Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

OMB No 1545-0047

_		llendar year 2019	or tax year beg	inning			, 2019,	and endi				<u>,</u> 20
		f foundation							- 14	A Employer identifi	cation number	
	ΞIG	HT TORCHES FO	OUNDATION							82-333760	0	
Nui	mber	and street (or P O box	number if mail is not	delivered to str	eet addr	ess)		Room/suite	. 1	3 Telephone numb	er (see instruction	ns)
F	FOU	NDATION SOURC	CE 501 STLVI	ERSTDE R	D					(800) 83	19-1754	
_		own, state or province,						l	+		<u> </u>	
		·	•	, , , , , , , , , , , , , , , , , , ,					-	If exemption applica pending, check here	ition is	. •
_		MINGTON, DE 1					-6 - 6					
G	Che	eck all that apply	Initial retu		-		of a former p	oublic char	ıty t	1 Foreign organizat		. ▶□
			Final retur		<u> </u>	Amended ref				2 Foreign organiza 85% test, check h		
_	<u> </u>		Address			Name chang			_			. ▶∟
H_	\neg	eck type of organiza		·	_;			n	d la	E If private foundation	n status was termini	ated
┸		Section 4947(a)(1) no					ivate foundat		1	under section 507(b)(1)(A), check here	. ▶∟
		market value of			_	ethod 🔀 Ca	ash Acc	rual		If the foundation is		
		of year (from Par	t II, coi (c), line 787, 199.		r (spec				— l	under section 507(b))(1)(B), check here	. ▶∟
	_				umn (d)	, must be on ca	ash basis)		<u> </u>		(d) Diahim	
	art	Analysis of Reve total of amounts in may not necessaril column (a) (see ins	columns (b), (c), a ly equal the amoun	and (d)	expe	venue and nses per ooks	(b) Net inve		(c)	Adjusted net income	(d) Disburs for char purpos (cash bas	ıtable ses
Т	_					152,500				· · · · · · · · · · · · · · · · · · ·	,	
	1 2		foundation is not req	juired to							'	-
ج		aπacn	Sch B	I		1,504.		1,504.				-
707	3	Interest on savings and	• •			9,015.		9,015.				
- [4	Dividends and intere				3,020						-
2		Gross rents										
		Net rental income or (lo	·			6,679.				.		
Ž	bа	Net gain or (loss) from Gross sales pice for all), 404.		0,0101						
ē.	-	assets on line 6a		· -				6,679.				
18	7	Capital gain net inco	•	, , , , , , , , ,	-			0,073.		·· - ··		
	8	Net short-term capit Income modification	-									
• ·	10 a	Gross sales less returns and allowances	;									
Revenue	b	Less Cost of goods sole										
•	С	Gross profit or (loss)) (attach schedule)	L								
1	11	Other income (attac	h schedule) ATCI	н. 1 📖		4,860.		4,860.				
	12	Total Add lines 1 th	rough 11			174,558.	2	2,058.				
1	13	Compensation of office	ers, directors, trustees	s, etc		0.			RE	CEIVED	<u> </u>	
enses	14	Other employee sala	aries and wages .								781	
E 1	15	Pension plans, empl	loyee benefits					122		1 7 2020		
EX	16a	Legal fees (attach so	hedule) ATCH 2	²		679.		679	J	UL A V	181	
W	ь	Accounting fees (at	tach schedule)						<u></u>			
<u> </u>	С	Other professional f	ees (attach schedu	ile).[3]		3,766.		3,765.	_0	GDEN, U	<u> </u>	
Administrative	17	Interest						<u> </u>				
is	18	Taxes (attach schede	ule) (see instructio	ns)[4]. 🔼		122.						
	19	Depreciation (attach	schedule) and de	epletion .			*****					
힑	20	Occupancy										
D	21	Travel, conferences,	and meetings			400.						400
and	22	Printing and publica	tions									
2	23	Other expenses (atta	ach schedule) ATC	:н .5 🖳		21,761.	1	2,467.				9,123
Operating	24	1 otal operating and	l administrative ex	rpenses				[
je.		Add lines 13 through	h 23			26,728.	1	6,912.				9,523
Ŏ 2	25	Contributions, gifts,	grants paid									
	26	Total expenses and disbu	rsements Add lines 2	24 and 25		26,728.	1	6,912.		0.		9,523
2	27	Subtract line 26 from	n line 12				· r ·	· • • T		e 4 4 4		
		Excess of revenue over		—		147,830.	· ~ ~ .	• • •	• • •		•	
	b	Net investment inco	ome (if negative, er	nter -0-)				5,146.				
	_	Adjusted net incom	e (if negative ente	r -0-1				1		1	l	

JSA For Paperwork Reduction Act Notice, see instructions. 9E1410 1 000

Form **990-PF** (2019)

P	art l	Balance Sheets Attached schedules and	amounts in the	Beginning of year	Enc	d of year
Έ		description column shou amounts only (See instru	o be for eno-of-year	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments			168,922	
	3	Accounts receivable 🕨		A THE STREET THE	TOUR AND AND ASSESSED.	Sie Mit Se all Beine Se Se al
		Less allowance for doubtful accounts >				
	4	Pledges receivable		الاصلة الله الدسائلة	mandithing it will be	E AMPROPRIES AND ALLES
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trus	tees, and other			
		disqualified persons (attach schedule) (see inst	ructions)			
	7	Other notes and loans receivable (attach sched	ule) ►		P. C. 27.11. C. L.	The least of the
		Less allowance for doubtful accounts ▶				
Assets	8	Inventories for sale or use				
SS	9	Prepaid expenses and deferred charges				
4		Investments - U.S. and state government obligations (a				
	b	Investments - corporate stock (attach schedule)	ATCH 6	150,579.	263,821	283,297
	4.4 C	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
	12	Investments - mortgage loans	<u> </u>			
		Investments - mongage loans	ATCH.7	75,000.	75,000	75,000
		equipment hasis				
		Less accumulated depreciation (attach schedule)				
		Other assets (describe ATC			242,222	. 259,980
		Total assets (to be completed by all f			7.0.05	707.100
_		instructions Also, see page 1, item I)		602,135.	749,965	787,199
	17	Accounts payable and accrued expenses				
46	18	Grants payable				
ë	19	Deferred revenue	• • • • • • • •			
Ħ	20	Loans from officers, directors, trustees, and other disq	•			
ā	l	Mortgages and other notes payable (attach sch	·			
_	22	Other liabilities (describe)			
	22	Total liabilities (add lines 17 through 22)		0.) .
-		Total liabilities (add lines 17 through 22)		0.	,	/ •
Balances		Foundations that follow FASB ASC 958, chec and complete lines 24, 25, 29, and 30	k here P			
ŭ	ĺ.,	·				
a	24	Net assets without donor restrictions				
_		Net assets with donor restrictions				
or Fund		Foundations that do not follow FASB ASC 958, che and complete lines 26 through 30	ck here			
Ū.		•				
0	26	Capital stock, trust principal, or current funds.				,
ë	20	Paid-in or capital surplus, or land, bldg , and equipmen		602,135.	749,965	
155	20	Retained earnings, accumulated income, endowment,		602,135.	749,965	
×	29	T <mark>otal net assets or fund balances</mark> (see instruct Total liabilities and net assets/fund		002,130.	, 15, 500	`
ž		instructions)	`	602,135.	749,965	
	art III				, , , , , , ,	<u>'l</u>
		I net assets or fund balances at beginning			must agree with	_
•		of-year figure reported on prior year's retu			_	602,135
2		r amount from Part I, line 27a				1.17.000
		er increases not included in line 2 (itemize)				+
		lines 1, 2, and 3				7.40 0.66
5		reases not included in line 2 (itemize)			5	
		I net assets or fund balances at end of ye	ar (line 4 minus	line 5) - Part II, column (749,965
_						

Pa	rt IV Capital Gains	s and Losses for Tax on Inv	estment Income			
	• •	escribe the kind(s) of property sold (for our control warehouse, or common stock, 200	•	(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	SEE PART IV SCHE	DULE	<u></u> '	D - Donation		
b						
С						-
d						
e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) mini	
a					_	
<u>b</u>					_	
<u>c</u>						
<u>d</u>				·	<u></u>	
		Ishowing gain in column (h) and owned	by the foundation on 12/31/69	(1)	Carpo (Cal. (b) as	
		(j) Adjusted basis	(k) Excess of col (i)		Gains (Col. (h) ga (k), but not less t	han -0-) or
	(i) FMV as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	l (h))
а						
b						
<u>c</u>						
<u>d</u>						
<u> </u>			ain, also enter in Part I, line 7			
2	Capital gain net income	or (net canital loss)	oss), enter -0- in Part I, line 7	2		6,679.
3	Net short-term capital of	ain or (loss) as defined in sections				-,
_		Part I, line 8, column (c) See ins				
	•	<u> </u>		3		0.
Pai	rt V Qualification	Under Section 4940(e) for Re	duced Tax on Net Investment in	ncome		
Was			outable amount of any year in the b	ase period	17 _] Yes ⊠ No
1			ar, see the instructions before maki	ng any en	tries	· ·
Cale	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets	9	(d) Distribution ra (col (b) divided by	
	2018	113,796.	350,931.			0.324269
	2017	-	76,344.			
	2016				<u>-</u>	
	2015					
	2014					
_	Takal aklima A. aalii	. 47				0.324269
2		(d)		2		V.JZ4ZUJ
3	_	io for the 5-year base period - divid	If less than 5 years	3		0.162135
	the number of years the	foundation has been in existence	ir less than 5 years			
4	Enter the net value of n	oncharitable-use assets for 2019 f	from Part X, line 5	4		565,795.
5	Multiply line 4 by line 3			5		91,735.
6	Enter 1% of net investm	nent income (1% of Part I, line 27b)		6	<u> </u>	51.
7	Add lines 5 and 6			7		91,786
8	Enter qualifying distribu	tions from Part XII, line 4		8		259,523.
	If line 8 is equal to or g Part VI instructions	greater than line 7, check the box	in Part VI, line 1b, and complete	that part	using a 1% tax	rate See the

Pai	tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	<u> 4948 - see</u>	instru	ctions	<u>s)</u>	
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	1			51.	
	here \blacktriangleright X 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)		-	-	••	
•	- 1	,				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	3		_	51.	
3	Add lines 1 and 2	-			0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	5			51.	
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0	3				
6	Credits/Payments 2019 estimated tax payments and 2018 overnayment credited to 2019 62.				,	
_	2010 estimated tax payments and 2010 overpayment dedited to 2010				i	
b	Exempt foreign organizations tax withheld at socioty,				•	
C	tax para that application of the extension of the total (1 of the coop).				*	
_d	backup withindaing circlesary withinda	7		-	62.	
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	8				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9		-	11.	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					
11 Doc	Enter the amount of line 10 to be Credited to 2020 estimated tax ► 11. Refunded ► t VII-A Statements Regarding Activities	11				
				1	١	
Ίа	During the tax year, did the foundation attempt to influence any national, state, or local legislation		14-	Yes	No X	
	participate or intervene in any political campaign?		1a			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes		1, 1		Х	
	instructions for the definition		1b			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of an	y materials				
	published or distributed by the foundation in connection with the activities		4.		Х	
	Did the foundation file Form 1120-POL for this year?		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 \$		2		Х	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	• • • • •	-			
_	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrume		3		Х	
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				X	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a 4b			
	If "Yes," has it filed a tax return on Form 990-T for this year?				X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5			
e	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
6						
	By language in the governing instrument, or By state legislation, that effectively amends the governing instrument so that no mandatory disc	otions ++				
	By state legislation that effectively amends the governing instrument so that no mandatory directions with the state law remain in the governing instrument?		6	х		
7	conflict with the state law remain in the governing instrument?		7	X		
7 8a		iiu Fail AV				
ud	Enter the states to which the foundation reports or with which it is registered. See instructions. DE,					
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorn	ev General				
U	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	х		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 49				_	
•	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XI					~
	complete Part XIV		9		Х	1
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule I	_	10		Х	
	names and addresses	<u> </u>	•			

Pai	VII-A Statements Regarding Activities (continued)			
,			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	neaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	<u> </u>
	Nebsite address ► N/A			
14	The books are in care of ▶ FOUNDATION SOURCE Telephone no ▶ 800-839	-1754	4	
	ocated at ▶501 SILVERSIDE ROAD, SUITE 123 WILMINGTON, DE ZIP+4 ▶ 19809-1	377		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	. 🔲
•	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority	<u> </u>	Yes	$\overline{}$
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			;
	he foreign country >	<u> </u>		<u> </u>
Pai	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		1.2	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)	:		ĺ
	1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?		ļ	
	, remain goods, estimated to (or doospt than more) a disquarries poisson.		1	
	, c, component of c, pe, c, remeates the siperiors of c sequence potential.			1
	5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	6) Agree to pay money or property to a government official? (Exception, Check "No" if the			1
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			1
h	f any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
•	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1ь		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			1
	vere not corrected before the first day of the tax year beginning in 2019?	1c		Х
2	axes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	perating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	id and 6e) for tax year(s) beginning before 2019?			
	f "Yes," list the years , , , , ,			
b	tre there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	III years listed, answer "No" and attach statement - see instructions)	2b		
С	the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	1			İ
3a	old the foundation hold more than a 2% direct or indirect interest in any business enterprise			İ
	it any time during the year?			
b	"Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or			
	isqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the] }		
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			1
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the	_,		-
	bundation had excess business holdings in 2019)	3b		X
	old the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		
D	old the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its haritable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		Х
	named by passe that had not been removed from jeopardy before the hist day of the tax year beginning in 2019	1 70		

Form 9	990-PF (2019)	EIGHT TORCHES	FOUNDATION			82-3	337600	F	eage 6
Pai	t ŴII-B	Statements Regarding Activities	for Which Form	4720 May Be Req	uired (con	inued)			
5a	During the y	ear, did the foundation pay or incur any amo	ount to					Yes	No
	(1) Carry or	propaganda, or otherwise attempt to influe	ence legislation (section	n 4945(e))?	Yes	X No			
	(2) Influence	e the outcome of any specific public ele	ction (see section	4955), or to carry or	١,				
	directly	or indirectly, any voter registration drive?			. Yes	X No			;
	(3) Provide	a grant to an individual for travel, study, or o	ther similar purposes?		. Yes	X No		ł	
	(4) Provide	a grant to an organization other than a	charitable, etc., org	janization described i		_			
		4945(d)(4)(A)? See instructions				L No			
		for any purpose other than religious, ch							'
		s, or for the prevention of cruelty to children			- —	X No			,
b		ver is "Yes" to 5a(1)-(5), did any of the							٠,,٠
		section 53 4945 or in a current notice regar				ſ	5b_		X
	-	ns relying on a current notice regarding disas				▶١			≀
С		ver is "Yes" to question 5a(4), does the		•					
		naintained expenditure responsibility for the			. X Yes	No			;
•		ach the statement required by Regulations so							١,
6a		ndation, during the year, receive any fun	•			X No			
b		al benefit contract?				NO	6b	•	X.
J		b, file Form 8870	ctry or monectry, on a	personal benefit contra	ici		0.0	ļ	
7a		during the tax year, was the foundation a pa	arty to a prohibited ta	x shelter transaction?	Yes	X No			
b	•	the foundation receive any proceeds or have	•				7b		
8		ation subject to the section 4960 tax on pay	-						
		n or excess parachute payment(s) during the			. Yes	X No			
Pai	t VIII In	formation About Officers, Director			s, Highly P		loyees,		
1		<u>nd Contractors</u> cers, directors, trustees, and foundati	on managers and	their compensation	See instruc	tions			
	LISC GII OIIIC	(a) Name and address	(b) Title, and average hours per week	(c) Compensation	(d) Contribu	tions to	(e) Expen	se acco	unt.
		(a) Name and address	devoted to position	(If not paid, enter -0-)	employee ben and deferred cor		other al	lowance	35
									_
ATC	1 9 			0.		0.			0.
									
	<u> </u>								
2	Compensat	ion of five highest-paid employees	(other than thos	se included on line	e 1 - see	nstructio	ns). If n	one,	enter
(a)		ress of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contribu	penefit	(e) Expen	se acco	unt,
		. ,	devoted to position		plans and d compens		other al	iowanice	:3
						1			
	NONE								
				-URBUL					
						,			
T-4-		-th				 +			
otal	number of c	other employees paid over \$50,000	<u> </u>	<u> </u>	<u> </u>	▶	Form 99	n.PF	(2010)
							1 01111 33	∵ -ı ı	140191

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and Contractors (continued) 3 Five highest-paid independent contractors for professional servi	ices. See instructions. If none enter "NONE	m .
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(5) 1) po 6: 56: 1155	(c) compensation
	 [0.
		<u>-</u> .
Total number of others receiving over \$50,000 for professional services.		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include re	elevant statistical information such as the number of	
organizations and other beneficianes served, conferences convened, research papers produc		Expenses
1 N/A		
2		
2		
<u> </u>		
4		
Part IX-B Summary of Program-Related Investments (see ins	·	
Describe the two largest program-related investments made by the foundation during the tax 1 TALANTON IMPACT FUND LLC - INVESTMENT TO PROMOTE		Amount
WELFARE WITH A FOCUS ON POVERTY ALLEVIATION.	LE THE FOREIC	
WELLING WITH A LOCOO ON LOVENIT HEED THINKS		250,000.
2		
All other program-related investments See instructions		
3		
NONE		
Total. Add lines 1 through 3		250,000
FOLM, AUG THES I UNTOUGH 5		230,000

Form **990-PF** (2019)

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Påi	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions)	eign found	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	345,324.
b	Average of monthly cash balances	1b	154,087.
С	Fair market value of all other assets (see instructions)	1c	75,000.
d	Total (add lines 1a, b, and c)	1d	574,411.
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	574,411.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	8,616.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	565,795.
6	Minimum investment return. Enter 5% of line 5	6	28,290.
Pai	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating fou	ndations	
	and certain foreign organizations, check here ▶ and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	28,290.
2 a	Tax on investment income for 2019 from Part VI, line 5 2a 51.		
b			
c		2c	51.
3	Distributable amount before adjustments Subtract line 2c from line 1		28,239.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4		28,239.
6	Deduction from distributable amount (see instructions)		
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1		28,239.
Pai	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	i i	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	9,523.
b	Program-related investments - total from Part IX-B	1b	250,000.
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 (prior IRS approval required)	3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	259,523.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		<u> </u>
	Enter 1% of Part I, line 27b See instructions	5	51.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		259,472.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		whether the foundation

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

Form **990-PF** (2019)

Part XIII Undistributed Income (see instruct	ions)	_		
	(a) Corpus	(b) Years pnor to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,	Corpus		2010	
line 7				28,239.
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only				
b Total for pnor years 20 17 ,20 16 ,20 15				
3 Excess distributions carryover, if any, to 2019				
a From 2014				
b From 2015				
c From 2016				
d From 2017				
e From 2018 95,784.	25 704			
f Total of lines 3a through e	95,784.			
4 Qualifying distributions for 2019 from Part XII, line 4 ▶ \$ 259,523.				
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 required - see instructions)				
d Applied to 2019 distributable amount				28,239.
e Remaining amount distributed out of corpus	231,284.			
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	327,068.			
b Prior years' undistributed income Subtract				
line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable				
amount - see instructions				
e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount - see 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	İ			
to satisfy requirements imposed by section	İ			
170(b)(1)(F) or 1912(g)(3) (Election may be	İ			
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.	227 060			
Subtract lines 7 and 8 from line 6a	327,068.			
10 Analysis of line 9				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018 95,784.				
e Excess from 2019 231, 284 .				

Form	990-PF (2019)	EIGHT TOR	CHES FOUNDATION		82-	-333/600 Page	<u> 10</u>
Pa	rt XIV Private Op	erating Foundations	(see instructions and	Part VII-A, ques	stion 9)	NOT APPLICABL	E
`1a	If the foundation has	received a ruling or d	etermination letter that	it is a private ope	erating		
	foundation, and the ruling	g is effective for 2019, e	nter the date of the ruling .		▶		
b	Check box to indicate v	vhether the foundation	s a private operating fo	undation described	in section 4942(j	<u>ı)(3) or4942(ı</u>)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total	
	justed net income from Part	(a) 2019	(6) 2018	(c) 2017	(d) 2016		
	I or the minimum investment return from Part X for each						
	year listed						
b	85% of line 2a						
С	Qualifying distributions from Part					1	
	XII, line 4, for each year listed .			\			
d	Amounts included in line 2c not used directly for active conduct						
	of exempt activities					<u> </u>	
е	Qualifying distributions made						
	directly for active conduct of exempt activities. Subtract line						
•	2d from line 2c						
3	Complete 3a, b, or c for the alternative test relied upon			X			
а	"Assets" alternative test - enter			/ \			
	(1) Value of all assets	 		<i>-</i>	\	 	
	(2) Value of assets qualifying under section						
	4942(j)(3)(B)(i)			<u>,/</u>			
D	"Endowment" alternative test- enter 2/3 of minimum invest-			•			
	ment return shown in Part X,						
	line 6 for each year listed .						
С	"Support" alternative test - enter						
	(1) Total support other than gross investment income						
	(interest, dividends, rents, payments on secunities						
	loans (section 512(a)(5)),					\	
	or royalties) (2) Support from general	ļ <i>,</i>				 	
	public and 5 or more						
	exempt organizations as provided in section 4942						
	(j(3)(B)(iii)	·/					
	port from an exempt	/					
	organization						$\overline{}$
Pa	` '	tary Information (Complete this part of	only if the found	dation had \$5,000 o	or more in asset	s at
		uring the year - see					
1	Information Regarding	g Foundation Manage	rs:		***********	*****	
а	List any managers of						ition
	before the close of any	tax year (but only if th	ey have contributed mo	ore than \$5,000)(See section 507(d)(2))		
	D.G. ELMORE						
b	List any managers of					y large portion of	the
	ownership of a partner	ship or other entity) of	which the foundation b	nas a 10% or great	er interest		
	N/A						
2	Information Regarding	-	•				
	Check here ► X if the	he foundation only	makes contributions to	preselected cha	aritable organizations	and does not ac	сер
				ts, etc , to individi	uals or organizations u	nder other condition	ons,
	complete items 2a, b, o	 				 	
а	The name, address, a	nd telephone number	or email address of the	person to whom a	pplications should be add	dressed	
	The forms of the total						
Þ	The form in which appl	ications should be sub	omitted and information	and materials the	y snoula include		
	Any submission deadlii	nes					
U	mily submission deadill	103					

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

Page **11**

3 Grants and Contributions Paid Dur Recipient Name and address (home or business)	ing the Year or App	roved for	Future Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a Paid during the year				
- ,				
		•		
			•	
Total				
Total	· · · · · · · · · · · · · · · · · · ·			
b Approved for future payment				
				,
				·
+				
j				
Total			▶ 3b	

ter gross amounts unless otherwise indicated	Unrelated	d business income	Excluded by s	ection 512, 513, or 514	(e) Related or exempt
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a					(
b					
с					
d					
е					
f					<u></u>
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments -			14	1,504.	
Dividends and interest from securities			14	9,015.	
Nct rontal income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property					.
Other investment income					
Gain or (loss) from sales of assets other than inventory	,		18	6,679.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue a INCOME FROM PRI			14	4,860.	
b		P484PPPPPPPPPPP			
c					
***********	1				
d					
d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc	culations)	omplishment of	Exempt Purpo	oses	
d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calc	culations) es to the Acc	omplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities in the No Explain below how each activities.	culations) es to the Acc	omplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities in the No Explain below how each activities.	culations) es to the Acc	omplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities are No Explain below how each activities.	culations) es to the Acc	omplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities in the No Explain below how each activities.	culations) es to the Acc	omplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities are No Explain below how each activities.	culations) es to the Acc	omplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities in the No Explain below how each activities.	culations) es to the Acc	omplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly to
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated activities. Relationship of Activities. Explain below how each activities.	culations) es to the Acc	omplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcert XVI-B Relationship of Activities ne No Explain below how each activities	culations) es to the Acc	omplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated and the substructions of activities and the substructions are substructed as the substruction of activities are substructed as the substruction of activities are substructed as the substruction of activities are substructed as the substruction of activities are substructed as the substructed as the substruction of activities are substructed as the	culations) es to the Acc	omplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities ne No Explain below how each activities	culations) es to the Acc	omplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities ne No Explain below how each activities	culations) es to the Acc	omplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly to
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated activities. Relationship of Activities. Explain below how each activities.	culations) es to the Acc	omplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities in the No Explain below how each activities.	culations) es to the Acc	omplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly to
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculated activities. Relationship of Activities. Explain below how each activities.	culations) es to the Acc	omplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly to
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activities ine No Explain below how each activities.	culations) es to the Acc	omplishment of	Exempt Purpo	oses of Part XVI-A contribu	ted importantly to

Form 9	90-PF (2019)		EIGHI	TORCHES	FOUND	PATION		82-3337	600	Page	e 13
Part		mation Renizations	egarding	Transfers	to and	Transactions	and Relationships	With Nonchar	itable	Exe	mpt
1	Did the organiz	ation direct	tly or indire	ectly engage	ın any c	of the following v	with any other organi	zation described		/es	No
	in section 501	(c) (other	than sec	tion 501(c)	(3) orga	nizations) or in	section 527 relat	ing to political l		- 1	

1	ın sed	e organization direct ction 501(c) (other	•		_	-	_				Yes	No
	organi	zations?										
а	Transf	ers from the reportin	g foundation to a	noncharitable exem	npt organiz	zation of						
		sh								1a(1)		
	(2) Ot	her assets								1a(2)		
þ		transactions									-	
		les of assets to a no	-									
		rchases of assets fro										
		ntal of facilities, equi	-									
		imbursement arrange										
		ans or loan guarantee										
		rformance of service		=								
		g of facilities, equipm										
d		answer to any of th										
		of the goods, other										
		in any transaction or	1	- ,								
(a) L	ne no	(b) Amount involved N/A	(c) Name of nor	nchantable exempt organia	zation	N/A	ption of trans	rers, transac	tions, and shar	ing arra	ngeme	nts
		N/A				N/A						
		· · · · · · · · · · · · · · · · · · ·										
					····							
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				•								
	1						······································					
				•			 		<u> </u>			
2a	Is the	foundation directly of	n indirectly affili	ated with or relate	d to one	or more	tax-exemp	t organiz	ations			
		bed in section 501(c)	_					-		7	es 🗀	No
ь		," complete the follow	•	0.1.00 1(0)(0)) 0 0						٠٠ ســـــ		
		(a) Name of organization		(b) Type of orga	inization			(c) Descript	tion of relations	hip		
				-				-	•			
												
									,			
	Under	r penalties of perjury, I declar ct, and complete Declaration of	re that I have examined	this return, including acco	mpanying sch	edules and st	atements, and t	o the best	of my knowledge	e and b	elief, it	is true,
Sigr		ct, and domplete Declaration of	preparer (outer unan taxo)			C .	kilowiedge.		May the IDC	donus	. thin	rotum
_		NIE	<u> </u>	68.202		Presi	denl		May the IRS with the pre			
Her	Sigi	nature of officer or trustee		Date		litle .			See instructions	X	Yes	No
		<u>-</u>										
Deta	1	Print/Type preparer's nai	me	Preparer's signature			Date	Chi	eckif P	TIN		
Paid -	_	JEFFREY D HASH	KELL	JEFFREY D HA	SKELL	_	05/20/2	2020 sel		2013		0
Prej	parer	Firm's name ► FO	UNDATION SOU	JRCE				Firm's EIN	▶ 51039	8347	'	
Use	Only	Firm's address ► ON	E HOLLOW LN,	STE 212								
		LA	KE SUCCESS,	NY		1104	2	Phone no	800-83			
									Con	<u>aa</u> n	PF	2010

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasu Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2019

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

Employer identification number

EIGHT TORCHES FOUNDATION 82-3337600 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)
Name of organization EIGHT TORCHES FOUNDATION

Employer identification number 82-3337600

Part I	Contributors (see instructions) Use duplicate cop	nes of Part I if additional space is ne	eeded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	ELMORE, D.G. 304 W. KIRKWOOD AVE. SUITE 100 BLOOMINGTON, IN 47404	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	GANT TRAVEL MANAGEMENT 400 WEST 7TH STREET SUITE 233 BLOOMINGTON, IN 47404	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)
Name of organization EIGHT TORCHES FOUNDATION Employer identification number 82-3337600

artii No	ncash Property (see instructions). Use duplicate copies	of Part II if additional space is ne	eaea.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
- - -		\ \\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
- - -		<u></u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
- - -		 \$	
(a) No. from Part I	(b)	(c) FMV (or estimate) (See instructions)	(d) Date-received

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization EIGHT TORCHES FOUNDATION

Employer identification number 82-3337600

<u> </u>	onal space is needed.			
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is h		
· · · · · ·	(e) Transfer of gift			
Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee		
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is h		
Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee		
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is h		
Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee		
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is h		
	(e) Transfer of gift	sfer of gıft		
	(c) Transier of gift			

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PART	1
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	NET	INVESTMENT	INCOME	4,860.	4,860.
REVENUE	AND	EXPENSES	PER BOOKS	4,860.	4,860.
					TOTALS
			DESCRIPTION	INCOME FROM PRI	

4,860.

ATTACHMENT 1

82-3337600	2	CHARITABLE PURPOSES	
	ATTACHMENT 2	ADJUSTED NET INCOME	
		NET INVESTMENT INCOME 679.	
2019 FORM 990-PF		REVENUE AND EXPENSES PER BOOKS 679.	
EIGHT TORCHES FOUNDATION	_ ==	FORM 990PF, PART I - LEGAL FEES	

ATTACHMENT 3

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

3,766. 3,766. NET INVESTMENT INCOME 3,766. 3,766. AND EXPENSES PER BOOKS ŔEVENUE TOTALS INVESTMENT MANAGEMENT SERVICES DESCRIPTION

ATTACHMENT 4

FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES PER BOOKS

DESCRIPTION

990-PF EXTENSION FOR 2018

122.

TOTALS

122.

FOUNDATION
TORCHES
EIGHT

2019 FORM 990-PF

82-3337600

ATTACHMENT 5

FORM 990PF, PART I - OTHER EXPENSES

	NET	INVESTMENT			12,467.	
REVENUE	AND	EXPENSES	PER BOOKS	.860,6	12,638.	25.
			DESCRIPTION	ADMINISTRATIVE FEES	EXPENSES FROM PRI	STATE OR LOCAL FILING FEES

TOTALS

CHARITABLE	PURPOSES	. 860,6	٠ ٢	 9,123.

ATTACHMENT 6		ENDING ENDING BOOK VALUE FMV	41,257. 42,813. 18,229. 18,953. 18,268. 19,892. 49,318. 54,628. 28,023. 29,585. 41,288. 42,369. 45,021. 50,825.	10000
	FORM 990PF, PART II - CORPORATE STOCK	DESCRIPTION	ISHARES BARCLAYS US AGGREGATE ISHARES CURRENCY HEDGED MSCI E ISHARES MSCI ACWI INDEX ISHARES S&P 500 INDEX FD ISHARES TR DJ, SEL DIVIDEND INX PIMCO TOTAL RETURN ETF VANGUARD GROWTH ETF	O F K E C E

EIGHT TORCHES FOUNDATION

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NTTACHMENT

82-3337600

TNVFSTMFNTS	
OTHER	
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FORM 990PF	1101
FORM	

ENDING <u>FMV</u>	75,000.	75,000.
ENDING BOOK VALUE	.000,	75,000.
		TOTALS
DESCRIPTION	THE BOWERY BAKERY LLC	

82-3337600	ATTACHMENT 8		ENDING ENDING FMV	242,222.	242,222.
2019 FORM 990-PF			ā		
EIGHT TORCHES FOUNDATION		FORM 990PF, PART II - OTHER ASSETS	DESCRIPTION	PRI- TALANTON IMPACT FUND LLC	TOTALS

2019 FORM 990-PF EIGHT TORCHES FOUNDATION 82-3337600
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

	Kind of Property		PITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INC Description Description Date acquired					Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of	Excess of FMV over		Gain or (loss)		
xpenses of sale	allowable	basis	as of 12/31/69	as of 12/31/69	adı basıs	++	(loss)	· -	
212 404			RADED SECURI	TIES			6 670		
310,404.		303,725.					6,679.		
OTAL GAIN(LO	SS)						6,679.		
						$\ \cdot\ $			
						$\ \ $			
						11			
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Eight Torches Foundation
Taxable Year Ending December 31, 2019

Part VII-B, Line 5c (990-PF) - Expenditure Responsibility

Pursuant to IRC Regulation 53.4945-5(d)(2), Eight Torches Foundation provides the following information for one program related investment:

(i)	PRI Recipient:	Talanton Impact Fund, LLC 11 Old Forest Road Newtown Square, PA 19073				
(ii)	Date and Amount of PRI	10/7/2019 \$250,000				
(iii)	Purpose of PRI:	To promote the public welfare with a focus on poverty alleviation.				
(iv) & (vi)	Reports of Amounts Expended	Recipient is expected to submit a full and complete financial report of the type ordinarily required by commercial investors under similar circumstances and a statement that it has complied with the terms of the investment in 2020.				
		This investment remained on the Foundation's books as of 12/31/19.				
(v)	Diversions:	To the knowledge of the grantor, no funds have been diverted to any activity other than the activity for which the investment was originally made.				
(vii)	Verification:	None necessary				

ATTACHMENT 9	CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES	0.0	0.0	0.
	COMPENSATION	Ö	.0	0.
ERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIR, PRES, SEC, TREAS 1.00	VP 1.00	GRAND TOTALS
FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	NAME AND ADDRESS	D.G. ELMORE FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	DAVID GANT ELMORE III FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	

2019 FORM 990-PF

EIGHT TORCHES FOUNDATION