVESTMENT COMMISSIONS

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: 93491318020750 |
|--------------------------------------|-----------------|----------------------|---------------------|
| TY 2019 Other Increases Sche | dule. | | |
| | | | |
| Name: | FRED AND EL | LI ISELIN FOUNDATION | |
| EIN: | 74-2521631 | | |
| D. | escription | | Amount |
| NONDIVIDEND DISTRIBUTIONS (PRINCI | PAL PYMTS) | | 892 |
| INCREASE IN DEFERRED UNREALIZED G | `A TNI | | 370,815 |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN | N: 93491318020750 |
|--------------------------------------|---------------------------------|--------------------------|------------------------|---|
| TY 2019 Other Professional I | Fees Schedul | е | | |
| | | | | |
| | e: FRED AND EL N: 74-2521631 | LLI ISELIN FOUND | ATION | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |

31,126

31,126

INVESTMENT MANAGER FEES

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data | - | DLI | N: 93491318020750 |
|--------------------------------------|------------------------------|--------------------------|------------------------|---|
| TY 2019 Taxes Schedule | | | | |
| | | | | |
| | : FRED AND E : 74-2521631 | LLI ISELIN FOUND | DATION | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
| FOREIGN TAX PAID | 700 | 700 | | |

| FRED AND ELLI ISELIN FOUNDATION FORM 990-PF FYE 12/31/19 | VOIL | | | | | - | | | | | | | |
|--|--------------------------------------|--------------------------|---|--------------------------------|---|-------------------------|-------------------------|-------------------------------|--------------------------------|---------------------------------|------------|----------------|-------------------------------|
| SCHEDULE OF CAPITAL GAINS AND LOSSES MERRILL LYNCH ACCOUNTS SHORT TE ACCOUNT | AND LOSSES SHORT TERM PROCEEDS | SHORT TERM COST BASIS | WASH SALE ADJUSTMENT | SHORT TERM CAP. GAIN (LOSS) | LONG TERM LONG TERM PROCEEDS COST BASIS | LONG TERM COST BASIS | WASH SALE ADJUSTMENT | LONG TERM CAP. GAIN (LOSS) | GROSS | PROCEEDS PER ML'S 1099 DI | DIFFERENCE | TOTAL BASIS | TOTAL CAP. GAINS |
| ML NWQ-SM VAL 51V-04036 OTHER TRANSACTIONS | 14,850.69 | 21,345.33 | 104.31 | (6,390.33) | 55,963.25 | 50,818.37 | 123.90 | 5,268.78 | 70,813.94 | 70,813.94 | • | 72,163.70 | (1,121.55) |
| ML NWQ-LG CAP 51V-04039 CASH IN LIEU | 113,726.83 | 117,546.29 | 60.43 | (3,759.03) | 289,336.81 | 259,984.53 | 1,078.45 | 30,430.73 | 403,063.64 | 403,063.64 | | 377,530.82 | 26,671.70 |
| ML LAZARD 51V-04216 CASH IN LIEU | 29,903.76 | 30,710.44 | | (806.68) | 110,393.64 | 96,856.03 | • | 13,537.61 | 140,297.40 | 140,297.40 | | 127,566.47 | 12,730.93 |
| ML CHECKING 51V-04218 CASH IN LIEU | • | | *************************************** | | • | • | • | | • | | | | |
| ML LONDON DIV 51V-02405 CASH IN LIEU | 1,121.65 | 1,051.46 | | 70.19 | 63,813.70 | 52,866.25 | • | 10,947.45 | 64,935.35 | 64,935.35 | • | 53,917.71 | 11,017.64 |
| ML S. BARBARA 51V-02406 CASH IN LIEU | 11,356.24 | 12,211.01 | 1.07 | (853.70) | 86,401.64 | 70,772.13 | | 15,629.51 | 97,757.88 | 97,757.88 | | 82,983.14 | 14,775.81 |
| ML SPECTRUM PFD 51V-02462 ACCRUED MKT INTEREST | 41,360.35 | 42,236.72 | 2.71 | (873.83) | 60,345.95 | 61,064.69 | 2.62 | (716.12) | 101,706.30 | 101,706.30 | | 103,301.41 | (1,589.95) |
| TOTALS | 212.319.52 | 225.101.25 | 168.69 | (12,613.38) | 666,254.99 | 592,362.00 | 1,204.97 | 75,097.96 | 878,574.51 | 878,574.51 | | 817,463.25 | 62,484.58 |
| | | 224,932.56 | | | | 591,157.03 | | CAP GAIN DIST SEC LITIG. | 520.39 533.86 879,628.76 | | | | 520.39 533.86 63,538.83 |