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OMB No 1545-0052

2019

# **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

Form 990-PF

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

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

Open to Public Inspection

For	caler	ndar year 2019, or tax year beginning 01-01-20	19 , aı	nd er	nding 12-31-	2019	
		indation INGEBRITSON FOUNDATION INC			A Employer Id	entification numbe	er
	L JACK	INCESTATION TO CONTINUE			81-3517395		
		f street (or P O box number if mail is not delivered to street address) AQUERO DRIVE	Room/suite		<b>B</b> Telephone nu	mber (see instructio	ns)
,	) J G L V	AQUENO DRIVE			(602) 980-2726	<b>;</b>	
		, state or province, country, and ZIP or foreign postal code .E, AZ 852582097	•		<b>C</b> If exemption	application is pendir	ng, check here
					-		▶ ∟
G Ch	ieck al	I that apply	former public charity			ganizations, check h	▶ ∟
		☐ Final return ☐ Amended return				ganizations meeting k here and attach co	
ш сь	نظ بامد	Pe of organization ✓ Section 501(c)(3) exempt private				ındatıon status was	
_			e private foundation		under sectio	n 507(b)(1)(A), che	ck here ► L
			☑ Cash ☐ Accru	ıal	F If the founda	ation is in a 60-mont	h termination -
of '	/ear (f	rom Part II, col (c),				n 507(b)(1)(B), che	
ште	10)	>\$ 11,639,664	be on cash basıs )				
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Davianus and				(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b)	Net investment income	(c) Adjusted net income	for charitable purposes
		equal the amounts in column (a) (see instructions) )	books				(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	3,760,217				
	2	Check ▶ ☐ If the foundation is <b>not</b> required to attach					
	_	Sch B					
	3	Interest on savings and temporary cash investments	1,803		1,803		
	4	Dividends and interest from securities	160,877		160,877		
	5a	Gross rents					
a)	b 6a	Net rental income or (loss)  Net gain or (loss) from sale of assets not on line 10	256,836				
Ĕ	b		250,000				
Revenue		Gross sales price for all assets on line 6a					
ã	7	Capital gain net income (from Part IV, line 2)			256,836		
	8	Net short-term capital gain					
	9	Income modifications					
	10a b	Gross sales less returns and allowances Less Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	4,179,733		419,516		
	13	Compensation of officers, directors, trustees, etc	, ,		0		
	14	Other employee salaries and wages					
Š	15	Pension plans, employee benefits					
nse	16a	Legal fees (attach schedule)					
Administrative Expenses	ь	Accounting fees (attach schedule)					
es es	С	Other professional fees (attach schedule)					
Ĕ	17	Interest					
Stra	18	Taxes (attach schedule) (see instructions)					
ੂ	19	Depreciation (attach schedule) and depletion					
Ē	20	Occupancy					
ב ב	21	Travel, conferences, and meetings					
<u></u>	22	Printing and publications	<b>05-1</b> CE 410		CF 410		,
E E	23	Other expenses (attach schedule)	<b>9</b> 65,418	1	65,418		
Operating and	24	Total operating and administrative expenses.  Add lines 13 through 23	65,418		65,418		,
ă	25	Contributions, gifts, grants paid	811,742		05,418		811,742
	26	Total expenses and disbursements. Add lines 24 and	011,772				011,772
		25	877,160		65,418		811,742
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements	3,302,573				
	b	Net investment income (If negative, enter -0-)	,,		354,098		
	С	Adjusted net income (If negative, enter -0-)					
-or	Daner	work Reduction Act Notice, see instructions.			Cat No. 11280	/ Г-	rm 000-DE (2010

102,091

3.590.529

432,315

432,315

-3,129,132

6,287,346

3,158,214

3,590,529

(چ

117,496

9,579,698

388,742

388,742

-398,963

9,589,919

9,190,956

9,579,698

3,158,214

3,302,573

2,730,169

9,190,956

9,190,956

Form 990-PF (2019)

1

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3

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6

125,561

11.639.664

11

12

13

14

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17 18

19 20

21

22

23

24

25

28

30

Part III

2

3

Liabilities

**Fund Balances** 

ō 26

Assets 27

Net 29 Investments—land, buildings, and equipment basis ▶ Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule). . . . . .

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

**Analysis of Changes in Net Assets or Fund Balances** 

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Paid-in or capital surplus, or land, bldg, and equipment fund

Foundations that follow FASB ASC 958, check here

Investments—other (attach schedule) . . . .

Total assets (to be completed by all filers—see the

Deferred revenue . . . . . . . . . . . . . . . . .

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions . .

Net assets with donor restrictions . .

and complete lines 26 through 30.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Investments—mortgage loans . . . .

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe -\_

Grants payable

T GIT IV	Capital Gallis	and Losses for Tax on Thives	CHICHE THEOME	·		T
		pe the kınd(s) of property sold (e g , arehouse, or common stock, 200 sh	<b>(b)</b> How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )	
<b>1a</b> See	Addıtıonal Data Tabl	le				
b						
С						
d						
e						
1	(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	h) r (loss) ) minus (g)
a See	Addıtıonal Data Tabl	le			, , , ,	
b						
d						
	nlete only for accets	s showing gain in column (h) and ov	wheel by the foundation	on 12/31/69	,	1\
	iplete offiy for assets	(j)	<u> </u>	(k)		<b>l)</b> h) gain minus
F	(i) M V as of 12/31/69	Adjusted basis	Excess	of col(ı) (j), ıf any	col (k), but not	less than -0-) <b>or</b> om col (h))
a See	Addıtıonal Data Tabl	le				
b						
С						
d						
e						
			If gain, also enter in P	art I, line 7		
If g	•	gain or (loss) as defined in sections art I, line 8, column (c) (see instruct		· }	3	256,836
Part V	Qualification I	Under Section 4940(e) for R	educed Tay on Net	Investment In	come	
	_					
,	940(d)(2) applies, le	private foundations subject to the se eave this part blank	ection 4940(a) tax on ne	et investment incon	ne )	
Was the fol	undation liable for th	ne section 4942 tax on the distributa ot qualify under section 4940(e) Do		in the base period	7  \ \ \ \ \ \ \ \ \ \ \	es 🔽 No
<b>1</b> Ente	er the appropriate an	nount in each column for each year,	, see instructions before	making any entrie	s	
	(a) riod years Calendar ax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	<b>(d)</b> Distribution rat (col (b) divided by c	
	2018	430,537	,	4,182,433		0 102939
	2017	235,586	5	880,508		0 267557
	2016	0		0		0 000000
	2015	0		0		0 000000
	2014	0		0		0 000000
2 Tota	l of line 1, column (	d)		2		0 370496
numl	ber of years the four	o for the 5-year base period—divide indation has been in existence if less	than 5 years	3		0 074099
		oncharitable-use assets for 2019 from	•	4	1	274,569
	ply line 4 by line 3	(40) 50 (71) 071)		5		20,345
		ent income (1% of Part I, line 27b)		6		3,541
				7		23,886
		ions from Part XII, line 4 ,		8	1	811,742
	e 8 is equal to or gre uctions	eater than line 7, check the box in P	art VI, line 1b, and com	plete that part usir	ng a 1% tax rate Se	e the Part VI

Form	990-PF (2019)					ſ	Page (
Pai	t VIII-B Statements Regard	ing Activities for Which	Form 4720 May Be	Required (continued)			
5a	During the year did the foundation p	ay or incur any amount to				Yes	No
	(1) Carry on propaganda, or otherw	•		☐ Yes ✓	No		
	(2) Influence the outcome of any sp	·	• • • • • • • • • • • • • • • • • • • •				
	on, directly or indirectly, any vot	-		· · 🗌 Yes 🗸	No		
	(3) Provide a grant to an individual i	• • • • • • • • • • • • • • • • • • • •		☐ Yes 🗹	No		
	(4) Provide a grant to an organization		· -				
	in section 4945(d)(4)(A)? See in (5) Provide for any purpose other th			·· ·	No		
	,, ,	• •	* * * * * * * * * * * * * * * * * * * *				
h	educational purposes, or for the If any answer is "Yes" to $5a(1)-(5)$ ,	•		⊔ Yes 🖭	No		
b	Regulations section 53 4945 or in a c	•		•	5b		
	Organizations relying on a current no				35		
c	If the answer is "Yes" to question 5a						
Ĭ	tax because it maintained expenditure	• • •	•				
	If "Yes," attach the statement requir			' ' ∐ Yes ∐	No		
6a	Did the foundation, during the year,	· -		ıms on			
	a personal benefit contract?	, , , , , , , , , , , , , , , , , , , ,					
ь	Did the foundation, during the year,			⊔ Yes 🖭	No   6b		No
	If "Yes" to 6b, file Form 8870	. , , , ,	,, ,				
7a	At any time during the tax year, was	the foundation a party to a p	orohibited tax shelter trai	nsaction? Yes	No.		
b	If "Yes", did the foundation receive a	ny proceeds or have any net	income attributable to th	ne transaction?	7b		
8	Is the foundation subject to the section	on 4960 tax on payment(s)	of more than \$1,000,000	in remuneration or			
	excess parachute payment during th	e year <sup>?</sup>		· · 🔲 Yes 🗸	No L		
	Information About O	fficers, Directors, Trus	tees, Foundation Ma	nagers, Highly Paid En		,	
Ра	t VIIII and Contractors						
1	List all officers, directors, trustee	s, foundation managers a	nd their compensation	See instructions			
	(-) None and address	(b) Title, and average	(c) Compensation (If	(d) Contributions to	(e) Expe	nse acc	ount,
	(a) Name and address	hours per week devoted to position	not paid, enter -0-)	employee benefit plans and deferred compensation	other a	llowan	ces
See /	Addıtıonal Data Table	'	,	'			
_2	Compensation of five highest-pai	d employees (other than t	hose included on line :		ne, enter "	NONE	."
(2)	Name and address of each employee :	(b) Title, and average		(d) Contributions to employee benefit	(e) Expen	CO 3000	ount
(a)	more than \$50,000	nours per week	(c) Compensation	plans and deferred	other al		
		devoted to position		compensation			
NON							
-							
Tota	I number of other employees paid ove						
	Hamber of other employees paid ove	. φου,ουσι ι ι ι ι	<del> </del>		Form 99	O-DE	(2010

Page **6** 

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional service	es (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		0
Part IX-A Summary of Direct Charitable Activities		·
List the foundation's four largest direct charitable activities during the tax year. Include rele- organizations and other beneficiaries served, conferences convened, research papers produc		of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see II	nstructions)	
Describe the two largest program-related investments made by the foundation during th	<u> </u>	Amount
1	,	
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		• 0
		Form <b>990-PF</b> (2019)

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

3a 3h

4

5

811.742

3.541

808.201

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Amounts set aside for specific charitable projects that satisfy the

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

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

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

3

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Page 9

10,187

10,187

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411			_	-

D-PF (2	019)		
XIII	Undistributed Income	(see instructions)	

,	
Part XIII	Un

- 1 Distributable amount for 2019 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2019 a Enter amount for 2018 only. . . . . .

(a)

Corpus

416.802

801.555

1,218,357

1,218,357

191.831

224.971

801.555

(b)

Years prior to 2018

(c)

2018

- **b** Total for prior years
- Excess distributions carryover, if any, to 2019 a From 2014. . . . . **b** From 2015. . . . c From 2016. . .
- d From 2017. . . . . e From 2018. . . . .
- 191.831 224,971
- XII, line 4 ▶ \$
- f Total of lines 3a through e. . . . . . . . 4 Qualifying distributions for 2019 from Part a Applied to 2018, but not more than line 2a
- **b** Applied to undistributed income of prior years (Election required—see instructions). . . . .
- c Treated as distributions out of corpus (Election

same amount must be shown in column (a) )

**d** Applied to 2019 distributable amount. . . . . e Remaining amount distributed out of corpus

**5** Excess distributions carryover applied to 2019

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

(If an amount appears in column (d), the

6 Enter the net total of each column as

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

9 Excess distributions carryover to 2020.

10 Analysis of line 9

a Excess from 2015. . . **b** Excess from 2016. .

c Excess from 2017. . . .

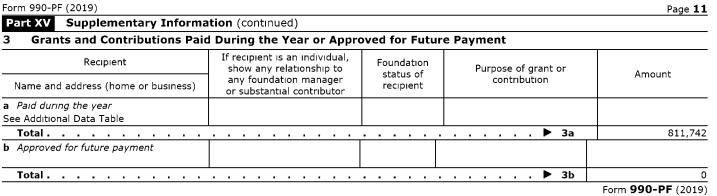
d Excess from 2018. . .

e Excess from 2019. . .

Subtract lines 7 and 8 from line 6a . . . . . .

indicated below:

factors



inter gross	amounts unless otherwise indicated	Unrelated bu	ısıness ıncome	Excluded by section	512, 513, or 514	(e) Related or exempt
<b>1</b> Program	service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions )
		<u> </u>				
		<u> </u>				
g Fees a	and contracts from government agencies rship dues and assessments					
ınvestm	nents					1,803
	ds and interest from securities tal income or (loss) from real estate			14		160,877
	financed property					
	ebt-financed property					
	tal income or (loss) from personal property					
	(loss) from sales of assets other than					955.004
	ome or (loss) from special events			18		256,836
	profit or (loss) from sales of inventory					
	evenue a					
с						
		l l				
L <b>2</b> Subtota	al Add columns (b), (d), and (e)		0			
.2 Subtota .3 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0	13	(	
.2 Subtota .3 Total. (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 )		13		
.2 Subtota 3 Total. (See wo	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  brksheet in line 13 instructions to verify calcums.  Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations )  ne Accomplish  ncome is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ed importantly to	419,516
.2 Subtota 3 Total. (See wo Part XVI Line No. ▼	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  brksheet in line 13 instructions to verify calcums.  Brelationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain the secondary of the s	lations )  ne Accomplish  ncome is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ed importantly to	419,516
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  brksheet in line 13 instructions to verify calcums.  Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the second sec	lations )  ne Accomplish  ncome is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ed importantly to	419,516
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2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  brksheet in line 13 instructions to verify calcums.  Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the second sec	lations )  ne Accomplish  ncome is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ed importantly to	419,516
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2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  brksheet in line 13 instructions to verify calcums.  Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the second sec	lations )  ne Accomplish  ncome is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ed importantly to	419,516
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  brksheet in line 13 instructions to verify calcums.  Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the second sec	lations )  ne Accomplish  ncome is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ed importantly to	419,516
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  brksheet in line 13 instructions to verify calcums.  Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the second sec	lations )  ne Accomplish  ncome is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ed importantly to	419,516
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  brksheet in line 13 instructions to verify calcums.  Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the second sec	lations )  ne Accomplish  ncome is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ed importantly to	419,516
2 Subtota 3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  brksheet in line 13 instructions to verify calcums.  Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the second sec	lations )  ne Accomplish  ncome is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ed importantly to	419,516
Subtota Total (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  brksheet in line 13 instructions to verify calcums.  Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the second sec	lations )  ne Accomplish  ncome is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ed importantly to	419,516
Subtota Total (See wo Part XVI Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  brksheet in line 13 instructions to verify calcums.  Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the second sec	lations )  ne Accomplish  ncome is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ed importantly to	419,516
Subtota  Total  (See wo  Part XVI  Line No.	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  brksheet in line 13 instructions to verify calcums.  Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain to the second sec	lations )  ne Accomplish  ncome is report	ment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ed importantly to	419,516

,	/
	Information Regarding Transfers To and Transactions and Relationships With Noncharitable
74.1.	Tillorillation Regarding Transfers to and Transactions and Relationships with Noncharitable
V 111	Exempt Organizations

Lair VAT	Exempt Organi	zations							
	organization directly or in tr than section 501(c)(3)						501	Yes	No
a Transfers	s from the reporting foun	dation to a noncha	arıtable exempt org	janızatıon (	of				
<b>(1)</b> Cas	h						1a(1)		No
(2) Oth	er assets						. 1a(2)		No
<b>b</b> Other tra	nsactions								
	es of assets to a nonchar						. 1b(1)		No
	chases of assets from a r					$\cdots \cdots \cdots$	. 1b(2)		No
	tal of facilities, equipmen	•					1b(3)		No
(4) Reimbursement arrangements							1b(4)		No
	ns or loan guarantees.						1b(5)		No
	ormance of services or m	·	-				1b(6)		No
_	of facilities, equipment, r swer to any of the above						1c		No
of the go	ods, other assets, or ser ansaction or sharing arra  (b) Amount involved	vices given by the ingement, show in	reporting foundation	on If the f llue of the	oundation receive goods, other asse	d less than fair marke	t value d	ngemen	ıts
	(-)	(0)			(1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1				
	undation directly or indire	•	•			_	<b>□</b>		
	d in section 501(c) (othe		(c)(3)) or in section	n 527? .		∐Yes	<b>✓</b> No		
<b>b</b> If "Yes,"	complete the following s		I (1) T		1	(-) D	la bi a in ale in		
	(a) Name of organization	on	<b>(b)</b> Type of	organizatio	<u>n</u>	(c) Description of	relationship		
of wh	der penalties of perjury, my knowledge and belief ich preparer has any kno	, it is true, correct							
ign Iere	*****		2020-09-04		*****	reti		scuss the	
	Signature of officer or t	rustee	Date		Title		below (see instr ) 🗹	Yes [	] No
	Print/Type preparer's	s name Prep	arer's Sıgnature		Date	Check if self		422	
Paid	HOWARD KESSELI	MAN			2020-09-04	employed ▶ ☐	P00280	439	
Prepare Jse Onl	Thin shamer hor	ARD M KESSELMA	N PLC			Fır	m's EIN ▶45	24115	i03
	-	BOX 746							
	PF	RESCOTT, AZ 863	02			Ph	one no (602)	770-4	4009

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation **UBS ACCOUNT GA 55716** D 2018-10-04 2019-12-31 **UBS ACCOUNT GA 57873** D 2019-10-04 2019-12-31 **UBS ACCOUNT GA 57873** D 2018-10-04 2019-12-31 **UBS ACCOUNT GA 57878** D 2019-10-04 2019-12-31 **UBS ACCOUNT GA 57878** D 2018-10-04 2019-12-31 UBS GA 57879 ST D 2019-10-04 2019-12-31 UBS GA 57879 LT D 2018-10-04 2019-12-31 UBS GA 59493 ST D 2019-10-04 2019-12-31 UBS GA 59494 ST D 2019-12-31 2019-10-04 UBS GA 59495 ST D 2019-10-04 2019-12-31 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 44,667 87,274 -42,607 6,447 6,357 90 119,692 111,174 8,518 3.826 4,335 -509 239,425 178,890 60,535 394 13,363 12,969 349,390 162,783 186,607 13,676 13,932 -256 196,718 182,536 14,182 170,156 151,859 18,297 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any -42.60790 8,518 -509 60,535 394 186,607 -256 14,182 18,297

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co ) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation UBS ACCOUNT GA 59496 ST D 2019-10-04 2019-12-31 UBS ACCOUNT GA 59496 LT D 2018-10-04 2019-12-31 **UBS ACCOUNT GA 59497** D 2019-10-04 2019-12-31 CAPITAL GAINS DIVIDENDS Р Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 115,282 108,758 6,524 6 458 4 864 1 594

0,730		7,004	1,354			
8,631		9,303	-672			
4,139			4,139			
orm 990PF Part IV - Capital	Gains and Losses for Tax on	Investment Income - Colum	ns i - I			
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  Gains (Col. (h) gain minus						
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col(ı) <b>(k)</b> over col( <sub>1</sub> ), ıf any	col (k), but not less than -0-) <b>or</b> (l) Losses (from col (h))			

6,524 1,594 -672 4,139

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation RON COLEMAN DIR, PRES, SEC 5 00 7356 E VAQUERO DRIVE SCOTTSDALE, AZ 852582097 HOWARD KESSELMAN DIR. TREAS 3 00 PO BOX 746 PRESCOTT, AZ 86302 STUART GROSSMAN DIR O 1 00 4310 E JANICE WAY PHOENIX, AZ 85032 THOMAS MCKEEVER DIR 0 1 00 1890 TARPON LANE UNIT 204 VERO BEACH, FL 32960 THOMAS WEINHOLD DIR 1 00 26738 N 114TH WAY SCOTTSDALE, AZ 85262 DIR JOAN LOWELL

1 00

8139 E DEL JOYA DR SCOTTSDALE, AZ 85258

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

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year			
33 BUCKETS1638 E 12TH STREET TEMPE, AZ 85281	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	35,000
ARIZONA COMMUNITY FOUNDATION 2201 E CAMELBACK ROAD STE 405B PHOENIX AZ 85016	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	158,742

recipient

ARIZONA COMMUNITY FOUNDATION 2201 E CAMELBACK ROAD STE 405B PHOENIX, AZ 85016	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	158,
ARIZONA HELPING HANDS 3110 E THUNDERBIRD RD 100	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR	25,

Total	 	▶ 3a	811,742
ARIZONA HELPING HANDS 3110 E THUNDERBIRD RD 100 PHOENIX, AZ 85020	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	25,000
2201 E CAMELBACK ROAD STE 405B PHOENIX, AZ 85016		THEIR EXEMPT PURPOSES	

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			
ASSISTANCE LEAGUE OF PHOENIX ARIZONA 9224 N 5TH STREET	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	5,000

HOENIX, AZ 85020			
E A LEADER 715 W NORTHERN AVE 104 HOENIX, AZ 85021	(-,(-,	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	

BE A LEADER 1715 W NORTHERN AVE 104 PHOENIX, AZ 85021	501(C)(3	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	25
BROTHERS OF CHRISTIAN	501(C)(3	) CHARITABLE CONTRIBUTION TO	8

Total .

BE A LEADER 1715 W NORTHERN AVE 104 PHOENIX, AZ 85021	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	25,000
BROTHERS OF CHRISTIAN INSTRUCTION	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR	8,000

1715 W NORTHERN AVE 104 PHOENIX, AZ 85021	301(0)(3)	501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	23,00
BROTHERS OF CHRISTIAN INSTRUCTION PO BOX 159	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	8,00

PHOENIX, AZ 85021		THEIR EXEMPT PURPOSES	
BROTHERS OF CHRISTIAN INSTRUCTION PO BOX 159 ALFRED, ME 040020159	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	8,000

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

recipient

THEIR EXEMPT PURPOSES

811,742

any foundation manager

or substantial contributor

Name and address (home or business)

PHOENIX, AZ 85013

Total .

a Paid during the year			
CASA CENTER FOR POSITIVE CHANGE 3030 N 3RD ST 200 PHOENIX, AZ 85012	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	35,000
CHILD CRISIS ARIZONA 817 N COUNTRY CLUB DRIVE	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT BURDOSES	10,000

PHOENIX, AZ 85012		THEIR EXEMPT PURPOSES	
CHILD CRISIS ARIZONA 817 N COUNTRY CLUB DRIVE MESA, AZ 85201	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	10,000
CIRCLE THE CITY 300 W CLARENDON AVE SUITE 200	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR	30,000

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			
COALITION FOR COMPASSIONATE JUSTICE 6116 E STATE HWY 69 PRESCOTT VALLEY, AZ 86314	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	50,000

PRESCOTT VALLEY, AZ 86314			
FINANCIAL SERVICES UA FOUNDATION 188 N EUCLID AVE RM 502 TUCSON, AZ 85719	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	5,0

FINANCIAL SERVICES UA FOUNDATION 888 N EUCLID AVE RM 502 TUCSON, AZ 85719	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	5,000
GIRL SCOUTS OF ARIZONA CACTUS PINE 119 E CORONADO AVE	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	10,000

▶ 3a

811,742

888 N EUCLID AVE RM 502 TUCSON, AZ 85719		501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	-,
GIRL SCOUTS OF ARIZONA CACTUS PINE 119 E CORONADO AVE PHOENIX, AZ 86314	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	10,00

Total .

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

recipient

THEIR EXEMPT PURPOSES

811,742

any foundation manager

Name and address (home or business)

PHOENIX, AZ 85018

Total . .

,	or substantial contributor			
a Paid during the year				
GRAND CANYON UNIVERSITY YL 3300 W CAMELBACK RD PHOENIX, AZ 85017		501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	25,000
KID IN THE CORNER 6929 N HAYDEN ROAD SCOTTSDALE, AZ 852507978		501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	15,000
KIDS IN FOCUS 4455 E CAMELBACK RD STE 215A		501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR	20,000

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			
LAUNCHPAD TEEN CENTER 302 GROVE AVE PRESCOTT, AZ 86301  501(C)(3)  CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	302 GROVE AVE	, , , ,	501(C)(3) ORGANIZATION FOR	50,000

OCAL FIRST ARIZONA FOUNDATION LFAF) 407 E ROOSEVELT STREET PHOENIX, AZ 85004	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	(3)

407 E ROOSEVELT STREET PHOENIX, AZ 85004		THEIR EXEMPT PURPOSES	
PRESCOTT AREA SHELTER SERVICES 336 N RUSH ST PRESCOTT, AZ 86301	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	30

Total .

(LFAF) 407 E ROOSEVELT STREET PHOENIX, AZ 85004		501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	
PRESCOTT AREA SHELTER SERVICES	501(C)(3)	CHARITABLE CONTRIBUTION TO	30,000

30.000

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				
SALT RIVER WILD HORSES MANAGEMENT GROUP 4610 N 68TH ST 477 SCOTTSDALE, AZ 85251		501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	5,000
•	I	· · · · · · · · · · · · · · · · · · ·	I -	

SCOTTSBALE, AL 03231			
SAVE THE FAMILY125 E UNIVERSITY DR MESA, AZ 85201	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	25,000
SAVING AMYPO BOX 15151 SCOTTSDALE, AZ 85267	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR	10,000

811,742

SAVE THE FAMILY125 E UNIVERSITY DR MESA, AZ 85201	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	25,0
SAVING AMYPO BOX 15151 SCOTTSDALE, AZ 85267	, ,, ,	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	10,0

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			
ST MARY'S FOOD BANK 2831 N 31ST AVE PHOENIX, AZ 85009	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	5,000
STARS (SCOTTSDALE TRAINING AND	501(C)(3)	CHARITABLE CONTRIBUTION TO	25,000

TARS (SCOTTSDALE TRAINING AND EHABILITATION SDRVICES 507 E OSBORN ROAD COTTSDALE, AZ 85251	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	

Total .

REHABILITATION SDRVICES 7507 E OSBORN ROAD SCOTTSDALE, AZ 85251		501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	
STUDENT EXPEDITION PROGRAM (STEP)	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR	

7507 E OSBORN ROAD SCOTTSDALE, AZ 85251		THEIR EXEMPT PURPOSES	
STUDENT EXPEDITION PROGRAM (STEP) 5021 N 20TH STREET	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	50,0

SCOTTSDALE, AZ 85251		THEIR EXEMPT PURPOSES	
STUDENT EXPEDITION PROGRAM (STEP) 5021 N 20TH STREET PHOENIX, AZ 85016	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	50,000

HOENIX, AZ 85016			
		111211 272111 1 1 3111 3323	
721 N 2010 31KEE1		I I HEIR EXEMPT PURPUSES	i e

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			
SUNSHINE PT1705 17TH AVE VERO BEACH, FL 32960	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	
SUPPORT MY CLUB	501(C)(3)	CHARITABLE CONTRIBUTION TO	

		ITILIK EXEMPT FORFOSES	
SUPPORT MY CLUB 5070 N 40TH STREET PHOENIX, AZ 85018	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	20,000
TEACH FOR AMERICA 3030 N CENTRAL AVE SUITE 900 PHOENIX, AZ 85012	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSESCHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR	50,000

5070 N 40TH STREET PHOENIX, AZ 85018		501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	
TEACH FOR AMERICA 3030 N CENTRAL AVE SUITE 900 PHOENIX, AZ 85012	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSESCHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT BURDOSES	50,0

	EXEMPT PURPOSES	
Total	 ▶ 3a	811,742

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

Name and address (home or business)

Total .

, ,	or substantial contributor			
a Paid during the year				
TREVORS VISION2212 W KELLER CT ANTHEM, AZ 85086		\ /\ /	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	15,000

		THEIR EXEMPT PURPOSES	
UNITED ANIMAL FRIENDS PO BOX 11133 PRESCOTT, AZ 86304	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR THEIR EXEMPT PURPOSES	20,0

		THEIR EXEMPT PURPOSES	
UNITED ANIMAL FRIENDS PO BOX 11133	501(C)(3)	CHARITABLE CONTRIBUTION TO 501(C)(3) ORGANIZATION FOR	20,000
DDESCOTT AZ 86304		THEIR EVEMOT DIRROCES	

DLN: 93491248010050

Name: THE JACK INGEBRITSON FOUNDATION INC.

**EIN:** 81-3517395

ieneral Explanation Attachment			
ldentifier	Return Reference	Explanation	
1		SCHEDULE D AND RELATED FORMS	ALL OF THE INVESTMENTS FOR THE FOUNDATION ARE HELD IN MANAGED ACCOUNTS AT UBS THERE ARE NUMEROUS TRANSACTIONS IN EACH ACCOUNT EACH YEAR. THE ACCOUNT NUMBER AND GAINS OR LOSSES ARE SHOWN ON THE SCHEDULE D AS ALL OF THE TRANSACTIONS ARE REPORTED TO THE IRS BY UBS THE PURCHASE AND SALE DATES ON THE TRANSACTIONS ARE NOT ACCURATE AS THE GAINS AND LOSSES ARE COMBINED IN EACH ACCOUNT AND HAVE BEEN REPORTED TO THE IRS BY ACCOUNT NUMBER.

effie GRAPHIC print - DO NOT PROCESS	AS FIIEG Data -	DLN: 93491248010050							
TY 2019 Investments Corporate Stock Schedule									
-									
Name:	THE JACK INGEBRI	ITSON FOUNDATION INC							
EIN:	81-3517395								

DIN. 024012400100E0

10,645,496

8,595,020

offic CDADUTC print DO NOT DDOCESS As Filed Date

EQUITIES

Investments Corporation Stock Schedule

Name of Stock

End of Year Book
Value

Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491248010050
TY 2019 Investments Governments	nent Obligat	ions Schedule	
Name:	THE JACK ING	SEBRITSON FOUNDATION INC	
EIN:	81-3517395		
US Government Securities - End of Year Book Value:		0	
US Government Securities - End of Year Fair Market Value:		0	
State & Local Government Securities - End of Year Book Value:		100,000	
State & Local Government Securities - End of Year Fair Market Value:		101,425	

file GRAPHIC print - DO NOT PROCESS	As Filed Data -	DI	N: 93491248010050
TY 2019 Investments - Other S	Schedule		
Name:	THE JACK INGEBRITSON FOU	NDATION INC	
EIN:	81-3517395		
nvestments Other Schedule 2			
Category/ Item	Listed at Cost or	Book Value	End of Year Fair

FMV

OTHER

FMV

Market Value

117,496

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	93491248010050
TY 2019 Other Expenses Sche		_		
Name:	THE JACK INGE	BRITSON FOUND	ATION INC	
EIN:	81-3517395			
Other Expenses Schedule				·1

	<b>214.</b> 01 331/333			
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT EXPENSES	60,765	60,765		0

4,653

4,653

FOREIGN TAXES WITHHELD

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491248010050				
TY 2019 Other Increases Schedule							
Name:	THE JACK ING	EBRITSON FOUNDATION INC					
EIN:	81-3517395						
De	escription		Amount				
INCREASE IN VALUE OF ASSETS			2,730,169				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		D	LN: 93491248010050			
TY 2019 Other Liabilities Sche	dule						
Name: THE JACK INGEBRITSON FOUNDATION INC							
<b>EIN:</b> 81-3517395							
Description		Beginning of Year - Book Value	End of Year - Book Value				
CHECKS CLEARED IN 2020			0	388,742			

efile GRAPHIC print - DO	NOT PROCESS As Filed Dat	ta -		DLN: 93491248010050				
Schedule B	Sche	edule of Contributors		OMB No 1545-0047				
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		ch to Form 990, 990-EZ, or 990-PF ors gov/Form990 for the latest informa	ation	2019				
Name of the organization THE JACK INGEBRITSON F	DUNDATION INC		Employer id	dentification number				
Organization type (chec	(one)		81-3517395					
organization type (onco	Cono,							
Filers of:	Section:							
Form 990 or 990-EZ	☐ 501(c)( ) (enter number	er) organization						
	4947(a)(1) nonexempt of	charitable trust <b>not</b> treated as a pri	vate foundation					
	☐ 527 political organizatio	n						
Form 990-PF		e foundation						
	4947(a)(1) nonexempt of	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private	e foundation						
		90-PF that received, during the year or Complete Parts I and II See ins						
Special Rules								
under sections 50 received from any	9(a)(1) and 170(b)(1)(A)(vi), that	filing Form 990 or 990-EZ that met checked Schedule A (Form 990 or total contributions of the greater o complete Parts I and II	990-EZ), Part II, line 13,	, 16a, or 16b, and that				
during the year, to	tal contributions of more than \$1.	(8), or (10) filing Form 990 or 990- ,000 <i>exclusively</i> for religious, chari n or animals Complete Parts I, II, a	table, scientific, literary, o					
during the year, could be during the year, could be during the year, could be during the during the year, could be during the year.	ontributions exclusively for religion ted, enter here the total contribution inplete any of the parts unless the	(8), or (10) filing Form 990 or 990- us, charitable, etc., purposes, but i ions that were received during the e <b>General Rule</b> applies to this orga 000 or more during the year	no such contributions tota year for an <i>exclusively</i> re anization because it recei	aled more than \$1,000 eligious, charitable, etc , ived <i>nonexclusively</i>				
990-EZ, or 990-PF), but i	must answer "No" on Part IV, lir	I Rule and/or the Special Rules do ne 2, of its Form 990, or check the t meet the filing requirements of Sc	box on line H of its Form					
For Paperwork Reduction Action Form 990, 990-EZ, or 990-	t Notice, see the Instructions PF	Cat No 30613X	Schedule B (Form 990	0, 990-EZ, or 990-PF) (2019)				

(Complete Part II for noncash

Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2019)		Page 3
Name of org THE JACK II	ganization NGEBRITSON FOUNDATION INC	Employer identification n	umber
B 4 11	N 15	81-3517395	
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	STOCK PORTFOLIO ACCOUNT UBS GA 02138 WHICH BECAME ACCOUNTGA 59494 AT UBS - ALL LISTED STOCKS	\$ 1 121,306	2019-10-04
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	STOCK PORTFOLIO ACCOUNT UBS GA 03362 WHICH BECAME ACCOUNTGA 59495 AT UBS- ALL LISTED STOCKS	\$ 1 264,227	2019-10-08
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<u>3</u>	STOCK PORTFOLIO UBS GA 03351 WHICH BECAME ACCOUNT GA 59496 AT UBS- ALL LISTED STOCKS	\$ 747,202	2019-10-07
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
4	STOCK PORTFOLIO UBS GA 52197 WHICH BECAMSE ACCOUNT GA 59497 AT UBS - ALL LISTED STOCKS	\$ 158,363	2019-10-04
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
<u>5</u>	STOCK PORTFOLIO UBS GA 02143 WHICH BECAME ACCOUNT GA 59498 AT UBS- ALL LISTED STOCKS	\$ 469,119	2019-09-20
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-			
		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2019)

Form 990, 990-EZ, or 990-PF) (2019)		Page
		Employer identification number
an \$1,000 for the year from any one cont rganizations completing Part III, enter the ne year. (Enter this information once. See	ributor. Complete columns total of exclusively religio instructions.)   **Title Complete Columns**  **Title	(a) through (e) and the following line entry. For
(b) Purpose of gift	(c) Use of gi	ft (d) Description of how gift is held
Transferee's name, address, and a	(e) Transfer of	gift Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gi	ft (d) Description of how gift is held
Transferee's name, address, and 2	(e) Transfer of	gift Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gi	ft (d) Description of how gift is held
Transferee's name, address, and ZIP 4		gift Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gi	ft (d) Description of how gift is held
	an \$1,000 for the year from any one contrganizations completing Part III, enter the reganizations completing Part III, enter the eyear. (Enter this information once. See se duplicate copies of Part III if additional sp  (b) Purpose of gift  Transferee's name, address, and 2  (b) Purpose of gift  Transferee's name, address, and 2  (b) Purpose of gift	SEBRITSON FOUNDATION INC  ***xclusively* religious*, charitable, etc., contributions to organizations from \$1,000 for the year from any one contributor. Complete columns reganizations completing Part III, enter the total of exclusively religione year. (Enter this information once. See instructions.) ▶ \$

Form **2220** Department of the Treasury Internal Revenue Service

**Underpayment of Estimated Tax by Corporations** 

OMB No 1545-0123

DLN: 93491248010050

▶ Attach to the corporation's tax return. ▶ Go to www.irs.gov/FORM2220 for instructions and the latest information. Name **Employer identification number** THE JACK INGEBRITSON FOUNDATION INC 81-3517395 Note: Generally, the corporation isn't required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation However, the corporation may still use Form 2220 to figure the penalty If so, enter the amount from page 2, line 38 on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220 Part I Required Annual Payment Total tax (see instructions) 3,541 Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 2a Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income **c** Credit for federal tax paid on fuels (see instructions) 2d Subtract line 2d from line 1 If the result is less than \$500, do not complete or file this form The corporation doesn't owe the penalty 3 3,541 Enter the tax shown on the corporation's 2018 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 4 1,778 Required annual payment. Enter the smaller of line 3 or line 4 If the corporation is required to skip line 4, enter the amount from line 3 1,778 Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it doesn't owe a penalty. See instructions. 6 ☐ The corporation is using the adjusted seasonal installment method The corporation is using the annualized income installment method The corporation is a "large corporation" figuring its first required installment based on the prior year's tax Figuring the Underpayment (b) (c) (d) Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th ( Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year . 05-15-2019 06-15-2019 09-15-2019 12-15-2019 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38 If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0 25) of line 5 above in each column 10 445 444 Estimated tax paid or credited for each period For column (a) only, enter the amount 1,563 11 217 from line 11 on line 15 See instructions Complete lines 12 through 18 of one column before going to the next column. Enter amount, if any, from line 18 of the preceding column 12 1,563 13 Add lines 11 and 12 . . . . 13 Add amounts on lines 16 and 17 of the preceding column . . . . . . . 14 228 1,117 15 Subtract line 14 from line 13 If zero or less, enter -0-0 446 15 If the amount on line 15 is zero, subtract line 13 from line 14 Otherwise, enter -0- . 228 672 16 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10 Then go to line 12 of the next column Otherwise, go to line 18. . . . . 228 17 444 445 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column . . 18

Figuring the Penalty

365

Add lines 22, 24, 26, 28, 30, 32, 34, and 36

37

38

			(a)	(b)	(c)	(d)
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier (C Corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month ) See instructions	19	See Add'l Data			
20	Number of days from due date of installment on line 9 to the date shown on line 19	20				
21	Number of days on line 20 after 4/15/2019 and before 7/1/2019	21				
22	Underpayment on line 17 x <u>Number of days on line 21</u> x 6% (0 06) 365	22	\$	\$	\$	\$
23	Number of days on line 20 after 6/30/2019 and before 10/1/2019	23				
24	Underpayment on line 17 x Number of days on line 23 x 5% (0 05) 365	24	\$	\$	\$	\$
25	Number of days on line 20 after 9/30/2019 and before 1/1/2020	25				
26	Underpayment on line 17 x <u>Number of days on line 25</u> x 5% (0 05) 365	26	\$	\$	\$	\$
27	Number of days on line 20 after 12/31/2019 and before 4/1/2020	27				
28	Underpayment on line 17 x <u>Number of days on line 27</u> x 6% (0 06) 366	28	\$	\$	\$	\$
29	Number of days on line 20 after 3/31/2020 and before 7/1/2020	29				
30	Underpayment on line 17 x <u>Number of days on line 29</u> x *% 366	30	\$	\$	\$	\$
31	Number of days on line 20 after 6/30/2020 and before 10/1/2020	31				
32	Underpayment on line 17 x <u>Number of days on line 31</u> x *% 366	32	\$	\$	\$	\$
33	Number of days on line 20 after 9/30/2020 and before 1/1/2021	33				
34	Underpayment on line 17 x Number of days on line 33 x *% 366	34	\$	\$	\$	\$
35	Number of days on line 20 after 12/31/2020 and before 3/16/2021	35				
36	Underpayment on line 17 x Number of days on line 35 x *%					

\$

\$

\*Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet,

\$

\$

24

Form 2220 (2019)

38

36

37 \$

access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information

Penalty. Add columns (a) through (d) of line 37 Enter the total here and on Form 1120, line 34, or the

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method See instructions.

Form 1120-S filers: For lines 1, 2, 3, and 21 "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

Part I Adjusted Seasonal Installment Method Caution: Use this method only if the base per instructions.	eriod	percentage for a	ny 6 consecutive	months is at least	70%. See
		(a)	(b)	(c)	(d)
Enter taxable income for the following periods		First 3 months	First 5 months	First 8 months	First 11 mon
aTax year beginning in 2016	1a				
<b>b</b> Tax year beginning in 2017	1b				
cTax year beginning in 2018	1c				
2 Enter taxable income for each period for the tax year beginning in 2019 See instructions for the treatment of extraordinary items	2				

		(a)	(b)	(c)	(d)
1 Enter taxable income for the following periods		First 3 months	First 5 months	First 8 months	First 11 months
a Tax year beginning in 2016	1a				
<b>b</b> Tax year beginning in 2017	1b				
c Tax year beginning in 2018	1c				
2 Enter taxable income for each period for the tax year beginning in 2019 See instructions for the treatment of extraordinary items	2				
3 Enter taxable income for the following periods		First 4 months	First 6 months	First 9 months	Entire year
a Tax year beginning in 2016	3a				
<b>b</b> Tax year beginning in 2017	3Ь				
$c$ Tax year beginning in 2018 $\ldots$	3с				
4 Divide the amount in each column on line 1a by the amount in column (d) on line 3a	4				
5 Divide the amount in each column on line 1b by the amount in column (d) on line 3b	5				
6 Divide the amount in each column on line 1c by the amount in column (d) on line 3c	6				
<b>7</b> Add lines 4 through 6	7				
<b>8</b> Divide line 7 by 3 0	8				
9aDıvıde line 2 by line 8	9a				
bExtraordinary items (see instructions)	9b				
c Add lines 9a and 9b	9c				
IO Figure the tax on the amount on line 9c using the instructions for Form 1120, Schedule J, line 2 or comparable line of corporation's return	10				
1a Divide the amount in columns (a) through (c) on line 3a by the amount in column (d) on line 3a	11a				
<b>b</b> Divide the amount in columns (a) through (c) on line 3b					

3 Enter taxable income for the following periods		First 4 months	First 6 months	First 9 months	Entire year
a Tax year beginning in 2016	3a				
bTax year beginning in 2017	3b				
c Tax year beginning in 2018	3c				
4 Divide the amount in each column on line 1a by the amount in column (d) on line 3a	4				
5 Divide the amount in each column on line 1b by the amount in column (d) on line 3b	5				
6 Divide the amount in each column on line 1c by the amount in column (d) on line 3c	6				
<b>7</b> Add lines 4 through 6	7				
<b>8</b> Divide line 7 by 3 0	8				
<b>9a</b> Divide line 2 by line 8	9a				
${f b}$ Extraordinary items (see instructions)	9b				
c Add lines 9a and 9b	9c				
10 Figure the tax on the amount on line 9c using the instructions for Form 1120, Schedule J, line 2 or comparable line of corporation's return	10				
11a Divide the amount in columns (a) through (c) on line 3a by the amount in column (d) on line 3a	11a				
<b>b</b> Divide the amount in columns (a) through (c) on line 3b by the amount in column (d) on line 3b	11b				
c Divide the amount in columns (a) through (c) on line 3c by the amount in column (d) on line 3c	11c				
<b>12</b> Add lines 11a through 11c	12				
<b>13</b> Divide line 12 by 3 0	13				
14 Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13 In column (d), enter the amount from line 10, column (d)	14				
<b>15</b> Enter any alternative minimum tax (trusts only) for each payment period See instructions	15				
16 Enter any other taxes for each payment period See instructions	16				

amount in column (d) on line 3c	6		
<b>7</b> Add lines 4 through 6	7		
<b>8</b> Divide line 7 by 3 0	8		
9aDıvıde line 2 by line 8	9a		
${f b}$ Extraordinary items (see instructions)	9b		
c Add lines 9a and 9b	9с		
10 Figure the tax on the amount on line 9c using the instructions for Form 1120, Schedule J, line 2 or comparable line of corporation's return	10		
11a Divide the amount in columns (a) through (c) on line 3a by the amount in column (d) on line 3a	11a		
<b>b</b> Divide the amount in columns (a) through (c) on line 3b by the amount in column (d) on line 3b	11b		
c Divide the amount in columns (a) through (c) on line 3c by the amount in column (d) on line 3c	11c		
<b>12</b> Add lines 11a through 11c	12		
<b>13</b> Divide line 12 by 3 0	13		
14 Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13 In column (d), enter the amount from line 10, column (d)	14		
15 Enter any alternative minimum tax (trusts only) for each payment period See instructions	15		
<b>16</b> Enter any other taxes for each payment period See instructions	16		
<b>17</b> Add lines 14 through 16	17		
<b>18</b> For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions	18		
19 Total tax after credits Subtract line 18 from line 17 If zero or less, enter -0-	19	_	
			 Form <b>2220</b> (2019)

C Add lines 9a and 9b	1 20 1			
D Figure the tax on the amount on line 9c using the instructions for Form 1120, Schedule J, line 2 or comparable line of corporation's return	10			
a Divide the amount in columns (a) through (c) on line 3a by the amount in column (d) on line 3a	11a			
b Divide the amount in columns (a) through (c) on line 3b by the amount in column (d) on line 3b	11b			
c Divide the amount in columns (a) through (c) on line 3c by the amount in column (d) on line 3c	11c			
2 Add lines 11a through 11c	12			
3 Divide line 12 by 3 0	13			
Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13. In column (d), enter the amount from line 10, column (d)	14			
Enter any alternative minimum tax (trusts only) for each payment period See instructions				
Enter any other taxes for each payment period See instructions	16			
7 Add lines 14 through 16	17			
For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions				
Total tax after credits Subtract line 18 from line 17 If zero or less, enter -0-	19			
	'	'		Form <b>2220</b> (2019)

34 Adjusted seasonal or annualized income

the preceding column

**37** Add lines 35 and 36

instructions

installments. Subtract line 33 from line 32 If zero or

**36** Subtract line 38 of the preceding column from line 37 of

**38 Required installments.** Enter the **smaller** of line 34 or line 37 here and on page 1 of Form 2220, line 10 See

**35** Enter 25% (0 25) of line 5 on page 1 of Form 2220 in each column Note: "Large corporations," see the instructions for line 10 for the amounts to enter . . .

**Annualized Income Installment Method** 

Part II

(d)

Form **2220** (2019)

First

Page 4

<b>20</b> Annualization periods (see instructions)	20	months	months	months	months
<b>21</b> Enter taxable income for each annualization period. See instructions for the treatment of extraordinary items.	21				
22 Annualization amounts (see instructions)	22				
23a Annualized taxable income Multiply line 21 by line 22	23a				
${f b}$ Extraordinary items (see instructions)	23b				
<b>c</b> Add lines 23a and 23b	<b>23</b> c				
24 Figure the tax on the amount on line 23c using the instructions for Form 1120, Schedule J, line 2, or comparable line of corporation's return	24				
25 Enter any alternative minimum tax (trusts only) for each payment period (see instructions)	25				
26 Enter any other taxes for each payment period See instructions	26				
<b>27</b> Total tax Add lines 24 through 26	27				
28 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions					
	28				
29 Total tax after credits Subtract line 28 from line 27 If zero or less, enter -0-	29				
<b>30</b> Applicable percentage	30	25%	50%	75%	100%
<b>31</b> Multiply line 29 by line 30	31				
Part III Required Installments					
<b>Note:</b> Complete lines 32 through 38 of one column before completing the next column		1st ınstallment	2nd ınstallment	3rd Installment	4th Installment
<b>32</b> If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are completed, enter the <b>smaller</b> of the amounts in each column from line 19 or line 31	32				
<b>33</b> Add the amounts in all preceding columns of line 38 See instructions	33				

(a)

First

(b)

First

(c)

First

34

35

36

37

38

### **Additional Data**

## Software ID:

**Software Version:** 

**EIN:** 81-3517395

Name: THE JACK INGEBRITSON FOUNDATION INC

Forn	n 2220, Part IV - Figuring the Penalty											
			(a)			(b)			(c)		(d)	
19	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier (C Corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month ) See instructions	19	05-15-20	19	,	06-15-2019		0	5-30-2019	)	09-15-2019	
20	Number of days from due date of installment on line 9 to the date shown on line 19	20	31			15			77		91	
21	Number of days on line 20 after 4/15/2019 and before 7/1/2019	21	31			15			77		91	
22	Underpayment on line 17 x Number of days on line 21 x 6% (0 06) 365	22	\$	1	\$		2	\$		7	\$	14
23	Number of days on line 20 after 6/30/2019 and before 10/1/2019	23										
24	Underpayment on line 17 x Number of days on line 23 x *% 365	24	\$		\$			\$			\$	
25	Number of days on line 20 after 9/30/2019 and before 1/1/2020	25										
26	Underpayment on line 17 x <u>Number of days on line 25</u> x 5% 365	26	\$		\$			\$			\$	
27	Number of days on line 20 after 12/31/2019 and before 4/1/2020	27										
28	Underpayment on line 17 x <u>Number of days on line 27</u> x 6% 366	28	\$		\$			\$			\$	
29	Number of days on line 20 after 3/31/2020 and before 7/1/2020	29										
30	Underpayment on line 17 x <u>Number of days on line 29</u> x *%  366	30	\$		\$			\$			\$	
31	Number of days on line 20 after 6/30/2020 and before 10/1/2020	31										
32	Underpayment on line 17 x <u>Number of days on line 31</u> x *% 366	32	\$		\$			\$			\$	
33	Number of days on line 20 after 9/30/2020 and before 1/1/2021	33										
34	Underpayment on line 17 x <u>Number of days on line 33</u> x *% 366	34	\$		\$			\$			\$	
35	Number of days on line 20 after 12/31/2020 and before 3/16/2021	35										
36	Underpayment on line 17 x <u>Number of days on line 35</u> x *% 365	36	\$		\$			\$			\$	
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$		\$			\$			\$	

Form 2220, Part IV - Figuring the Penalty (e) (f) (g) (h) 19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier (C Corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month ) See instructions 19 12-31-2019 20 Number of days from due date of installment on line 9 to the date shown on line 19 . . 20 136 21 Number of days on line 20 after 4/15/2019 and before 7/1/2019 21 . . . . . . . 22 Underpayment on line 17 x Number of days on line 21 x 6% (0 06) 22 \$ \$ 23 Number of days on line 20 after 6/30/2019 and before 10/1/2019 . . . . . . . 23 24 Underpayment on line 17 x Number of days on line 23 x \*% 365 24 25 Number of days on line 20 after 9/30/2019 and before 1/1/2020 . . . . . . . 25 26 Underpayment on line 17 x Number of days on line 25 x 5% 365 26 \$ \$ \$ 27 Number of days on line 20 after 12/31/2019 and before 4/1/2020 . . . . . . . 27 28 Underpayment on line 17 x Number of days on line 27 x 6% 366 28 \$ \$ \$ 29 Number of days on line 20 after 3/31/2020 and before 7/1/2020 . . . . 29 **30** Underpayment on line 17 x Number of days on line 29 x \*% 366 30 \$ \$ \$ **31** Number of days on line 20 after 6/30/2020 and before 10/1/2020 . . . . . . . . 31 32 Underpayment on line 17 x Number of days on line 31 x \*% 366 32 \$ \$ **33** Number of days on line 20 after 9/30/2020 and before 1/1/2021 . . . . . . 33 34 Underpayment on line 17 x Number of days on line 33 x \*% 366 34 \$ \$ **35** Number of days on line 20 after 12/31/2020 and before 3/16/2021 . . . . . . . 35 36 Underpayment on line 17 x Number of days on line 35 x \*% 36 365 37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36 \$ \$ \$

efile GRAPHIC print - DO NOT PROCESS   As	Filed Data -	DLN: 93491248010050
TY 2019 DonorAdvisedFundStmt	:	
Name: Th	HE JACK INGEBRITS	ON FOUNDATION INC
<b>FIN:</b> 81	L-3517395	
	_	
Qualifying Distribution	S	ection 170c2B Purpose Explanation
Qualifying Distribution  1.	1.	ection 170c2B Purpose Explanation
Qualifying Distribution  1. CONTRIBUTIONS WERE MADE TO A DONOR	1.	ection 170c2B Purpose Explanation  ITIONS WERE MADE TO A DONOR ADVISED
1.	1. ADVISED DISTRIBU	
1. CONTRIBUTIONS WERE MADE TO A DONOR	ADVISED DISTRIBUTION. FUND IN	ITIONS WERE MADE TO A DONOR ADVISED
1. CONTRIBUTIONS WERE MADE TO A DONOR FUND AT THE ARIZONA COMMUNITY FOUND	ADVISED DISTRIBUTED OF THE PROPERTY OF THE PRO	ITIONS WERE MADE TO A DONOR ADVISED ORDER TO BE ABLE TO EVEN OUT GRANTS
1. CONTRIBUTIONS WERE MADE TO A DONOR FUND AT THE ARIZONA COMMUNITY FOUND DONATIONS WILL BE DIRECTED IN ACCORD	ADVISED DISTRIBUTED IN DANCE DURING TAND NEEDS. T	OTIONS WERE MADE TO A DONOR ADVISED ORDER TO BE ABLE TO EVEN OUT GRANTS THE YEAR AND BE PREPARED FOR UNFORSEEN

ORGANIZATIONS, BUT WAS MADE ONLY FOR TIMING GRANTED BY FORMULA WHICH IS FAR IN EXCESS OF CONVENIENCE AND POTENTIALLY FOR SCHOLARSHIPS 5% OF THE ASSETS AND DUE TO TIMING MANAGED BY THE COMMUNITY FOUNDATION. CONSIDERATIONS A DONOR ADIVISED FUND IS USED FOR TEMPORARILY HOLDING FUNDS.