EXTENDED TO NOVEMBER 16 2020 Return of Private Foundation

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

Form 990-PF Department of the Treasury

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.

Open to Public Inspection Internal Revenue Service For calendar year 2019 or tax year beginning and ending Name of foundation A Employer identification number THE CLUTHE AND WILLIAM B. OLIVER FOUNDATION FOR HEALTH AND AGING 76-0461993 Number and street (or P O box number if mail is not delivered to street address) Room/suite **B** Telephone number 800 820 GESSNER (713)627 - 2440City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here HOUSTON, TX 77024 G Check all that apply: Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation Check type of organization: If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 3,775,122.04 (Part I, column (d), must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income 0.00 Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 80,813.14 80,813.14STATEMENT 80,813.14 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) <18,439.40 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 3,772.96 RECEIVED 0.00 Capital gain net income (from Part IV, line 2) Net short-term capital gain 0.00 <u>ത</u> OCT 26 2020 O Income modifications क 10a Gross sales less returns and allowances b Less Cost of goods sold OGDEN, UT c Gross profit or (loss) 11 Other income 62,373.74 80,813.14 80,813.14 12 Total Add lines 1 through 11 119,748.96 12,000.00 12,000.00 107,748.96 Compensation of officers, directors, trustees, etc. 0.00 0.00 54,768.00 54,768.00 14 Other employee salaries and wages 52,949.40 15,912.96 15,912.96 37,036.44 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees 10,022.00 10,022.00 23,384.68 STMT 2 33,406.68 c Other professional fees 17 Interest 7,920.00 0.00 7,920.00 STMT 3 0.00 18 Taxes SCANNED MAY 3,939.86 0.00 3,939.86 19 Depreciation and depletion 20 Occupancy 11,406.16 0.00 0.00 11,406.16 21 Travel, conferences, and meetings 22 Printing and publications Other expenses

24 Total operating 3,972.38 3,972.38 26,629.70 22,657.32 STMT 4 24 Total operating and administrative 264,921.56 <u>310,768.76</u> 41,907.34 45,847.20 expenses. Add lines 13 through 23 42,700.00 42,700.00 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 353,468.76 41,907.34 45,847.20 307,621.56 Add lines 24 and 25 27 Subtract line 26 from line 12: <291,095.02b a Excess of revenue over expenses and disbursements 38,905.80 b Net investment income (if negative, enter -0-)

34,965.94

c Adjusted net income (if negative, enter -0-)

THE CLUTHE AND WILLIAM B. OLIVER FOUNDATION FOR HEALTH AND AGING

| | Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | | Beginning of year | End o | of year |
|----------------------|--|--|--------------------|--|-----------------------|
| | | | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | | | |
| | 2 | Savings and temporary cash investments | 2,400,490.13 | 924,453.45 | 924,453.45 |
| | 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 | | | |
| | , | • | | | |
| | 7 | Other notes and loans receivable | | - | ~ |
| | | Less: allowance for doubtful accounts | | | |
| Assets | 8 | Inventories for sale or use | | | |
| \ss | 9 | Prepaid expenses and deferred charges | | | |
| _ | 1 | Investments - U.S. and state government obligations | | | |
| | b | Investments - corporate stock STMT 5 | 1,289,463.55 | 2,478,999.22 | 2,843,548.13 |
| | C | Investments - corporate bonds | | <u>. </u> | |
| | 11 | Investments - land, buildings, and equipment basis | - | • | |
| | į | Less accumulated depreciation | | <u> </u> | |
| | 12 | Investments - mortgage loans | | | |
| | 13 | Investments - other | | | |
| | 14 | Land, buildings, and equipment; basis ► 21,485.12 | | | |
| | 1 | Land, buildings, and equipment: basis ► 21,485.12 tess accumulated depreciation STMT 6 ► 14,364.66 | 10,109.88 | 7,120.46 | 7,120.46 |
| | | Other assets (describe STATEMENT 7) | 1,604.59 | 7,120.46 0.00 | 0.00 |
| | 1 | Total assets (to be completed by all filers - see the | | | |
| | | instructions. Also, see page 1, item I) | 3.701.668.15 | 3.410.573.13 | 3,775,122.04 |
| | 17 | Accounts payable and accrued expenses | 0,7,02,7000120 | 0/110/0/00 | 07.707222102 |
| | 18 | Grants payable | | | |
| , | 19 | Deferred revenue | | | |
| Ë | l | | - | | <u> </u> |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| 2 | 21 | Mortgages and other notes payable | | | |
| | 22 | Other liabilities (describe | | | |
| | | T + 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 0 00 | 0 00 | |
| | 23 | Total liabilities (add lines 17 through 22) | 0.00 | 0.00 | |
| | | Foundations that follow FASB ASC 958, check here | | | |
| ces | | and complete lines 24, 25, 29, and 30 | | | , |
| ä | | Net assets without donor restrictions | | | |
| Ba | 25 | Net assets with donor restrictions | | | |
| 힏 | | Foundations that do not follow FASB ASC 958, check here ▶ 🛣 | | | |
| Ξ | , | and complete lines 26 through 30. | | | |
| Assets or Fund Balan | 26 | Capital stock, trust principal, or current funds | | 3,410,573.13 | |
| ets | 27 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0.00 | 0.00 | |
| SS | 28 | Retained earnings, accumulated income, endowment, or other funds | 0.00 | | |
| Net/ | 29 | Total net assets or fund balances | 3,701,668.15 | 3,410,573.13 | |
| Ž | | | | | ı |
| | 30 | Total liabilities and net assets/fund balances | 3,701,668.15 | 3,410,573.13 | |
| _ | | | | | |
| _ | art | Analysis of Changes in Net Assets of Fund B | | | |
| 1 | Total | net assets or fund balances at beginning of year - Part II, column (a), line | 29 | [] | |
| | (mus | t agree with end-of-year figure reported on prior year's return) | | 1 | 3,701,668.15 |
| 2 | Enter | amount from Part I, line 27a | | 2 | <291,095.02> |
| 3 | Other | increases not included in line 2 (itemize) | | 3 | 0.00 |
| | | ines 1, 2, and 3 | | 4 | 3,410,573.13 |
| | | eases not included in line 2 (itemize) | | 5 | 0.00 |
| | | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | olumn (b), line 29 | 6 | 3,410,573,13 |

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Form **990-PF** (2019)

Form 990-PF (2019),

| Part IV Capital Gains and | Losses for Tax on In | vestmen | t Income | | | | | | |
|---|---|-----------------|--|----------|--------------------------|---------------|--------------|------------------------------|----------------------------------|
| | ınd(s) of property sold (for examuse; or common stock, 200 shs. | | ate, | ` P | How a - Puro - Don | | | acquired day, yr.) | (d) Date sold (mo., day, yr.) |
| 1a FIDELITY INVESTM | ENTS | | | | | P | VARI | OUS | 12/31/19 |
| b CAPITAL GAINS DI | VIDENDS | | | | | | | | |
| <u> </u> | | | | | | | | | <u> </u> |
| <u>d</u> | | · | | | | | | | |
| <u>e</u> | (O Decree short allowed | 4.10 | | | | | 45.0 | Nova (1 | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | st or other basis expense of sale | | | | | Sain or (loss s (f) minus | |
| <u> </u> | | <u> </u> | 22,212. | 36 | | | | | |
| a b 3,772.96 | | | 22,212. | - | | | | | <22,212.36 3,772.96 |
| c | | | | | | - | | | <u> </u> |
| d | | | | | | | | | |
| e | | | <u>. </u> | | | | | | |
| Complete only for assets showing gain | n in column (h) and owned by th | ne foundation | on 12/31/69. | | | (1 |) Gains (| Col. (h) gain | minus |
| (:) FMV as of 12/21/60 | (j) Adjusted basis | | cess of col. (1) | | | col | | not less that (from col. | |
| (i) FMV as of 12/31/69 | as of 12/31/69 | over | col. (j), if any | | | <u></u> | LUSSES | | ('' <i>))</i> |
| a | | | | | | | | | <22,212.36 |
| b | | | | | | | | | 3,772.96 |
| С | | | | _ | | | | | |
| <u>d</u> | | | | \dashv | _ | | | | |
| <u>e</u> | | | | _ | | r — | | | |
| 0 Control and (and an add) | If gain, also enter i | in Part I, line | 7 |] [| | ĺ | | | -10 420 40 |
| 2 Capital gain net income or (net capital l | oss) ¶ If (loss), enter -0- | in Part I, line | 7 | 가 | 2 | | _ | <u> </u> | <18,439.40 |
| 3 Net short-term capital gain or (loss) as | | 1 (6): | | ٦ | | | | | |
| If gain, also enter in Part I, line 8, colur If (loss), enter -0- in Part I, line 8 | nn (c). | | | • | • | j | | | 0.00 |
| | r Section 4940(e) for | Reduced | Tax on Net | Inve | estn | nent Inc | ome | | 0.00 |
| (For optional use by domestic private foun | | | | | | | | | |
| (1 or optional use by domestic private foun | dations subject to the section 43 | oro(a) tax on | net mvestment me | ,01110 | ., | | | | |
| If section 4940(d)(2) applies, leave this pa | rt blank. | | | | | | | | |
| Was the foundation liable for the section 4 | 942 tax on the distributable amo | ount of any ve | ear in the base peri | od? | | | | | Yes X No |
| If "Yes," the foundation doesn't qualify und | ler section 4940(e). <u>Do</u> not comp | plete this part | t | | | | | | |
| 1 Enter the appropriate amount in each of | column for each year; see the ins | structions be | fore making any en | itries. | | | | | |
| (a) Base period years | (b) | | | (c) | | | | Distrit | (d) oution ratio |
| Calendar year (or tax year beginning in) | Adjusted qualifying distr | ibutions | Net value of non | | | | | | rided by col. (c)) |
| 2018 | | 366.97 | | | | <u>994.2</u> | | | .082546 |
| 2017 | | 80.53 | | | | <u>619.6</u> | | | .092979 |
| 2016 | | 345.78 | | | | <u> 176.6</u> | | | .111363 |
| 2015 | | 237.51 | | | | <u>319.5</u> | | | .093264 |
| 2014 | 407,0 | 082.49 | 4 | , 38 | 33, | <u> 141.5</u> | 2 | | .092875 |
| | | | | | | | | | 452225 |
| 2 Total of line 1, column (d) | | | | | | | 2 | | .473027 |
| 3 Average distribution ratio for the 5-year | | 1 line 2 by 5.0 | J, or by the number | r ot y | ears | | | | 004605 |
| the foundation has been in existence if | less than 5 years | | | | | | 3 | | .094605 |
| 4. Sakarakha ankurdi a af annahambahka um | | C | | | | | ١. | , | 004 500 10 |
| 4 Enter the net value of noncharitable-use | e assets for 2019 from Part X, III | 1e 5 | | | | | 4 | 3, | 894,588.19 |
| F. Mulliotiches Aberton O | | | | | | | _ | | 260 447 52 |
| 5 Multiply line 4 by line 3 | | | | | | | 5 | | 368,447.52 |
| C. Fater 40/ of not in restaurant record (400 | / of Doct I line 07h) | | | | | | | | 200 06 |
| 6 Enter 1% of net investment income (19 | of Part I, line 270) | | | | | | 6 | _ | 389.06 |
| 7 Add lines F and C | | | | | | | , | | 360 036 E0 |
| 7 Add lines 5 and 6 | | | | | | | 7 | | 368,836.58 |
| 8 Enter qualifying distributions from Part | XII line 4 | | | | | | 8 | | 307,621.56 |
| , , , | • | h and some | late that part weeks | 2 10/ | tau - | ato | | | <u> </u> |
| If line 8 is equal to or greater than line 7 See the Part VI instructions. | , check the box in Part VI, line 1 | u, and comp | uiai part using | a 1% | • tax r | alt. | | | |

CLUTHE AND WILLIAM B. OLIVER Form 990-PF (2019) FOUNDATION FOR HEALTH AND AGING 76-0461993 Page 4 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here
and enter "N/A" on line 1. (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: 778.12 **b** Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% 1 of Part I, line 27b 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-) 778. 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 778.12 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: 5,346.24 a 2019 estimated tax payments and 2018 overpayment credited to 2019 6a 0.00 **b** Exempt foreign organizations - tax withheld at source 6b 0.00 c Tax paid with application for extension of time to file (Form 8868) 6c 0.00 d Backup withholding erroneously withheld 6d 5,346.24 7 Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 4,568.12 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 , 568.12 Refunded Enter the amount of line 10 to be Credited to 2020 estimated tax 11 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 X any political campaign? 1a X 1b b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 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? Х 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0.00 (1) On the foundation. > \$ 0.00 (2) On foundation managers. ► \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0.00 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 X If "Yes," attach a detailed description of the activities. 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 X X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 4b 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? X 5 If "Yes," attach the statement required by General Instruction T 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 Х remain in the governing instrument? 6 Х 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

8a Enter the states to which the foundation reports or with which it is registered. See instructions.

year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV

of each state as required by General Instruction G? If "No," attach explanation

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)

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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

10 X Form **990-PF** (2019)

8b

Form 990-PF (2019). FOUNDATION FOR HEALTH AND AGING Part VII-A Statements Regarding Activities (continued)

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| <u> </u> | at the A continue hogaliting Activities (continued) | | | |
|----------|--|-------|-----|-------------------|
| | | | Yes | No |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | - 1 | |
| | section 512(b)(13)? If "Yes," attach schedule. See instructions | 11 | | <u> </u> |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | ,, | | 32 |
| 40 | If "Yes," attach statement. See instructions | 12 | Х | <u>X</u> |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Λ | |
| 1.4 | Website address ► <u>WWW.OLIVERFOUNDATION.ORG</u> The books are in care of ► THE CLUTHE AND WILLIAM B. OLIVER FO Telephone no. ► (713) | 627 | -24 | 40 |
| 17 | Located at ►820 GESSNER, SUITE 800, HOUSTON, TX ZIP+4 ►77 | | | <u> </u> |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | 0 2 4 | _ | $\overline{\Box}$ |
| | and enter the amount of tax-exempt interest received or accrued during the year | N | /A | |
| 16 | At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No |
| | securities, or other financial account in a foreign country? | 16 | | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | | | |
| | foreign country | | | |
| Pa | art VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a | During the year, did the foundation (either directly or indirectly): | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | 1 | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X 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 X 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 | 1 | | |
| | termination of government service, if terminating within 90 days.) | } | ł | |
| 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 | | Х |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | |
| ¢ | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | | | |
| | before the first day of the tax year beginning in 2019? | 1c | | <u> </u> |
| 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)): | | 1 | |
| a | At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines | | | |
| | 6d and 6e) for tax year(s) beginning before 2019? | | | |
| | If "Yes," list the years \(\bigs_{\text{\tint{\text{\tint{\text{\ti}\text{\texi{\texi\tint{\text{\text{\texic}\text{\text{\text{\text{\text{\text{\text{\text{\text{\te | | } | |
| 0 | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach | | ŀ | |
| | statement - see instructions.) N/A | 2b | | |
| c | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | - | |
| • | • | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | ŀ | | |
| | during the year? | İ | | |
| 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 | ļ | İ | |
| | 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 | - 1 | | |
| | of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, | | | |
| | Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A | _3b | | |
| | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | _4a | | <u>X</u> |
| þ | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | | | |
| | had not been removed from jeopardy before the first day of the tax year beginning in 2019? | 4b | 55 | X |

| Tart the Decision of the State | Olini Trze May Be | toquit ou (conti | rueu) | | | | | |
|---|--|-----------------------------------|--|-------|-----------------------|--|--|--|
| 5a During the year, did the foundation pay or incur any amount to: | | | | Y | es No | | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | n 4945(e))? | Y | es X No | | | | | |
| (2) Influence the outcome of any specific public election (see section 4955); of | or to carry on, directly or indir | | | | | | | |
| any voter registration drive? | | Y | es X No | | | | | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | | | | | | | | |
| (4) Provide a grant to an organization other than a charitable, etc., organizatio | n described in section | | | | | | | |
| 4945(d)(4)(A)? See instructions | | Y | es X 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? | | | es X No | | | | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und | der the exceptions described | ın Regulations | | . | | | | |
| section 53.4945 or in a current notice regarding disaster assistance? See instri | uctions | | N/A | 5b | | | | |
| Organizations relying on a current notice regarding disaster assistance, check t | here | | | | | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi | rom the tax because it mainta | ined | | | | | | |
| expenditure responsibility for the grant? | D. | J/A 🗌 Y | es 🔲 No | 1 | | | | |
| 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? | | Y | es X No | | _ | | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | | | 6b | X | | | |
| If "Yes" to 6b, file Form 8870. | | | | | | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | helter transaction? | | es 🗓 No 📙 | | | | | |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu | itable to the transaction? | | N/A | 7b | | | | |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$ | 1,000,000 in remuneration o | r | | | | | | |
| excess parachute payment(s) during the year? | | <u></u> | es X No | | | | | |
| Part VIII Information About Officers, Directors, Trust | ees, Foundation Ma | nagers, Highl | у | | | | | |
| Paid Employees, and Contractors | | . <u></u> | | | | | | |
| List all officers, directors, trustees, and foundation managers and t | | | T (B - · · · · · | | | | | |
| (-) Name and address | (b) Title, and average hours per week devoted | (c) Compensation (If not paid, | (d) Contributions to employee benefit plans and deferred | (e) E | Expense unt, other | | | |
| (a) Name and address | to position | enter -0-) | compensation | allo | wances | | | |
| THOMAS R. WOEHLER M.D. | PRESIDENT/TRU | STEE | - | 1 | | | | |
| 320 GESSNER, SUITE 800 | | | | ĺ | | | | |
| HOUSTON, TX 77024 | 20.00 | 12,000.00 | 15,912.96 | | 0.00 | | | |
| DEBORAH L. WOEHLER | VP,SEC & TREA | S./TRUSTE | E | 1 | | | | |
| 320 GESSNER, SUITE 800 | li . | | 1 | 1 | | | | |
| HOUSTON, TX 77024 | 40.00 | 107,748.96 | | | 0.00 | | | |
| MOLLY K. WURZER | ASST.SEC. & T | REAS./TRU | STEE | | | | | |
| 320 GESSNER, SUITE 800 | | ĺ | Ì | 1 | | | | |
| HOUSTON, TX 77024 | 1.00 | 0.00 | 0.00 | | 0.00 | | | |
| | | | | 1 | | | | |
| | | } | | 1 | | | | |
| | | | | | | | | |
| Compensation of five highest-paid employees (other than those inc | | enter "NONE." | (al) 0 | | | | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week | (c) Compensation | (d) Contributions to employee benefit plans | (e) E | expense ant, other | | | |
| (a) Name and address of each employee paid more than \$50,000 | devoted to position | (C) Compensation | and deferred compensation | allo | wances | | | |
| | PROGRAM DIREC | TOR | | 1 | | | | |
| SUITE 800, HOUSTON, TX 77024 | 20.00 | 54,768.00 | 4,222.16 | | 0.00 | | | |
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| otal number of other employees paid over \$50,000 | | | • | | 0 | | | |
| - | | | | | | | | |

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| 3 Five highest-paid independent contractors for pro | ofessional services. If none, enter " | NONE." | |
|--|---------------------------------------|---------------------|------------------|
| (a) Name and address of each person paid | d more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | | |
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| | <u> </u> | | |
| otal number of others receiving over \$50,000 for professiona Part IX-A Summary of Direct Charitable | al services | - | (|
| | | | |
| List the foundation's four largest direct charitable activities dui number of organizations and other beneficiaries served, confe | | | Expenses |
| N/A | | | |
| | | | |
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| Part IX-B Summary of Program-Related | Investments | | <u> </u> |
| Describe the two largest program-related investments made by | | es 1 and 2. | Amount |
| N/A | | | |
| | | | |
| | | | <u></u> |
| | | | 1 |
| | | | |
| | | | |
| All other program-related investments. See instructions. | | | |
| | | | - |
| | | | + |
| | | | 1 |
| | | | 1 |
| | | | 1 |
| | | | 7 |

Page 8

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndatio | ns, 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 | 2,249,438.99 |
| b | Average of monthly cash balances | 1b | 1,704,457.65 |
| c | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 3,953,896.64 |
| e | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0.00 | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0.00 |
| 3 | Subtract line 2 from line 1d | 3 | 3,953,896.64 |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 59,308.45 |
| 5 | Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 3,894,588.19 |
| 6 | Minimum investment return Enter 5% of line 5 | 6 | 194,729.41 |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an | d certa | ın |
| | foreign organizations, check here 🕨 🗶 and do not complete this part.) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | |
| 2a | Tax on investment income for 2019 from Part VI, line 5 | | |
| b | Income tax for 2019. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | 2c | |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| <u></u> | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | |
| P | art 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 | 307,621.56 |
| b | Program-related investments - total from Part IX-B | 1b | 0.00 |
| 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 | 307,621.56 |
| 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 | 5 | 0.00 |
| 6 | Adjusted qualifying distributions Subtract line 5 from line 4 | 6 | 307,621.56 |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q | ualifies | for the section |

4940(e) reduction of tax in those years.

| Part XIII Undistributed Income (s | ee instructions) | N/A | | / |
|--|--|--|----------|-------------|
| | (a) | (b) | (c) | (d) |
| | Corpus | Years prior to 2018 | 2018 | 2019 |
| 1 Distributable amount for 2019 from Part XI, | | | | |
| line 7 | . <u> </u> | | | / |
| 2 Undistributed income, if any, as of the end of 2019 | | | | |
| a Enter amount for 2018 only | | | | / |
| b Total for prior years: | | | | |
| ,, | | | | / |
| 3 Excess distributions carryover, if any, to 2019: | | | / | |
| a From 2014 | | | | |
| b From 2015 | | | | Ì |
| c From 2016 | | | | |
| d From 2017 | | | | |
| e From 2018 | | | | |
| f Total of lines 3a through e | | | _/ | |
| 4 Qualifying distributions for 2019 from | | | | |
| Part XII, line 4: ► \$ | | | | |
| a Applied to 2018, but not more than line 2a | | | <u> </u> | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | <u></u> | | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | | | | |
| d Applied to 2019 distributable amount | | / | | |
| e Remaining amount distributed out of corpus | | + / | | |
| 5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | |
| 6 Enter the net total of each column as indicated below: | | | | : |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | | | |
| d Subtract line 6c from line 6b. Taxable | _/ | | | |
| amount - see instructions | | | | |
| e Undistributed income for 2018. Subtract line | / | | | |
| 4a from line 2a Taxable amount - see instr. | | | | |
| f Undistributed income for 2019. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2020 | | | | |
| 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 applied on line 5 of line 7 | | | | |
| 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 | | | | |

THE CLUTHE AND WILLIAM B. OLIVER

Form 990-PF (2019) FOUNDATION FOR HEALTH AND AGING

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

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| Turk XIV Trivate operating I | buridations (see ins | Structions and rait vir | 7, question 5) | | |
|---|------------------------------|-----------------------------|-----------------------------|----------------------------|--------------------|
| 1 a If the foundation has received a ruling of | r determination letter that | it is a private operating | | | |
| foundation, and the ruling is effective for | r 2019, enter the date of t | he ruling | ▶ 06/ | 05/95 | |
| b Check box to indicate whether the found | lation is a private operatin | ig foundation described ii | n section X | 4942(j)(3) or 49 |)42(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum | (a) 2019 | (b) 2018 | (c) 2017 | (d) 2016 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | 34,965.94 | 193,749.71 | 49,563.98 | 54,965.48 | 333,245.11 |
| b 85% of line 2a | | 164,687.25 | | 46,720.66 | 283,258.34 |
| c Qualifying distributions from Part XII, | | | | | |
| line 4, for each year listed | 307,621.56 | 319,866.97 | 359,980.53 | 417,382.47 | 1,404,851.53 |
| d Amounts included in line 2c not | 1 | | | 1 | |
| used directly for active conduct of | | | | | |
| exempt activities | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | | |
| Subtract line 2d from line 2c | 307.621.56 | 319.866.97 | 359.980.53 | 417,382.47 | 1.404.851.53 |
| 3 Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: | 1 | 3137000.37 | 3377300.33 | 417,302.47 | 1,404,031,33 |
| (1) Value of all assets | | | | | X0.00 |
| (2) Value of assets qualifying | | | | | |
| under section 4942(j)(3)(B)(i) | | | | | 0.00 |
| b "Endowment" alternative test - enter 2/3 of minimum investment return | | | | | |
| shown in Part X, line 6, for each year | | | | | |
| listed | 129,819.61 | <u> 129,166.47</u> | 129,053.99 | 124,172.55 | 512,212.62 |
| 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) | | | | | 0.00 |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | 0.00 |
| (3) Largest amount of support from | | | | - " | |
| an exempt organization | | | | | 0.00 |
| (4) Gross investment income | | | | | 0.00 |
| Part XV Supplementary Info | | | f the foundation | had \$5,000 or mo | re in assets |
| at any time during the | he year-see instr | uctions.) | | | |
| 1 Information Regarding Foundation | n Managers: | | | · - | |
| a List any managers of the foundation who year (but only if they have contributed m | | | ibutions received by the f | oundation before the clos | e of any tax |
| NONE | | | | | |
| b List any managers of the foundation who other entity) of which the foundation has | | | or an equally large portio | n of the ownership of a pa | irtnership or |
| NONE | | | | | |
| 2 Information Regarding Contributed | | | | | |
| Check here ► X if the foundation or the foundation makes gifts, grants, etc., t | | | | | ests for funds. If |
| a The name, address, and telephone numb $\mathbf{N/A}$ | er or email address of the | e person to whom applica | itions should be address | ed: | |
| b The form in which applications should be | e submitted and informati | on and materials they sho | ould include: | | |
| N/A c Any submission deadlines: | | | | | |
| N/A | | <u> </u> | | | |
| ${f d}$ Any restrictions or limitations on awards, ${f N/A}$ | , such as by geographical | areas, charitable fields, k | ands of institutions, or ot | her factors: | |

Form 990-PF (2019)

FOUNDATION FOR HEALTH AND AGING

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient a Paid during the year DEPELCHIN CHILDREN'S CENTER N/A PC GENERAL SUPPORT 4950 MEMORIAL DRIVE HOUSTON, TX 77007 2.000.00 FORT BEND COUNTY KIDS & COPS, INC. N/A GOV HEALTH & NUTRITION PROGRAMS 1410 WILLIAMS WAY BLVD RICHMOND TX 77469 4,500.00 FORT BEND ISD ELEMENTARY SCHOOLS -N/A GOV HEALTH & NUTRITION FOODIE TOUR PROGRAMS 16431 LEXINGTON BLVD. SUGAR LAND, TX 77479 300.00 HOUSTON INDEPENDENT SCHOOL DISTRICT N/A PC GENERAL SUPPORT FOUNDATION 4400 WEST 18TH STREET HOUSTON TX 77095 100,00 RITA DRABEK ELEMENTARY, FORT BEND ISD GOV HEALTH & NUTRITION 11325 LAKE WOODBRIDGE DR. PROGRAMS SUGAR LAND TX 77498 3,000,00 SEE CONTINUATION SHEET(S) ➤ 3a Total 42,700.00 **b** Approved for future payment NONE

Form **990-PF** (2019)

0.00

▶ 3b

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Total

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient TURNER ELEMENTARY, PASADENA ISD GOV HEALTH & NUTRITION N/A 4333 LILY STREET PROGRAMS PASADENA, TX 77505 8,000.00 YES PREP PUBLIC SCHOOLS, INC. PC HEALTH & NUTRITION N/A PROGRAMS 5515 SOUTH LOOP EAST, SUITE B HOUSTON TX 77033 3,000,00 MALALA ELEMENTARY, FORT BEND ISD N/A GOV HEALTH & NUTRITION 7817 GRAND MISSION BLVD PROGRAMS RICHMOND, TX 77407 2,000.00 PC GENERAL SUPPORT WIKIMEDIA FOUNDATION, INC. N/A 1 MONTGOMERY STREET, SUITE 1600 SAN FRANCISCO, CA 94104 50.00 GOV HONEY ELEMENTARY SCHOOL, LUBBOCK ISD N/A HEALTH & NUTRITION **3615 86TH STREET** PROGRAMS LUBBOCK TX 79423 1,000,00 VAL VERDE REGIONAL MEDICAL CENTER N/A PC HEALTH & NUTRITION 801 N. BEDELL AVE PROGRAMS DEL RIO, TX 78840 750.00 WOODVIEW ELEMENTARY, SPRING BRANCH N/A GOV HEALTH & NUTRITION TSD PROGRAMS 9749 CEDARDALE HOUSTON, TX 77055 5,000,00 HEARNE ELEMENTARY, ALIEF ISD N/A GOV HEALTH & NUTRITION PROGRAMS 13939 RIO BONITO RD HOUSTON, TX 77083 3,000.00 GOV EAGLE HEIGHTS ELEMENTARY, AZLE ISD N/A HEALTH & NUTRITION PROGRAMS 300 ROE ST. AZLE, TX 76020 2,000.00 FORT BEND INDEPENDENT SCHOOL DISTRICT GOV N/A HEALTH & NUTRITION 16431 LEXINGTON BLVD. PROGRAMS SUGAR LAND TX 77479 3,000.00 Total from continuation sheets 32,800,00

THE CLUTHE AND WILLIAM B. OLIVER FOUNDATION FOR HEALTH AND AGING

76-0461993

| Part XV Supplementary Informati | TION FOR HEALTH | AND AGING | 76-04 | 61993 |
|--|--|--------------------------------|--|-------------|
| 3 Grants and Contributions Paid During the | | | | |
| Recipient | If recipient is an individual | T | T | |
| 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 |
| | Of Substantial Continuotor | Todiploit | | |
| | | | | |
| UNDERLICH INTERMEDIATE, KLEIN ISD | N/A | GOV | HEALTH & NUTRITION | |
| 200 SPRING CYPRESS | | | PROGRAMS | F 000 |
| LEIN, TX 77379 | - | | | 5,000. |
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| Total from continuation sheets | | | | |

THE CLUTHE AND WILLIAM B. OLIVER Form 990-PF (2019) FOUNDATION FOR HEALTH AND AGING

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Part XVI-A **Analysis of Income-Producing Activities**

| nter gro | ss amounts unless otherwise indicated. | | business income | | ded by section 512, 513, or 514 | (e) |
|-------------|--|--------------------|--------------------------|-----------------------|---------------------------------|-------------------|
| | | (a) Business | (b) | (C) Exclu- sion | (d) | Related or exempt |
| 1 Progra | am service revenue: | code | Amount | code | Amount | function income |
| a | | - | | <u> </u> | | |
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| † | | | | | | |
| - | es and contracts from government agencies | | | ļ | | |
| | ership dues and assessments | | <u> </u> | | | <u> </u> |
| | st on savings and temporary cash | | | | | |
| Invest | | | | 1 4 | 00 010 14 | |
| | nds and interest from securities | ļ | | 14 | 80,813.14 | |
| | ntal income or (loss) from real estate: | | | | | |
| | ot-financed property | | | _ | | |
| | t debt-financed property | | | | | |
| | ntal income or (loss) from personal | | | | | |
| proper | | | | <u> </u> | | |
| | nvestment income | | | | | |
| | r (loss) from sales of assets other | | | | 40 400 40 | |
| | ventory | | | 18 | <u><18,439.40</u> | |
| | ome or (loss) from special events | | | | | |
| | profit or (loss) from sales of inventory | }- | _ | | | |
| 1 Other i | evenue: | | | | | |
| | | · | | | | |
| | | · | | | | |
| | | | | | | <u> </u> |
| d | _ | - - | | | | . |
| e | -1 Add1 (h) (d)d (s) | | 0.00 | | 62,373.74 | 0 00 |
| | al. Add columns (b), (d), and (e) | <u> </u> | 0.00 | | | 0.00 62,373.74 |
| | Add line 12, columns (b), (d), and (e) | | | | 13 | 04_,3/3./4 |
| | sheet in line 13 instructions to verify calculations.) | | | | | |
| Part X | VI-B Relationship of Activities | to the Accor | nplishment of Ex | emp | t Purposes | |
| Line No | Explain below how each activity for which inc | ome is reported in | column (a) of Part XVI-A | contrib | uted importantly to the accord | nnlichment of |
| ▼ | the foundation's exempt purposes (other than | | | 0011010 | area importantly to the accom | iphomnent of |
| | N/A | | | | | |
| | 17.22 | | <u> </u> | | | |
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19) FOUNDATION FOR HEALTH AND AGING 76-0461993
Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

| Did the | organization directly or indi | rectly engage in | any of the followir | ng with any other organiza | ation de | escribed in sect | tion 501(c) | | Yes | No |
|-----------------------------|--|---------------------|--------------------------|-----------------------------|--|-------------------|-------------------------------|---------------------------------|---------------|------------|
| (other | than section 501(c)(3) orgar | nizations) or in s | ection 527, relatin | g to political organization | ıs? | | | | | |
| a Transfe | ers from the reporting found | ation to a nonch | arıtable exempt or | ganization of: | | | | | | |
| (1) Ca | | | · | - | | | | 1a(1) | | x |
| • • | her assets | | | | | | | 1a(2) | | Х |
| | ransactions; | | | | | | | | | |
| | les of assets to a noncharita | hle exempt orga | nization | | | | | 16(1) | | x |
| | rchases of assets from a no | | | | | | | 1b(2) | | X |
| | ental of facilities, equipment, | | ipt organization | | | | | 1b(3) | | X |
| • • | imbursement arrangements | | | | | | | 1b(4) | | X |
| | ans or loan guarantees | | | | | | | 1b(5) | | X |
| | rformance of services or me | mharahin ar fun | draining policitatio |)na | | | | | | X |
| | | | | | | | | 1b(6) | \rightarrow | X |
| | g of facilities, equipment, ma | - | | · - | ميميية | aba tha fa | | | | |
| | nswer to any of the above is | | - | | | | | | eis, | |
| | ices given by the reporting for | | | eg less than fair market v | alue in | any transaction | n or snaring arrangeme | ent, snow in | | |
| | (d) the value of the goods, | | | | 1 | | | | | |
| a) Line no | (b) Amount involved | (c) ivair | | exempt organization | | (u) Description | n of transfers, transactions, | and sharing arr | angeme | nts |
| | · <u></u> | ļ | N/A | | | | | | | |
| | <u></u> | | | | | | | _ | | |
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| On lothof | oundation directly or indirect | the affiliated with | or related to one | or mare toy evempt area | | | | - - | | |
| | | | | of more tax-exempt orga | amzanoi | iis described | | | X | 1 No |
| | on 501(c) (other than section | | n section 5277 | | | | | Yes | لما | טאו נ |
| <u>D II Yes,</u> | complete the following sche (a) Name of org | | | (h) Tuno of organization | <u>, </u> | | (c) Description of relati | onchin | | |
| | | anization | | (b) Type of organization | " | | (c) Description of relati | uriship | | |
| | N/A | | | | +- | | | | | |
| | | | | | - | | | | | |
| | - <u> </u> | | | | + | | | _ | | |
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| | | | | | | | | | | |
| Und | der penalties of perjury, I declare t | that I have examine | d this return, including | g accompanying schedules at | nd stater | ments, and to the | best of my knowledge | May the IRS d | | |
| Sign and | belief, it is true, correct, and com | | or preparer (ourier and) | t & & | . | | C SECR & | return with the shown below? | | |
| Here | molly of | <u>س –</u> | ~ | 10/21/21 | <u> </u> | TREAS | | X Yes | | No |
| S | ignature of officer or thustee | (. | \mathcal{O} | Date | , | Title | | | | |
| | Print/Type preparer's na | ime | Preparer's si | gnature | Date | e | Check If PT | IN | | |
| | | | | 10 C1 | | 11 | self- employed | | | |
| Paid | DENISE M. | STONER | Denis | 111. Homes | 10 | 021 126 | l I | 01235 | 366 | |
| Prepare | | | WURZER P | .C. | / | | Firm's EIN ▶ 74 | | | |
| Use Onl | | w 1 | | - | | | | | | |
| | Firm's address ▶ 82 | 0 GESSN | בא פוודית | E 800 | | | | | | |
| | | | rx 77024 | 1 000 | | | Phone no. (713 | 3) 627- | -24 | 4 ∩ |
| | <u> </u> | OBTON, | <u> </u> | | | | Tritone no. (713 | Form 990 | | |
| | | | | | | | | ていいい ララリ | | 2019) |

| FORM 990-PF | DIVIDEND | S AND INTER | EST FROM SECUF | RITIES S' | PATEMENT 1 |
|---|-----------------------------|------------------------------|-----------------------------------|-----------------------------------|-------------------------------|
| SOURCE | GROSS AMOUNT | CAPITAL GAINS DIVIDEND | REVENUE | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME |
| FIDELITY INVESTMENTS FIDELITY | 76,162.8 | 8 0. | 00 76,162.88 | 76,162.88 | 76,162.88 |
| INVESTMENTS PEPSICO INC. YUM BRANDS | 3,772.9 3,792.9 857.2 | 8 0. | 00 3,792.98 | 3,792.98 | 0.00 3,792.98 857.28 |
| TO PART I, LINE 4 | 84,586.1 | 3,772. | 96 80,813.14 | 80,813.14 | 80,813.14 |
| FORM 990-PF | 0 | THER PROFES | SIONAL FEES | Si | FATEMENT 2 |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| LEGAL, ACCOUNTING & ADMINISTRATIVE FEES | _ | 33,406.68 | 10,022.00 | 10,022.00 | 23,384.68 |
| TO FORM 990-PF, PG 1 | , LN 16C | 33,406.68 | 10,022.00 | 10,022.00 | 23,384.68 |
| FORM 990-PF | | TAX | ES | Sī | PATEMENT 3 |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| EXCISE TAXES | _ | 7,920.00 | 0.00 | 0.00 | 7,920.00 |
| TO FORM 990-PF, PG 1 | , LN 18 | 7,920.00 | 0.00 | 0.00 | 7,920.00 |

| FORM 990-PF | OTHER EXPENSES | | STATEMENT 4 | |
|-----------------------------------|------------------------------|-----------------------------------|-------------------------------|---|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| WEBSITE EXPENSES | 4,313.30 | 0.00 | 0.00 | 4,313.30 |
| DUES AND MEMBERSHIP FEES | 2,780.38 | 278.04 | 278.04 | 2,502.34 |
| MARKETING & PROMOTION | 3,061.98 | 0.00 | 0.00 | |
| OFFICE SUPPLIES | 1,001.42 | 600.85 | 600.85 | |
| PHONE EXPENSE | 3,143.68 | 628.74 | 628.74 | |
| POSTAGE EXPENSE | 570.67 | 114.13 | 114.13 | - |
| INSURANCE - OFFICER & | 370.07 | 114113 | 111.1. | 250154 |
| DIRECTORS | 2,735.00 | 0.00 | 0.00 | 2,735.00 |
| INSURANCE - WORKMAN'S COMP | 431.00 | 0.00 | 0.00 | - |
| BOOKS AND VIDEOS | 169.05 | 0.00 | 0.00 | |
| | 109.03 | 0.00 | 0.00 | 103.03 |
| TEEN BOARD MEETINGS & | 2 520 22 | 0 00 | 0.00 | 2 520 22 |
| SUPPLIES | 3,530.22 | 0.00 | 0.00 | 3,530.22 |
| BANK CHARGES AND BANK CARD | F1 F0 | F1 F0 | F1 F0 | |
| FEES | 51.59 | 51.59 | 51.59 | |
| GENERAL LIABILITY INSURANCE | 966.00 | 966.00 | 966.00 | • |
| COMPUTER SUPPLIES | 1,333.03 | 1,333.03 | 1,333.03 | |
| MEALS & ENTERTAINMENT | 695.27 | 0.00 | 0.00 | |
| PAYROLL EXPENSE | 186.72 | 0.00 | 0.00 | |
| PARKING | 27.00 | 0.00 | 0.00 | |
| SEMINARS AND WORKSHOPS | 631.39 | 0.00 | 0.00 | |
| UMBRELLA POLICY | 1,002.00 | 0.00 | 0.00 | 1,002.00 |
| TO FORM 990-PF, PG 1, LN 23 | 26,629.70 | 3,972.38 | 3,972.38 | 22,657.32 |
| | | | | = = = = = = = = = = = = = = = = = = = |
| FORM 990-PF | CORPORATI | E STOCK | S | STATEMENT 5 |
| DESCRIPTION | | вос | PK VALUE | AIR MARKET VALUE |
| 0.4.2 GH DEDGE GO THEODERS TO THE | | _ | 1 00 | 100 540 14 |
| 942 SH PEPSICO INCORPORATED | | | 1.00 | 128,743.14 |
| 61 SH PEPSICO INCORPORATED | | ^ 4 | 3,312.39 | 8,336.87 |
| FIDELITY INVESTMENTS | | 2,4 | 175,684.83 | 2,687,530.88 |
| 188 SH YUM INC. | | - | 1.00 | 18,937.24 |
| TOTAL TO FORM 990-PF, PART I | , LINE 10B | 2,4 | 78,999.22 | 2,843,548.13 |

| FORM 990-PF DEPRECIATION OF ASS | ETS NOT HELD FOR | INVESTMENT | STATEMENT 6 |
|---|-------------------------------|-----------------------------|----------------------|
| DESCRIPTION | COST OR OTHER BASIS | ACCUMULATED DEPRECIATION | BOOK VALUE |
| COMPUTER EQUIPMENT | 8,794.30 | 8,794.30 | 0.00 |
| IPHONES, IPADS AND APPLE COMPUTERS COMPUTER EQUIPMENT | 11,740.38 950.44 | 5,543.96 26.40 | 6,196.42 924.04 |
| TOTAL TO FM 990-PF, PART II, LN 1 | 21,485.12 | 14,364.66 | 7,120.46 |
| FORM 990-PF | OTHER ASSETS | | STATEMENT 7 |
| DESCRIPTION | BEGINNING OF YR BOOK VALUE | END OF YEAR BOOK VALUE | FAIR MARKET VALUE |
| OTHER SHORT TERM RECEIVABLE | 1,604.59 | 0.00 | 0.00 |
| TO FORM 990-PF, PART II, LINE 15 | 1,604.59 | 0.00 | 0.00 |