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

Department of the Treasury Internal Revenue Service

▶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. Q

ī	Fór c	alend	ar year 2019 or tax year beginning , a	nd ending					_
•		ne of fou				A Empl	oyer identification number		
			AND MARY PAPPAJOHN FAMILY						
			DATION		<u>.</u>		<u>-4941931</u>		_
			street (or P O box number if mail is not delivered to street address)		Room/suite		hone number (see instructions	3)	
			STREET STE 2116 state or province, country, and ZIP or foreign postal code		,	21	<u>5-244-5746</u>		=
			MOINES IA 50309			C If exe	emption application is pending,	check here	⅃
				n of a former public	chanty	D 1 F	oreign organizations check he	ere ▶ [٦
	•	TICON C	Final return Amended	•	,		oreign organizations meeting t	_	_
			Address change Name cha			1	5% test, check here and attach		٦
	ч с	book 6	ype of organization X Section 501(c)(3) exempt private		(E # 05	vate foundation status was tem	oungled upder	_
r	_			e private foundation	ρ_G	1 '	on 507(b)(1)(A), check here	▶	٦
L	_		ket value of all assets at J Accounting method		crual	F If the	foundation is in a 60-month te		_
,			ear (from Part II, col (c), Other (specify)		A Gai		r section 507(b)(1)(B), check h	~ 1	٦
		e 16) l	· · · · · · · · · · · · · · · · · · ·	he on cash basis)				_	_
•			Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements	_
			amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net in		(c) Adjusted net income	for chantable purposes	
/ .			the amounts in column (a) (see instructions))	books	- 			(cash basis only)	_
		1	Contributions, gifts, grants, etc., received (attach schedule)		-				
•		2	Check ▶ If the foundation is not required to attach Sch B					-	-
		3	Interest on savings and temporary cash investments		-				_
		4	Dividends and interest from securities		 		· · · · · · · · · · · · · · · · · · ·		_
		5a	Gross rents		<u> </u>				_
	ne	ь	Net rental income or (loss)		 				_
	Revenue	6a	Net gain or (loss) from sale of assets not on line 10		+				_
		b	Gross sales price for all assets on line 6a			0			-
		8	Capital gain net income (from Part IV, line 2) Net short-term capital gain	···			0		-
		9	Income modifications		+				_
		10a	Gross sales less returns and allowances	<u> </u>					_
		b	Less Cost of goods sold					-	_;
		c	Gross profit or (loss) (attach schedule)						_
		11	Other income (attach schedule)						
		12_	Total. Add lines 1 through 11		0 _	0	0		_
_	Ş	13	Compensation of officers, directors, trustees, etc		0				_
SCAN	ည်	14	Other employee salanes and wages						_
4	be.	15	Pension plans, employee 配配 EIVED		-	· · ·			_
ANN	E	16a	Legal fees (attach schedule)						_
Z	é	b	Accounting fees (attach schedule) Other professional res (attach schedule) 2020		 				
ED		17	Other professional least (attach schedule)s 2020						_
	str	17 18	Interest Tayes (attach schedule) (sep instructions)						_
5	Ē	19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	·., ·					_
JAN	Administrati	20	Occupancy						_
		21	Travel, conferences, and meetings	- ~					_
<u> </u>	and	22	Printing and publications						_
2		23	Other expenses (att. sch.)						_
2022	ţį	24	Total operating and administrative expenses.						
_	ā		Add lines 13 through 23		0	0	0	_	0
	Operating	25	Contributions, gifts, grants paid		0				0
		26	Total expenses and disbursements. Add lines 24 and 25		0	0	0		<u>0</u>
		27	Subtract line 26 from line 12						
		a	Excess of revenue over expenses and disbursements		<u> </u>				_
		b	Net investment income (if negative, enter -0-)		 	0	0		-
		<u> </u>	Adjusted net income (if negative, enter -0-)				1	Form 990-PF (201	

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				End o	End of year		
į_Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year (a) Book Value	(b) Book Value	(c) Fair Market Value		
1	Cash - non-interest-bearing						
2	Savings and temporary cash investments						
3	Accounts receivable ▶						
	Less allowance for doubtful accounts ▶						
4	Pledges receivable ▶ ·						
	Less allowance for doubtful accounts ▶						
5	Grants receivable						
6	Receivables due from officers, directors, trustees, and other						
	disqualified persons (attach schedule) (see						
1	instructions)						
7	Other notes and loans receivable.(att. schedule)			,			
	Less allowance for doubtful accounts ▶	0					
8 12	Inventories for sale or use						
Assets a 6 8	Prepaid expenses and deferred charges						
8 10a	Investments - U S and state government obligations (attach schedule)						
b	Investments - corporate stock (attach schedule)						
C	Investments - corporate bonds (attach schedule)						
11	Investments – land, buildings, and equipment, basis ▶			-			
	Less accumulated depreciation (attach sch) ▶						
12	Investments - mortgage loans						
13	Investments - other (attach schedule)						
14	Land, buildings, and equipment basis						
	Less accumulated depreciation (attach sch.) ▶						
15	Other assets (describe ▶)					
16	Total assets (to be completed by all filers - see the				1~/		
	instructions Also, see page 1, item I)		0	<u> </u>	1× 0		
17	Accounts payable and accrued expenses						
18	Grants payable						
<u>.</u> 19	Deferred revenue						
Liabilities 20 21 20 22	Loans from officers, directors, trustees, and other disqualified persons						
[편] 21	Mortgages and other notes payable (attach schedule)						
22	Other liabilities (describe ▶)			,, ,,		
23	Total liabilities (add lines 17 through 22)		0	0	<u> </u>		
	Foundations that follow FASB ASC 958, check here	• X			,		
auces 24	and complete lines 24, 25, 29, and 30.						
E 24	Net assets without donor restrictions						
	Net assets with donor restrictions	г			• •		
힐	Foundations that do not follow FASB ASC 958, check here	• □					
킖	and complete lines 26 through 30.						
26	Capital stock, trust principal, or current funds				· 		
g 27	Paid-in or capital surplus, or land, bldg, and equipment fund						
28	Retained earnings, accumulated income, endowment, or other funds						
S 29	Total net assets or fund balances (see instructions)		0	0			
Net Assets or Fund Ba 25 26 27 30 30	Total liabilities and net assets/fund balances (see			0			
	Instructions)		0	0			
Part			at agrae with				
	al net assets or fund balances at beginning of year – Part II, column (a), line a	∠9 (mu	st agree with	_	0		
	-of-year figure reported on pnor year's return)			1 2			
	er amount from Part I, line 27a			2 3			
	er increases not included in line 2 (itemize)			3 4			
	lines 1, 2, and 3			5	*		
	reases not included in line 2 (itemize) ▶ al net assets or fund balances at end of year (line 4 minus line 5) – Part II, co	dumn /	a) line 29	6			
<u>6 Tota</u>	ni net assets of futio parametes at end of year (line 4 minus line 5) - Part II, co	numm (I	.,		Form 990-PF (2019)		

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

Part VI instructions

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<u>Pa</u>	rt VII Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	inst	truct	<u>ions)</u>	1
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1				•
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			_	
	here ▶ and enter 1%,of Part I, line 27b				!
С	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-)				0
3	Add lines 1 and 2				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				0
6	Credits/Payments i				
а	2019 estimated tax payments and 2018 overpayment credited to 2019				
b	Exempt foreign organizations – tax withheld at source				
c	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d	•			
7 7	Total credits and payments Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	-			
11	Enter the amount of line 10 to be Credited to 2020 estimated tax				
	Int VII-A Statements Regarding Activities				
				Yes	No
1a	participate or intervene in any political campaign?	ŀ	1a	163	X
_	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	ŀ	ıa_		
þ		- 1	1b		x
	instructions for the definition	ł	10	-	
	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		4-		X
C	Did the foundation file Form 1120-POL for this year?	ŀ	1c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.				
	(1) On the foundation > \$ (2) On foundation managers > \$			-	
е	Enter the reimbursement (if-any) paid by the foundation during the year for political expenditure tax imposed				
_	on foundation managers ▶ \$.e		X
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	ŀ	<u>2</u>		
	If "Yes," attach a detailed description of the activities			15	ľ
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	ŀ	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	, <u> </u>	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	'A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	ŀ	5		X
	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 remain in the governing instrument?	ļ	6	X	
		ŀ	7		X
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				
_	Enter the states to which the foundation reports or with which it is registered. See instructions IA				ļ
7 8a b	Enter the states to which the foundation reports or with which it is registered. See instructions				
8a	Enter the states to which the foundation reports or with which it is registered. See instructions IA				
8a	Enter the states to which the foundation reports or with which it is registered. See instructions IA: If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	<u>x</u>	
8a b	Enter the states to which the foundation reports or with which it is registered. See instructions IA: If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation. Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		8b	<u>x</u>	
b	Enter the states to which the foundation reports or with which it is registered. See instructions TA If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See instructions for Part XIV. If "Yes,"		8b 	<u>x</u>	
8a b	Enter the states to which the foundation reports or with which it is registered. See instructions IA: If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation. Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			<u>x</u>	x

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?

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4b

X

• P10000X	40 07/13/2020 11 49 AM								
	990-PF (2019) JOHN AND MAI	RY PAPPAJOHN FAMI ng Activities for Which Fo		941931	ontinue	ed)		P	age 6
5a	During the year did the foundation pay of (1) Carry on propaganda, or otherwise a	ncur any amount to attempt to influence legislation (sec	ction 4945(e))?		Yes	X No		Yes	No
	(2) Influence the outcome of any specific directly or indirectly, any voter regist(3) Provide a grant to an individual for tr	ration drive?			Yes Yes	X No			
	(4) Provide a grant to an organization of section 4945(d)(4)(A)? See instruction	ons			Yes	X No	_	,	
ь	(5) Provide for any purpose other than a purposes, or for the prevention of cn If any answer is "Yes" to 5a(1)–(5), did a	uelty to children or animals?		escnbed	Yes	X No			
	in Regulations section 53 4945 or in a c Organizations relying on a current notice	regarding disaster assistance, ch	eck here	ıs		n/a ▶ []	5b		
С	If the answer is "Yes" to question 5a(4), because it maintained expenditure responsible "Yes," attach the statement required b	nsibility for the grant?		n/a 🗌	Yes	☐ No			
	Did the foundation, during the year, rece on a personal benefit contract?	ive any funds, directly or indirectly	, to pay premiums		Yes	X No			x
b 7а	Did the foundation, during the year, pay if "Yes" to 6b, file Form 8870 At any time during the tax year, was the	•	•	ract?	Yes	X No	6b		
ь 8	If "Yes," did the foundation receive any plants the foundation subject to the section 4	roceeds or have any net income a	attnbutable to the transac	ction?	1	N/A	7b		
	and Contractors	ficers, Directors, Trustees		_	Yes Iy Pai	X No id Employ	ees,		
<u>1 L</u>	ist all officers, directors, trustees, and		(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	e pla	Contributions to imployee benefit ans and deferred compensation		xpense a er allowa	
	TT KINLEY 5 WALNUT STREET, SUITE 2116	DES MOINES IA 50309	OFFICER 0.25		0		0		0
	1								
	•				-		ļ	-,-	
	Compensation of five highest-paid em	ployees (other than those inclu	ded on line 1 – see ins	tructions). If n	one, e	nter			
	(a) Name and address of each employee	paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	ı e	Contributions to imployee benefit ans and deferred compensation		xpense a er allowa	
NO	NE '								
	:	·		·.	+	<u> </u>			
	;								
	· · · · · · · · · · · · · · · · · · ·								
Total	number of other employees paid over \$5	0,000)	om 9	90-PF	(2019)

Part VIII Inform	OHN AND MARY PAPPAJOHN FAMILY nation About Officers, Directors, Trustees, Foundat Contractors (continued)	tion Managers, Highly Paid E	mployees,
	independent contractors for professional services. See instruct	ions. If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
	, and the state of		
	,		
······································			
Total number of others re	eceiving over \$50,000 for professional services		>
RartliX-A Sun	nmary of Direct Charitable Activities		
	st direct chantable activities during the tax year. Include relevant statistical information such cianes served, conferences convened, research papers produced, etc.	n as the number of	Expenses
1 N/A			
2	;		
3		-	
4			
	nmary of Program-Related Investments (see instruct	tions)	
	am-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			, , , , , , , , , , , , , , , , , , , ,
All other program-related inves	stments See instructions		
3			
		· · · · · · · · · · · · · · · · · · ·	<u> </u>
Total. Add lines 1 throug	h 3 ,		

-om	990-PF (2019) JOHN AND MARY PAPPAJOHN FAMILY 81-4941931		Page 8
	Int X Minimum Investment Return (All domestic foundations must complete this part Foreig	n foundations,	
-	see instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc.		
	purposes		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see instructions)	1c	0
đ	Total (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0	v	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for chantable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0
6	Minimum Investment return. Enter 5% of line 5	6	0
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	foundations	
	and certain foreign organizations, check here ▶ ☐ and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	
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)		
С	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	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	0
Pá	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0
b	Program-related investments – total from Part IX-B	1b	
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		
а	Suitability test (pnor IRS approval required)	3a	<u>.</u>
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	0
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	dation	
	qualified for the profiler 4040/a) radication of tay in there years		

Form 990-PF (2019) JOHN AND MARY PAPPAJO		81-49419.	31	Page 9
Part XIII Undistributed Income (see instruction	ns)			
	(a)	(b)	(c)	(d)
1 Distributable amount for 2019 from Part XI,	Corpus	Years prior to 2018	2018	2019
line 7				0
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only				
b Total for prior years 20, 20, 20				<u> </u>
3 Excess distributions carryover, if any, to 2019				1
a From 2014	_			!
b From 2015	\dashv			
c From 2016 d From 2017	\dashv			1
e From 2018	=			'
f Total of lines 3a through e				<u> </u>
4 Qualifying distributions for 2019 from Part XII,				
line 4 > \$				
a Applied to 2018, but not more than line 2a				
b Applied to undistributed income of prior years				i
(Election required – see instructions)				İ
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				1
b Pnor years' undistributed income Subtract				1
line 4b from line 2b				
c Enter the amount of pnor years' undistributed				
income for which a notice of deficiency has				
been issued, or on which the section 4942(a)				.1
tax has been previously assessed		<u> </u>		· · · · · · · · · · · · · · · · · · ·
d Subtract line 6c from line 6b Taxable			•	·
amount – see instructions			· <u>·</u> ····	
e Undistributed income for 2018 Subtract line				j
4a from line 2a Taxable amount – see				
Instructions f Undertributed income for 2010. Subtract lines				<u> </u>
f Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must be	ľ			
distributed in 2020				o
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.				
Subtract lines 7 and 8 from line 6a				
O Analysis of line 9	•			
a Excess from 2015				
b Excess from 2016		[•	•	
c Excess from 2017		1		
d Excess from 2018	\Box	1		•
e Excess from 2019		1	•	

Form 990-PF (2019) JOHN AND MARY PAPPAJOHN FAMILY
Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During t	he Year or Approved fo	r Future Payment		
Recipient .	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	reapient		
a Paid during the year N/A				
,				
;				
•				
3]	
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:				
!				
Total			▶ 3a	
b Approved for future payment N/A				
N/A				
·]	
,				
<u> </u>				
; ,				
•				
			l	
Total	- - -		▶ 3b	

Form 990-PF (2019)	JOHN	AND	MARY	PAPPAJOHN	FAMILY

81-4941931

	019) JOHN AND MARY PAPPAJO		81-	494193	<u> 1</u>	Page 1
Part XVI-A	Analysis of Income-Producing A	ctivities				
	ounts unless otherwise indicated		business income	Excluded b	y section 512, 513, or 514	
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1 Program ser				 		(Oce mandents)
	(-		+ +		
		-				
d						
f						
	d contracts from government agencies					
	dues and assessments					———
	savings and temporary cash investments	1		+		
	nd interest from securities		 			· ·
	come or (loss) from real estate			-		
	anced property t-financed property	-		+		
	come or (loss) from personal property			+ +		
Other investi		 	.			
	s) from sales of assets other than inventory			+ + +		
-	or (loss) from special events					
	or (loss) from sales of inventory					
	ue a					
b						
c						
d		_				
e		_				
	d columns (b), (d), and (e)			0	0	
	ne 12, columns (b), (d), and (e)				13	(
	in line 13 instructions to venfy calculations)	A 1 - 1	<u></u>	D		
Part XVI-B	Relationship of Activities to the Explain below how each activity for which incon accomplishment of the foundation's exempt pur	ne is reported in co	umn (e) of Part X	VI-A contribut	ted importantly to the	une)
N/A	accomplishment of the foundation's exempt pur	— Conter than t	y providing lunds	TOT SUCIT PUT	posesy (occ mandend	
						···-
	·					
						
						
					-	
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						From MMIII-ME (2016

	ne foundation directly or indirectly affiliated	•	•	organizations			(F)
	cnbed in section 501(c) (other than section	501(c)(3)) or in section	n 527?			∐ Ye	s 🗓 N
b If "Y	es," complete the following schedule						
	(a) Name of organization	(b) Type of organ	zation	(c) Descrip	tion of relationship		
N/A	<u> </u>						
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	Under penalties of perjury, I declare that I have examin correct, and complete Declaration of preparer (other the						
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Sign		-/			See instru		
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	Stonature of Officer or trustee		Date	Title	CER		
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	Pnnt/Type preparer's name	Pr	eparer's signature		} '		Check
Paid	NAME TIPETED	}			7	1-14-20	self-employe
Preparer	MATT JUFFER Fum's name ▶ HAMILTON JU	FFER & ASS	OCIATES LEP	7		P00083	072
Use Only	CCC CDAIM I					20-3626	
Ţ	Firm's address > 666 GRAND A	VE STE 240	- / /	}		515-245	

Form 990-PF (2019)