Form 990-PF

Department of the Treasury

Return of Private Foundation 2949100903416

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

| | _ | | | O T | 3/20 , 2019 , | | ilution . | 12/31, 20 19 | |
|--------------|---------|---|--|---------------------------------|----------------------|----------------|---|---|--|
| | _ | | Ilendar year 2019 or tax year beginning foundation | | 3720 , 2019 , | and ending | A Employer identif | | |
| | | | ER OAK FOUNDATION | | | | A Employer identification number 83-4113853 | | |
| | _ Ni | | and street (or P O box number if mail is not delivered to | n street address) | T | Room/suite | B Telephone numb | | |
| | | umber | and street (or to box number if that is not delivered to | o street address) | | 1100111/3uite | b reseptione numb | rei (see ilistructions) | |
| | | FOU | NDATION SOURCE 501 SILVERSIDE | חם | | | (800) 83 | 89-1754 | |
| | _ | | own, state or province, country, and ZIP or foreign posta | | | | (800) 83 | | |
| | ٥, | , | own, state or province, country, and 211 or loreign poste | | | | C If exemption applic | ation is | |
| | | WTT. | MINGTON, DE 19809-1377 | | | | pending, check here | | |
| | _ | | eck all that apply - X Initial return | Initial return | of a former pu | ublic charity | ┥_ | .□ | |
| | ٠ | One | Final return | Amended re | | ublic criainty | D 1 Foreign organiza 2 Foreign organiza | | |
| | | | Address change | Name chang | | | 85% test, check | here and attach | |
| | н | Che | eck type of organization X Section 501(| | | | computation . | ▶∟ | |
| | Ϊ | _ | Section 4947(a)(1) nonexempt charitable trust | Other taxable pr | | on | E If private foundation | - L | |
| | Ť | | | unting method X C | | | 1 | o)(1)(A), check here . | |
| | • | | | ther (specify) | | | | s in a 60-month termination 0)(1)(B), check here | |
| | | | | column (d), must be on ca | ash basis) | | | | |
| | | | Analysis of Revenue and Expenses (The | | I | | | (d) Disbursements | |
| | | | total of amounts in columns (b), (c), and (d) | (a) Revenue and expenses per | (b) Net inve | | (c) Adjusted net | for charitable purposes | |
| | | may not necessarily equal the amounts in column (a) (see instructions)) | | books | | e | income | (cash basis only) | |
| | _ | 1 | Contributions, gifts, grants, etc., received (attach schedule) . | 7,139,354. | | | | | |
| | | 2 | Check If the foundation is not required to attach Sch B. | ! | | | | | |
| | i | 3 | Interest on savings and temporary cash investments. | 1,028. | - | 1,028. | | | |
| , 20 | | 4 | Dividends and interest from securities | 43,214. | 4.3 | 3,214. | | | |
| 67.0 | | 5a | Gross rents | | | | • | | |
| Coal | ′ | ь | Net rental income or (loss) | | | | | | |
| | ē | l | Net gain or (loss) from sale of assets not on line 10 | 23,065. | | | | | |
| ~ | evenue | b | Gross sales price for all 32,878. | | | | | | |
| 2021 | ě | 7 | Capital gain net income (from Part IV, line 2). | | 23 | 3,065. | | | |
| 83 | ~ | 8 | Net short-term capital gain 🛦 🦳 | | | | | | |
| | | 9 | Income modifications | | | | | | |
| CANNED MAY 1 | | 10 a | Gross sales less returns and allowances | | | | | | |
| ¥ | | ı | Less Cost of goods sold . | · | | | | | |
| | | C | Gross profit or (loss) (attach schedule) | | | | | | |
| ш | | 11 | Other income (attach schedule) | 7,206,661. | 6- | 7,307. | | | |
| Z | _ | 12 | Total. Add lines 1 through 11 | 7,200,001. | 0. | 1,301. | • RECEI | I/ED | |
| A | Ś | 13 | Compensation of officers, directors, trustees, etc | | | | 7,202 | 7 - 70 | |
| Ş | ıse | 14 | Other employee salaries and wages | | | | | 2020 | |
| ဟ | ber | 15 | Pension plans, employee benefits | | | | S JUL 17 | 12020 | |
| | Ä | 16a | Legal fees (attach schedule) | | | | <u> </u> | <u> </u> | |
| | è | | Accounting fees (attach schedule) | | | | OGDEN | I. UT | |
| | aţi | 47 | Other professional fees (attach schedule) | | | | | | |
| | str | 17 | Interest | | | | | | |
| | Ξ | 10 | Depreciation (attach schedule) and depletion. | | | | | | |
| | 튐 | 20 | Occupancy | | | - | | | |
| | ₹ | 21 | Travel, conferences, and meetings | | | | | | |
| | 2 | 21 22 | Printing and publications | | | | | | |
| | 9 | 23 | Other expenses (attach schedule) ATCH .1 | 11,212. | | | | 11,212. | |
| | 딀 | 23 24 25 | Total operating and administrative expenses | | | | | | |
| | era | | Add lines 13 through 23 | 11,212. | | | | 11,212. | |
| | ð | 25 | Contributions, gifts, grants paid | 2,600. | | | | 2,600 | |
| | | 26 | Total expenses and disbursements Add lines 24 and 25 | 13,812. | - | | · - | 13,812. | |
| | _ | 27 | Subtract line 26 from line 12 | | | | | | |
| | | | Excess of revenue over expenses and disbursements | 7,192,849. | | | | | |
| | | | Net investment income (if negative, enter -0-) | | 67 | 7,307. | | | |
| | | | Adjusted net income (if negative, enter -0-) | | | | | l | |

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

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| E | art II | Balance Sheets Attached schedules and amounts in the | Beginning of year | E | nd of year |
|-----------------|-----------------|--|-------------------------------|---|-----------------------|
| | | description column should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | _ | | |
| | 2 | Savings and temporary cash investments | | 1,130,33 | 36. 1,130,336 |
| | 3 | Accounts receivable ▶ | | | |
| | | Less allowance for doubtful accounts ▶ | | | |
| | 4 | | | | |
| | | Less allowance for doubtful accounts ▶ | | | |
| | 5 | Grants receivable | - | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | " | disqualified persons (attach schedule) (see instructions) | | | |
| | 7 | Other notes and loans receivable (attach schedule) | - | | |
| | l ' | Less allowance for doubtful accounts | - | | |
| s | _ | | - . | | |
| Assets | 8 | Inventories for sale or use | | | |
| Ş | 9 | Prepaid expenses and deferred charges | | | |
| • | 100 | Investments - US and state government obligations (attach schedule). Investments - corporate stock (attach schedule) ATCH 2 | | 5,472,01 | .3. 5,579,265 |
| | | | | 3,472,01 | 3,313,203 |
| | 11 ^C | Investments - corporate bonds (attach schedule) | | | ATCH 3 |
| | l | Investments - land, buildings, and equipment basis Less accumulated depreciation | | 500 50 | |
| | | (attach schedule) | | 590,50 | 390,300 |
| | 12 | Investments - mortgage loans | | | |
| | 13 | Investments - other (attach schedule) | | | |
| | 14 | equipment basis | | | |
| | | Less accumulated depreciation (attach schedule) | | | |
| | 15 | Other assets (describe) | | | |
| | 16 | Total assets (to be completed by all filers - see the | | | |
| _ | | instructions Also, see page 1, item l) | 0. | 7,192,84 | 7,300,101 |
| | 17 | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| es | 19 | Deferred revenue | | | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| ä | 21 | Mortgages and other notes payable (attach schedule) | | | |
| Ë | 22 | Other liabilities (describe ▶) | | | |
| | | ,, | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 0. | | 0. |
| s | 1 | Foundations that follow FASB ASC 958, check here | | | |
| õ | | and complete lines 24, 25, 29, and 30. | | i | |
| a | 24 | Net assets without donor restrictions | | | |
| Balances | 25 | Net assets with donor restrictions · · · · · · · · · · · · · · · · · · · | | | |
| ᅙ | | Foundations that do not follow FASB ASC 958, check here | | | |
| Fund | | and complete lines 26 through 30 | | • | |
| F | 26 | Capital stock, trust principal, or current funds | | | |
| S | 27 | Paid-in or capital surplus, or land, bldg, and equipment fund | | | |
| ě | 28 | Retained earnings, accumulated income, endowment, or other funds | | 7,192,84 | 19. |
| SS | 29 | Total net assets or fund balances (see instructions) | 0. | 7,192,84 | |
| Net Assets | 30 | Total liabilities and net assets/fund balances (see | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| ž | 30 | instructions) | 0. | 7,192,84 | 19 |
| F | | Analysis of Changes in Net Assets or Fund Bala | | 1,713270 | |
| | | <u> </u> | | must agree with | |
| 1 | | al net assets or fund balances at beginning of year - Part | | | 1 |
| _ | | -of-year figure reported on prior year's return) | | | 7,192,849 |
| | | er amount from Part I, line 27a | | | |
| | | er increases not included in line 2 (itemize) | | | 3 7 ,192,849 |
| | | lines 1, 2, and 3 | | | |
| | | reases not included in line 2 (itemize) | | <u> </u> | 7 102 940 |
| 6 | Tota | al net assets or fund balances at end of year (line 4 minus | i line 5) - Part II, column (| b), line 29 | 7,192,849 |

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| (e) Gross sales price (or allowable) plus a | er in Part I, line 7 (6) | (c) Date acquired (mo, day, yr) (h) Gain or (loss) ((e) plus (f) minus (g)) Gains (Col (h) gain minus (k), but not less than -0-) or Losses (from col (h)) |
|--|---|--|
| b c d e (e) Gross sales price (f) Depreciation allowed (or allowable) (p) d a b c d e Complete only for assets showing gain in column (h) and owned by the found (i) FMV as of 12/31/69 (ii) Adjusted basis as of 12/31/69 (iii) Adjusted basis as of 12/31/69 (iv) A | er in Part I, line 7 (6) | (h) Gain or (loss) ((e) plus (f) minus (g)) Gains (Col (h) gain minus (k), but not less than -0-) or Losses (from col (h)) |
| c d e (e) Gross sales price (f) Depreciation allowed (or allowable) a b c d e Complete only for assets showing gain in column (h) and owned by the found (i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 or a b c d e Capital gain net income or (net capital loss) If gain, also en If (loss), enter-3 Net short-term capital gain or (loss) as defined in sections 1222(5) and If gain, also enter in Part I, line 8, column (c) See instructions Part I, line 8. Part V Qualification Under Section 4940(e) for Reduced Tax (For optional use by domestic private foundations subject to the section 4940(d)(2) applies, leave this part blank NOT AVAILAB (Was the foundation liable for the section 4942 tax on the distributable among f "Yes," the foundation doesn't qualify under section 4940(e) Do not comp | er in Part I, line 7 (6) | Gains (Col (h) gain minus (k), but not less than -0-) or Losses (from col (h)) |
| d e (e) Gross sales price (f) Depreciation allowed (or allowable) a b c d e Complete only for assets showing gain in column (h) and owned by the found (i) FMV as of 12/31/69 a b c d e Complete only for assets showing gain in column (h) and owned by the found (i) FMV as of 12/31/69 a b c d e Capital gain net income or (net capital loss) If gain, also enter or loss) If gain, also enter in Part I, line 8, column (c) See instructions Part I, line 8 | er in Part I, line 7 (6) | Gains (Col (h) gain minus (k), but not less than -0-) or Losses (from col (h)) |
| (e) Gross sales price (f) Depreciation allowed (or allowable) (p) (or allowable) (i) (or allowable) (i) (or allowable) (i) (or allowable) (ii) (i) (i) (i) (i) (i) (i) | er in Part I, line 7 (6) | Gains (Col (h) gain minus (k), but not less than -0-) or Losses (from col (h)) |
| (e) Gross sales price (f) Depreciation allowed (or allowable) a b c d e Complete only for assets showing gain in column (h) and owned by the found (i) FMV as of 12/31/69 a b c d e Complete only for assets showing gain in column (h) and owned by the found (ii) FMV as of 12/31/69 a b c d e 2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 8, column (c) See instructions Part I, line 8. Part V Qualification Under Section 4940(e) for Reduced Tax (For optional use by domestic private foundations subject to the section 4940(d)(2) applies, leave this part blank Not AVAILAR (Was the foundation liable for the section 4942 tax on the distributable among "Yes," the foundation doesn't qualify under section 4940(e) Do not comp | er in Part I, line 7 (6) | Gains (Col (h) gain minus (k), but not less than -0-) or Losses (from col (h)) |
| (e) Gross sales price (or allowable) plus a | er in Part I, line 7 (6) | Gains (Col (h) gain minus (k), but not less than -0-) or Losses (from col (h)) |
| b c d e Complete only for assets showing gain in column (h) and owned by the found (i) FMV as of 12/31/69 a b c d e 2 Capital gain net income or (net capital loss) 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and if gain, also enter in Part I, line 8, column (c) See instructions Part I, line 8 For optional use by domestic private foundations subject to the section 4940(e) for Reduced Tax for optional use by domestic private foundations subject to the section 4940 (d)(2) applies, leave this part blank NOT AVAILAR Was the foundation liable for the section 4942 tax on the distributable among fires," the foundation doesn't qualify under section 4940(e) Do not compare the appropriate amount in each column for each year, see the | er in Part I, line 7)- in Part I, line 7 (6) | (k), but not less than -0-) or Losses (from col. (h)) |
| c d e Complete only for assets showing gain in column (h) and owned by the found (i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) as of 12/31/69 (k) as of 12/31/69 (k) or a b (k) as of 12/31/69 (k) or a column (b) and owned by the found (c) FMV as of 12/31/69 (c) as of 12/31/69 (c) or a column (c) Sea instructions (c) Sea instruct | er in Part I, line 7)- in Part I, line 7 (6) | (k), but not less than -0-) or Losses (from col. (h)) |
| complete only for assets showing gain in column (h) and owned by the found (i) FMV as of 12/31/69 a b c d e 2 Capital gain net income or (net capital loss) If gain, also en If (loss), enter If gain, also enter in Part I, line 8, column (c) See instructions Part I, line 8 | er in Part I, line 7)- in Part I, line 7 (6) | (k), but not less than -0-) or Losses (from col. (h)) |
| Complete only for assets showing gain in column (h) and owned by the found (i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 (k) as of 12/31/69 (k) as of 12/31/69 (k) over the foliation of the capital basis as of 12/31/69 (k) over the foliation of the capital basis as of 12/31/69 (k) over the foliation of the capital basis as of 12/31/69 (k) over the foliation of the capital basis as of 12/31/69 (k) over the foliation of the capital basis as of 12/31/69 (k) over the foliation of the capital basis as of 12/31/69 (k) over the foliation of the capital basis as of 12/31/69 (k) over the foliation of the capital basis as of 12/31/69 (k) over the foliation of the capital basis as of 12/31/69 (k) over the foliation of the capital basis as of 12/31/69 (k) over the foliation of the capital basis as of 12/31/69 (k) over the foliation of the capital basis as of 12/31/69 (k) over the foliation of the capital basis as of 12/31/69 (k) over the foliation of the foliation basis as of 12/31/69 (k) over the foliation of | er in Part I, line 7)- in Part I, line 7 (6) | (k), but not less than -0-) or Losses (from col. (h)) |
| Complete only for assets showing gain in column (h) and owned by the found (i) FMV as of 12/31/69 (j) Adjusted basis as of 12/31/69 a b c d e 2 Capital gain net income or (net capital loss) { If gain, also en If (loss), enter a lif gain, also enter in Part I, line 8, column (c) See instructions Part I, line 8 | er in Part I, line 7)- in Part I, line 7 (6) | (k), but not less than -0-) or Losses (from col. (h)) |
| as of 12/31/69 b c d e 2 Capital gain net income or (net capital loss) { If gain, also en If (loss), enter 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and If gain, also enter in Part I, line 8, column (c) See instructions Part I, line 8 | er in Part I, line 7)- in Part I, line 7 (6) | (k), but not less than -0-) or Losses (from col. (h)) |
| a b c d e 2 Capital gain net income or (net capital loss) { If gain, also en If (loss), enter 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and If gain, also enter in Part I, line 8, column (c) See instructions Part I, line 8 | er col (j), if any er in Part I, line 7)- in Part I, line 7 (6) | |
| b c d e 2 Capital gain net income or (net capital loss) { If gain, also en If (loss), enter 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and If gain, also enter in Part I, line 8, column (c) See instructions Part I, line 8 | 0- in Part I, line 7 } 2 (6) | 23,065. |
| c d e 2 Capital gain net income or (net capital loss) { If gain, also en If (loss), enter 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and If gain, also enter in Part I, line 8, column (c) See instructions Part I, line 8 | 0- in Part I, line 7 } 2 (6) | 23,065. |
| d e 2 Capital gain net income or (net capital loss) { If gain, also en If (loss), enter 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and If gain, also enter in Part I, line 8, column (c) See instructions Part I, line 8 | 0- in Part I, line 7 } 2 (6) | 23,065. |
| 2 Capital gain net income or (net capital loss) 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and if gain, also enter in Part I, line 8, column (c). See instructions Part I, line 8. Part V Qualification Under Section 4940(e) for Reduced Tax For optional use by domestic private foundations subject to the section 49 f section 4940(d)(2) applies, leave this part blank NOT AVAILABILABILABILABILABILABILABILABILABILA | 0- in Part I, line 7 } 2 (6) | 23,065. |
| 2 Capital gain net income or (net capital loss) A Net short-term capital gain or (loss) as defined in sections 1222(5) and if gain, also enter in Part I, line 8, column (c). See instructions Part I, line 8 | 0- in Part I, line 7 } 2 (6) | 23,065. |
| If (loss), enter 1 Net short-term capital gain or (loss) as defined in sections 1222(5) and If gain, also enter in Part I, line 8, column (c). See instructions Part I, line 8 | 0- in Part I, line 7 } 2 (6) | 23,065. |
| If gain, also enter in Part I, line 8, column (c) See instructions Part I, line 8 | ` ' | |
| Part I, line 8 | (loss) enter D in 1 | |
| Part V Qualification Under Section 4940(e) for Reduced Tax For optional use by domestic private foundations subject to the section 49 f section 4940(d)(2) applies, leave this part blank NOT AVAILAR Was the foundation liable for the section 4942 tax on the distributable amo f "Yes," the foundation doesn't qualify under section 4940(e) Do not comp Enter the appropriate amount in each column for each year, see the | | 0 |
| For optional use by domestic private foundations subject to the section 49 f section 4940(d)(2) applies, leave this part blank NOT AVAILAR Nas the foundation liable for the section 4942 tax on the distributable amount in the foundation doesn't qualify under section 4940(e). Do not compare the section 4940(e). | | 0. |
| 1 Enter the appropriate amount in each column for each year, see the | unt of any year in the base perio | |
| | | |
| | | ntries (d) |
| (a) Base pendo years Colordo years Adjusted gualifying distributions Net value | (c) f nonchantable-use assets | Distribution ratio |
| Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value | | (col (b) divided by col (c)) |
| 2017 | | |
| 2016 | | |
| 2015 | | - |
| 2014 | | |
| | | |
| 2 Total of line 1, column (d) | 2 | |
| 3 Average distribution ratio for the 5-year base period - divide the total of the following strains of the following strains. | · · · · · · · · · · · · · · · · · · · | |
| the number of years the foundation has been in existence if less than | years | |
| 4 Enter the net value of noncharitable-use assets for 2019 from Part X, | ne 5 4 | |
| 5 Multiply line 4 by line 3 | _ | |
| 6 Enter 1% of net investment income (1% of Part I, line 27b) | | ···· |
| 7 Add lines 5 and 6 | | |
| 8 Enter qualifying distributions from Part XII, line 4 | 6 | <u>-</u> |

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| aa | е | 4 |
|----|---|---|
| | | |

| Pai | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see | instru | ıction | s) |
|-----|--|------------|------------|----------|
| 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) | <u>.</u> , | | , |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | 1,3 | 346. |
| | 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-) | | | |
| 3 | Add lines 1 and 2 | | 1,3 | 346. |
| 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 | | 1,3 | 346. |
| 6 | Credits/Payments | | | |
| а | 2019 estimated tax payments and 2018 overpayment credited to 2019 6a | | | • |
| b | Exempt foreign organizations - tax withheld at source | | | |
| С | Tax paid with application for extension of time to file (Form 8868) 6c | | | |
| d | Backup withholding erroneously withheld | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | | 0. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | 1,3 | 346. |
| 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 ▶ Refunded ▶ 11 | | | |
| | t VII-A Statements Regarding Activities | | 1 | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | Yes | No |
| | participate or intervene in any political campaign? | 1a | ļ <u>.</u> | <u> </u> |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the | | | , |
| | instructions for the definition | 1ь | | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | j |
| | published or distributed by the foundation in connection with the activities | | | |
| | Did the foundation file Form 1120-POL for this year? | 1c | | X |
| 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 \$ | | | x |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | <u> </u> |
| _ | If "Yes," attach a detailed description of the activities | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles | 3 | | Х |
| 4- | of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | 4a | | X |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4b | | |
| 5 | If "Yes," has it filed a tax return on Form 990-T for this year? | 5 | Х | |
| 3 | 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? | 6 | Х | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV | 7 | Х | |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. | | | |
| | DE, | | , | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | | 1 |
| | (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 4942(j)(3) or | | | |
| | 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes," | | | |
| | complete Part XIV | 9 | | Х |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | |
| | names and addresses . ATCH . 5 | 10 | Х | <u> </u> |
| | | ~~ | A DE | |

83-4113853

| Yes No meaning of section 512(b)(13) if Yes; "attach schodule See instructions. 11 | Pa | rt VII-A Statements Regarding Activities (continued) | | | |
|--|-----|--|----------|-----|------------------|
| 12 March | | | | Yes | No |
| 12 March | 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | | | |
| 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. 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ 21/2. 14 The books are in care of ₱ FOUNDATION SOURCE 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 check here | | | 11 | | Х |
| 12 X | 12 | | <u> </u> | | |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 X Website address X X Website address X X X X X X X X X | 12 | · | 12 | | x |
| Website address ► N/A 14 The books are in care of ► FOUNDATION SOURCE | | | | Y | - : - |
| Telephone no | 13 | N7 / 70 | 13 | | |
| Located at ▶501 STLVERSIDE ROAD, SUITE 123 WILMINGTON, DE ZIP4 ▶ 19809-1377 15 Section 4947(a)(1) nonexempt charitable trusts filing Prom 990-PF in lieu of Form 1041 - check here | | | 176 | 1 | |
| 15 Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 check here | 14 | The books are in care of Tourney Books are in care of Telephone no | -1/5 | 1 | |
| and enter the amount of lax-exempl interest received or accrized during the year | | | | | |
| ver a bank, securities, or other financial account in a foreign country?. See the instructions for exceptions and filing requirements for FinCEN Form 114 if "Yes," enter the name of the toreign country ▶ Part VIED Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | 15 | | | ▶ | · |
| over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114 if "Yes," enter the name of the foreign country ▶ Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1 During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No (4) Pay compensation to, or pay or remibrate the expenses of, a disqualified person? Yes No (5) Transfer any income or assats to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes No (6) Agree to pay money or property to a government official? (Exception, Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, it reminating within 90 days.) Yes No bif any answer is "Yes" to 1a(1)-(6), did any of the acts fall to qualify under the exceptions described in Regulations section 33 4941(d)-3 or in a current notice regarding dissater assistance, check here c Did the foundation engage in a prior year in any of the acts fall to qualify under the exceptions described in Regulations relying on a current notice regarding dissater assistance, took here c Did the foundation defined in section 4942(j)(3) or 4942(j)(3 | | and enter the amount of tax-exempt interest received or accrued during the year | | | |
| See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country ▶ Part VIIB Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly) 1(1) Engage in the sale or exchange, or leasing of property with a disqualified person? | 16 | At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority | | Yes | |
| the foreign country ▶ Part VIHB Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | | over a bank, securities, or other financial account in a foreign country? | 16 | | Х |
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| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here Solid the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | | | } | | |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | | all years listed, answer "No" and attach statement - see instructions) | 2b | | <u> </u> |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | ì | | |
| at any time during the year? | | - | | | |
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| the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019) | | | | | |
| foundation had excess business holdings in 2019) | | | | | |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a X b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | | · · · · · · · · · · · · · · · · · · · | 3b | . | 1 |
| b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | 42 | | | | X |
| | | | <u> </u> | | \Box |
| | | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019? | 4b | | Х |

| ı a | t VII-B | Statements Regarding Activities | for Which Form | 4720 May Be Req | uired (continued) |) | | |
|----------|-----------------------------|--|---|-----------------------------------|--|--------------|----------|-------|
| 5a | During th | ne year, did the foundation pay or incur any am- | ount to | | | | Yes | No |
| • | (1) Carry | y on propaganda, or otherwise attempt to influ | ence legislation (section | on 4945(e))? | . Yes X | 10 | | ì |
| | (2) Influe | ence the outcome of any specific public ele | ection (see section | 4955), or to carry or | I, | | 1 | 1 |
| | dırec | tly or indirectly, any voter registration drive? | | | Yes X | No l | | Į |
| | | ide a grant to an individual for travel, study, or o | | | | No | | j |
| | | ide a grant to an organization other than a | • • | | | " | l i | , |
| | | on 4945(d)(4)(A)? See instructions | | • | | No | 1 1 | ļ |
| | | de for any purpose other than religious, cl | | | | • | | 1 |
| | | oses, or for the prevention of cruelty to children | | • | | | | ì |
| L | | | | | | No | | į |
| b | | nswer is "Yes" to 5a(1)-(5), did any of the | | • | - | | - | ; |
| | | ons section 53 4945 or in a current notice regar | - | | | · 5b | 1 | |
| | | tions relying on a current notice regarding disa | | | | ▶□ | | |
| С | | nswer is "Yes" to question 5a(4), does the | | | | | | |
| | | it maintained expenditure responsibility for the | | | . L Yes N | 10 | | , |
| | | attach the statement required by Regulations s | ` , | | | | | Į. |
| 6a | | foundation, during the year, receive any fur | • | | | | | |
| | on a pers | onal benefit contract? | | | . Yes X | lo l | - | |
| b | Did the fo | oundation, during the year, pay premiums, dire | ectly or indirectly, on a | personal benefit contra | ct [?] | . 6b | ļ | X |
| | If "Yes" to | o 6b, file Form 8870 | | | | | | • |
| 7a | | ne during the tax year, was the foundation a p | • | - | | · I | | ; |
| b | If "Yes," | did the foundation receive any proceeds or ha | ve any net income atti | ibutable to the transacti | on ⁹ | . 7b | | |
| 8 | | indation subject to the section 4960 tax on pay | | | | | | |
| | | ation or excess parachute payment(s) during the | | | | | | |
| Par | t VIII | Information About Officers, Directo and Contractors | rs, Trustees, Fou | indation Managers | s, Highly Paid Em | iployees, | | |
| 1 | List all o | fficers, directors, trustees, and foundat | ion managers and | their compensation. | See instructions. | | | |
| | | (a) Name and address | (b) Title, and average hours per week | (c) Compensation (if not paid, | (d) Contributions to employee benefit plans | (e) Expen | | |
| | | (-) | devoted to position | enter -0-) | and deferred compensation | other a | lowance | s |
| | | | | | | | | |
| | | | | _ | | | | |
| ATC | 1 6 | | | 0. | 0 | • | | 0. |
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| ATC | 1 6 | | _ | 0. | 0 | | | 0. |
| ATC | 1 6 | | | 0. | 0 | | | 0. |
| | | | | | | | | |
| 2 | Compens | sation of five highest-paid employees | (other than thos | | | | one, e | |
| 2 | | sation of five highest-paid employees | <u> </u> | | e 1 - see instruct | | one, e | |
| 2 | Compens | sation of five highest-paid employees | (b) Title, and average hours per week | e included on line | d) Contributions to employee benefit | tions). If n | șe accou | enter |
| 2 | Compens | | (b) Title, and average | | 1 - see instruct | tions). If n | | enter |
| 2 (a) | Compens "NONE." | | (b) Title, and average hours per week | e included on line | e 1 - see instruct (d) Contributions to employee benefit plans and deferred | tions). If n | șe accou | enter |
| 2 (a) | Compens | | (b) Title, and average hours per week | e included on line | e 1 - see instruct (d) Contributions to employee benefit plans and deferred | tions). If n | șe accou | enter |
| 2 (a) | Compens "NONE." | | (b) Title, and average hours per week | e included on line | e 1 - see instruct (d) Contributions to employee benefit plans and deferred | tions). If n | șe accou | enter |
| 2 (a) | Compens "NONE." | | (b) Title, and average hours per week | e included on line | e 1 - see instruct (d) Contributions to employee benefit plans and deferred | tions). If n | șe accou | enter |
| 2 (a) | Compens "NONE." | | (b) Title, and average hours per week | e included on line | e 1 - see instruct (d) Contributions to employee benefit plans and deferred | tions). If n | șe accou | enter |
| 2 (a) | Compens "NONE." | | (b) Title, and average hours per week | e included on line | e 1 - see instruct (d) Contributions to employee benefit plans and deferred | tions). If n | șe accou | enter |
| 2 (a) | Compens "NONE." | | (b) Title, and average hours per week | e included on line | e 1 - see instruct (d) Contributions to employee benefit plans and deferred | tions). If n | șe accou | enter |
| 2 (a) | Compens "NONE." | | (b) Title, and average hours per week | e included on line | e 1 - see instruct (d) Contributions to employee benefit plans and deferred | tions). If n | șe accou | enter |
| 2 (a) | Compens "NONE." | | (b) Title, and average hours per week | e included on line | e 1 - see instruct (d) Contributions to employee benefit plans and deferred | tions). If n | șe accou | enter |
| 2 (a) | Compens "NONE." | | (b) Title, and average hours per week | e included on line | e 1 - see instruct (d) Contributions to employee benefit plans and deferred | tions). If n | șe accou | enter |
| 2 (a) | Compens "NONE." Name and a | | (b) Title, and average hours per week devoted to position | e included on line | e 1 - see instruct (d) Contributions to employee benefit plans and deferred | tions). If n | șe accou | enter |

| Form | 990-PF (2019) | Page 7 |
|------|--|------------------|
| Pa | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued) | ees, |
| 3 | Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE. | 11 |
| | (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Compensation |
| NO | NE | |
| | | <u>0.</u> |
| | | |
| _ | | |
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| | | |
| | | |
| | al number of others receiving over \$50,000 for professional services | |
| Рa | rt IX-A Summary of Direct Charitable Activities | |
| | ist the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of rganizations and other beneficianes served, conferences convened, research papers produced, etc. | Expenses |
| 1 | N/A | |
| | | |
| | | |
| 2 | | |
| | | |
| 3 | | |
| J | | |
| | | |
| 4 | | |
| | | |
| | | |
| | rt IX-B Summary of Program-Related Investments (see instructions) | Amount |
| | escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 NONE | |
| • | NONE . | |
| | | |
| 2 | | |
| | | |
| | | |
| | Il other program-related investments See instructions | |
| 3 | NONE | |
| | NOTE TO SECOND S | |
| Tot | al. Add lines 1 through 3 | |

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

| Par | Minimum Investment Return (All domestic foundations must complete this part see instructions.) | Foreign foundat | ions, |
|-----|--|---|-----------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, | etc, | |
| _ | purposes | 1a | 1,842,412. |
| | Average monthly fair market value of securities | — — | 67,156. |
| | Average of monthly cash balances | • | 100,817. |
| | Fair market value of all other assets (see instructions), | | 2,010,385. |
| | | • | |
| e | · · · · · · · · · · · · · · · · · · · | 1 1 | |
| 2 | 1c (attach detailed explanation) | 2 | |
| | · | | 2,010,385. |
| 3 | Subtract line 2 from line 1d | • | |
| 4 | · · · | | 30,156. |
| _ | instructions) | | 1,980,229. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 1. | | 77,853. |
| 6 | Minimum investment return. Enter 5% of line 5 | | |
| Par | Tt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations, check here ▶ and do not complete this part.) | ig foundations | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 77,853. |
| | | 346. | |
| b | | | |
| | | 2c | 1,346. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | • | 76,507. |
| 4 | Recoveries of amounts treated as qualifying distributions | · · · | |
| 5 | Add lines 3 and 4 | | 76,507. |
| 6 | Deduction from distributable amount (see instructions) | | |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part | | |
| • | line 1 | | 76,507. |
| Par | rt XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | | 12.010 |
| | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 | | 13,812. |
| b | | | |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, | f 1 | |
| | purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, li | | 13,812. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income | ome | |
| | Enter 1% of Part I, line 27b See instructions | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 13,812. |
| | Note: The amount on line 6 will be used in Part V column (b) in subsequent years who | en calculating wi | nether the foundation |

| Part XIII Undistributed Income (see instru | uctions) | | | |
|--|----------|---------------------|------|---------|
| | (a) | (b) | (c) | (d) |
| 1 Distributable amount for 2019 from Part XI, | Corpus | Years prior to 2018 | 2018 | 2019 |
| line 7 | | | | 76,507. |
| 2 Undistributed income, if any, as of the end of 2019 | | | | |
| a Enter amount for 2018 only, | | | | <u></u> |
| b Total for prior 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 | | | | |
| f Total of lines 3a through e | | | | |
| 4 Qualifying distributions for 2019 from Part XII, | | - | | |
| line 4 ▶ \$13,812. | | | | |
| 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 | | | | 13,812. |
| e Remaining amount distributed out of corpus | | | | |
| 5 Excess distributions carryover applied to 2019 | | | | |
| (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | |
| 6 Enter the net total of each column as | | | | |
| indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | | | |
| b Prior years' undistributed income Subtract | | | | |
| line 4b from line 2b | | | | |
| c Enter the amount of prior years' undistributed | | | | |
| income for which a notice of deficiency has been issued, or on which the section 4942(a) | | | | |
| tax has been previously assessed | | | | |
| d Subtract line 6c from line 6b Taxable | | | | |
| amount - see instructions | | | | |
| e Undistributed income for 2018 Subtract line | | | | |
| 4a from line 2a Taxable amount - see instructions | | | | |
| f Undistributed income for 2019 Subtract lines | | | | |
| 4d and 5 from line 1. This amount must be | | | | |
| distributed in 2020 | | | | 62,695. |
| 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 | 0. | | | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2015 | | | | |
| b Excess from 2016 | | | 1 | |
| c Excess from 2017 | | | | |
| d Excess from 2018 | | | | |
| e Excess from 2019 | | | | |

| Pa | rt XIV - Private Op | erating Foundations | (see instructions ar | nd Part VII-A, questi | on 9) N | OT APPLICABLE |
|----------|---|---------------------------|---------------------------------------|---------------------------|---------------------------|-----------------------|
| 1 a | If the foundation has | - | | | | |
| | foundation, and the rulin | _ | _ | | | 12) - 1 1042(1)(5) |
| | Check box to indicate v | | is a private operating | | section 4942(j)(| (3) or 4942(j)(5) |
| 2 a | Enter the lesser of the ad- justed net income from Part | Tax year | | Prior 3 years | (1) 2242 | (e) Total |
| | for the minimum investment | (a) 2019 | (b) 2018 | (c) 2017 | (d) 2016 | |
| | return from Part X for each | | | | | |
| | year listed | | | | | |
| b | 85% of line 2a | | | | | |
| С | Qualifying distributions from Part | | | | | |
| | XII, line 4, for each year listed | - | | / | | |
| u | Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| 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 atternative test relied upon | | | | : | |
| а | "Assets" alternative test - enter | | | | | |
| | (1) Value of all assets | | | | | |
| | (2) Value of assets qualifying under section | | | | | |
| | 4942(j)(3)(B)(i) | | | • | | |
| b | "Endowment" alternative test- | 1 | | | } | |
| | 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 secunties loans (section 512(a)(5)), | | | | | |
| | or royalties) | / | | | | |
| | (2) Support from general public and 5 or more | | | | | |
| | exempt organizations as | | | | | |
| | provided in section 4942 (j)(3)(B)(iii) | | | | | |
| | (3) Largest emount of sup- port from an exempt | | | | | |
| | organization, | | | | | |
| Рa | | ntary Information (| Complete this part | only if the found: | ation had \$5,000 or | more in assets at |
| | any time d | uring the year - see | instructions.) | | | |
| 1 | Information Regardin List any managers of | | | e than 2% of the tot: | al contributions receive | ed by the foundation |
| a | before the close of any | | | | | ed by the roundation |
| | ATTACHME | | | | | |
| b | List any managers of | | | | | large portion of the |
| | ownership of a partner | rsnip or other entity) of | which the foundation | nas a 10% or greater | interest | |
| | 4- | | | | | |
| | N/A | | | , , <u>, -</u> | | |
| 2 | Information Regardin | <u> </u> | | | | |
| | Check here ► X if t | | | | | |
| | unsolicited requests for | | | ints, etc., to individua | ils or organizations un | der other conditions, |
| | complete items 2a, b, | · | | _ | | |
| а | The name, address, a | nd telephone number | or email address of th | e person to whom app | olications should be addi | ressed |
| <u>-</u> | The form in which app | lications should be sub | mitted and information | on and materials they | should include | |
| J | o .o.m in willon app | | | and materials tricy | | |
| | | | | | | |
| С | Any submission deadli | nes | · · · · · · · · · · · · · · · · · · · | | | |
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| d | Any restrictions or li | mitations on awards | such as by geogra | aphical areas, charita | able fields, kinds of i | nstitutions, or other |
| | factors | | | | | |

| Part XV Supplementary Information (| continued) | | | |
|---|--|-------------|----------------------------------|-----------|
| 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 | 711100111 |
| a Paid during the year | | | | |
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| | | l | | 0.600 |
| Total | <u> </u> | | 3a | 2,600. |
| b Approved for future payment | | | | |
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| | | <u> </u> | 1 | |
| Total | | <u> </u> | <u> ▶ 3b</u> | |

| Page | 1 | 2 | |
|------|---|---|--|
| 9- | - | _ | |

| | Unrela | ted business income | Excluded by | section 512, 513, or 514 | (e) |
|---|------------------------|---------------------|--|------------------------------|---------------------------------------|
| Dragger convec revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income |
| Program service revenue | | | | | (See instructions) |
| a | | | | | |
| <u> </u> | | | | | · · · · · · · · · · · · · · · · · · · |
| c | | | | | |
| d | | | | | _ |
| e | - - | | | | |
| g Fees and contracts from government agencies | | | | _ | · |
| Membership dues and assessments | | | | | |
| Interest on savings and temporary cash investments - | | | 14 | 1,028. | |
| Dividends and interest from securities | | | 14 | 43,214. | |
| Net rental 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 | 23,065. | |
| Net income or (loss) from special events · · · | | | | | |
| Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue a | | | | | |
| b | | | | | |
| с | | | | | |
| d | | | | | |
| e | | | | | |
| Subtotal Add columns (b), (d), and (e) | 1 | | 1 1 | 67,307. | |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calcart XVI-B Relationship of Activitie | ulations) | complishment of | Exempt Purp | 13 | |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calc | ulations) s to the Ac | complishment of l | Exempt Purpo in column (e) | oses of Part XVI-A contribu | ted importantly to |
| Total. Add line 12, columns (b), (d), and (e) . e worksheet in line 13 instructions to verify calcular t XVI-B Relationship of Activities ne No. Explain below how each activity | ulations) s to the Ac | complishment of l | Exempt Purpo in column (e) | oses of Part XVI-A contribu | ted importantly to |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calc int XVI-B Relationship of Activitie ne No. Explain below how each activit | ulations) s to the Ac | complishment of | Exempt Purpo in column (e) | oses of Part XVI-A contribu | ted importantly to |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calc int XVI-B Relationship of Activitie ne No. Explain below how each activit | ulations) s to the Ac | complishment of | Exempt Purpo in column (e) | oses of Part XVI-A contribu | ted importantly to |
| Total. Add line 12, columns (b), (d), and (e) . e worksheet in line 13 instructions to verify calc rt XVI-B Relationship of Activitie ne No. Explain below how each activit | ulations) s to the Ac | complishment of | Exempt Purpo in column (e) | oses of Part XVI-A contribu | ted importantly to |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calc int XVI-B Relationship of Activitie ne No. Explain below how each activit | ulations) s to the Ac | complishment of | Exempt Purpo in column (e) | oses of Part XVI-A contribu | ted importantly to |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calce rt XVI-B Relationship of Activities Relationship of Activities Explain below how each activities. | ulations) s to the Ac | complishment of | Exempt Purpo in column (e) | oses of Part XVI-A contribu | ted importantly to |
| Total. Add line 12, columns (b), (d), and (e) | ulations) s to the Ac | complishment of | Exempt Purpo in column (e) | oses of Part XVI-A contribu | ted importantly to |
| otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activitie e No. Explain below how each activities | ulations) s to the Ac | complishment of | Exempt Purpo in column (e) | oses of Part XVI-A contribu | ted importantly to |
| rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcert XVI-B Relationship of Activities e No. Explain below how each activities | ulations) s to the Ac | complishment of | Exempt Purpo in column (e) | oses of Part XVI-A contribu | ted importantly to |
| rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcert XVI-B Relationship of Activities e No. Explain below how each activities | ulations) s to the Ac | complishment of | Exempt Purpo in column (e) | oses of Part XVI-A contribu | ted importantly to |
| rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcert XVI-B Relationship of Activities e No. Explain below how each activities | ulations) s to the Ac | complishment of | Exempt Purpo in column (e) | oses of Part XVI-A contribu | ted importantly to |
| rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calce rt XVI-B Relationship of Activitie le No. Explain below how each activit | ulations) s to the Ac | complishment of | Exempt Purpo in column (e) | oses of Part XVI-A contribu | ted importantly to |
| otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcet XVI-B Relationship of Activitie e No. Explain below how each activities | ulations) s to the Ac | complishment of l | Exempt Purpo in column (e) | oses of Part XVI-A contribu | ted importantly to |

| Part | XVII | Information Re Organizations | egarding Trar | nsfers to and | Transaction | ns and | Relationshi | ps With | Nonchar | ritable | Exe | empt |
|----------|-------------------|---|--|---|---|--|----------------------------------|---------------|------------------|---------------|------|-------------|
| 1 | ın sec organız | e organization direct tion 501(c) (other rations? | than section | 501(c)(3) orga | anizations) or | in sec | tion 527, re | | | | Yes | No |
| | | ers from the reporting | ~ | | | | | | | 1a(1) | | х |
| | (2) Oth | ner assets | | | | | | | | 1a(2) | | Х |
| b | Other t | ransactions | | | | | | | | | | |
| (| (1) Sal | es of assets to a no | oncharitable exe | mpt organization | | | | | | 1b(1) | | X |
| | | chases of assets fro | | | | | | | | | | <u>X</u> |
| | | ntal of facilities, equi | | | | | | | | | | X |
| | | mbursement arrang | | | | | | | | | | <u>X</u> |
| | | ans or loan guarante | | | | | | | | | | X |
| | | formance of service | | | | | | | | | - | <u> </u> |
| | | g of facilities, equipm | | | | | | | | | | |
| | | answer to any of the of the goods, other | | | | | | | | | | |
| | | n any transaction o | | | | | | | | | | |
| (a) Lir | | (b) Amount involved | | noncharitable exemp | | | escription of trans | | | | | |
| (-/ | - | N/A | (5) 112 112 | | | N/A | | | | | | |
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| (| describ | foundation directly ped in section 501(c) |) (other than see | | | | | | | Yes | X |] No |
| <u> </u> | If "Yes, | " complete the follo | | 41.7 | | . 1 | | · | | | | |
| | | (a) Name of organizatio | <u>'n</u> | (b) Type | of organization | | | (c) Descripti | on of relations | inip | | |
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| Sign | correc | penalties of penjury, I declar t, and complete Declaration o | are that I have exami | ned this return, includ axpayer) is based on all | ing accompanying so information of which | preparer has | d statements, and sany knowledge | to the best o | | discuss | this | return |
| Here | ' Sign | nature of officer or trustee | () | Date | | Title | • | | See instructions | s X | Yes | No |
| | | I a | | | <u> </u> | | | | | OTIA: | | |
| Paid | | Print/Type preparer's na | | Preparer's signa | | | Date | Che | ~ <u> </u> | PTIN DO124 | 577 | 0 |
| Prep | | JEFFREY D HAS | | | D HASKELL | | 05/15/ | 2020 self | F1000 | P0134 | 311 | <u> </u> |
| Use | | 011 | OUNDATION SO | | | | | Firm's EIN | ▶ 21033 | 7034/ | | |
| U26 | Unity | | AKE SUCCESS | | | 11 | 1042 | Dhone | 800-83 | 39-17 | 54 | |
| | | 1 | 1111 0000000 | , .,. | | | | Phone no | | | | (2010) |

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

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

OMB No 1545-0047

2019

Employer identification number

| AMBER OAK FOUNDATION | | | 83-4113853 |
|---|--|---|---|
| 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 | ı prıvate fou | indation |
| | 527 political organization | | |
| Form 990-PF | X 501(c)(3) exempt private foundation | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private trust trust treated as a private trust trust trust treated as a private trust trus | vate foundat | tion |
| | 501(c)(3) taxable private foundation | | |
| | | | |
| General Rule X For an organization |), (8), or (10) organization can check boxes for both the General Filing Form 990, 990-EZ, or 990-PF that received, during the year property) from any one contributor. Complete Parts I and II. Se | ar, contribu | itions totaling \$5,000 |
| contributor's total co | | e manucho | ns for determining a |
| Special Rules | | | |
| regulations under se 13, 16a, or 16b, and | described in section 501(c)(3) filing Form 990 or 990-EZ that mections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule Ad that received from any one contributor, during the year, total cf the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-1 | (Form 990 ontributions | or 990-EZ), Part II, line s of the greater of (1) |
| contributor, during t | described in section 501(c)(7), (8), or (10) filing Form 990 or 99 he year, total contributions of more than \$1,000 <i>exclusively</i> for real purposes, or for the prevention of cruelty to children or animal | religious, ch | arıtable, scientific, |
| contributor, during t contributions totaled during the year for a General Rule applie | described in section 501(c)(7), (8), or (10) filing Form 990 or 98 the year, contributions exclusively for religious, charitable, etc., pil more than \$1,000. If this box is checked, enter here the total context exclusively religious, charitable, etc., purpose. Don't complete is to this organization because it received nonexclusively religious more during the year | ourposes, but contributions any of the partiable s, charitable | at no such s that were received parts unless the s, etc., contributions |
| 990-EZ, or 990-PF), but it mus | isn't covered by the General Rule and/or the Special Rules does at answer "No" on Part IV, line 2, of its Form 990, or check the to certify that it doesn't meet the filing requirements of Schedule B | box on line l | H of its Form 990-EZ or on its |

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2019

| Name of the organization | | Employer identification number |
|--|---|--|
| AMBER OAK FOUNDATIO | N | 83-4113853 |
| Organization type (check on | ne) | 63-4113633 |
| | -, | |
| 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 | |
| Form 990-PF | X 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treated as a private four | ndation |
| | 501(c)(3) taxable private foundation | |
| | | |
| · · · · · · | covered by the General Rule or a Special Rule. | |
| note: Only a section 501(c)(instructions | (8), or (10) organization can check boxes for both the General Rule and | a Special Rule See |
| | | |
| General Rule | | |
| | n filing Form 990, 990-EZ, or 990-PF that received, during the year, cont or property) from any one contributor. Complete Parts I and II. See instructions | |
| Special Rules | | |
| regulations under s 13, 16a, or 16b, ai | in described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the 3 sections $509(a)(1)$ and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 9 and that received from any one contributor, during the year, total contributor of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line | 90 or 990-EZ), Part II, line ons of the greater of (1) |
| contributor, during | n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ th the year, total contributions of more than \$1,000 <i>exclusively</i> for religious onal purposes, or for the prevention of cruelty to children or animals Com | , charitable, scientific, |
| contributor, during contributions totale during the year for General Rule appli | n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the the year, contributions exclusively for religious, charitable, etc., purposes and more than \$1,000. If this box is checked, enter here the total contribution an exclusively religious, charitable, etc., purpose. Don't complete any of the est of this organization because it received nonexclusively religious, charitation more during the year. | , but no such ons that were received he parts unless the able, etc., contributions |
| | t isn't covered by the General Rule and/or the Special Rules doesn't file S ust answer "No" on Part IV, line 2, of its Form 990, or check the box on li | |

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 AMBER OAK FOUNDATION

Employer identification number 83-4113853

| Part I | Contributors (see instructions). Use duplicate copies | of Part I if additional space is ne | eded |
|------------|--|-------------------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | BLOMMER-O'MALLEY, ANN STORY 206 N. VANBUREN ST. MOSCOW, ID 83843 | \$ | 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 | JESSICA O'MALLEY 1997 MGMT TRUST 690 SOUTH HIGHWAY 89 SUITE 260 JACKSON HOLE, WY 83001 | \$1,594,835. | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 3 | MACKENZIE O'MALLEY 1997 MGMT TRUST 690 SOUTH HIGHWAY 89 SUITE 260 JACKSON HOLE, WY 83001 | \$1,144,019. | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 4 | STEPHEN O'MALLEY 1997 MGMT TRUST 690 SOUTH HIGHWAY 89 SUITE 260 JACKSON HOLE, WY 83001 | \$\$ | 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) |

Employer identification number

83-4113853

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) LAND - 3200 ROCK CREEK RD POTLAT 1 202,500. 11/13/2019 (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) LAND - 2400 ROCK CREEK RD POTLAT 1 388,000. 11/13/2019 (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) \$_

Name of organization AMBER OAK FOUNDATION

Employer identification number 83-4113853

| the con Use | that total more than \$1,000 for | ions completing Part III, ente e year. (Enter this informatio | ntributor. Complete columns (a) through (e) and are the total of exclusively religious, charitable, etc on once. See instructions.) ▶ \$ |
|---------------------------|----------------------------------|--|--|
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| - | | | |
| _ | | - | |
| | | (e) Transfer of gift | |
| <u> </u> | Transferee's name, address, a | nd ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| (a) No from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| _ | | | |
| | | (e) Transfer of gift | |
| | Transferee's name, address, a | nd ZIP + 4 | Relationship of transferor to transferee |
| | | | |
| (a) No | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| _ | | | |
| - | | (e) Transfer of gift | |
| | Transferee's name, address, ar | | Relationship of transferor to transferee |
| | | | - |
| - | - | | |
| (a) No from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| _ | | | |
| | | | |
| | | (e) Transfer of gift | |
| l | | | |
| | Transferee's name, address, ar | 10 ZIP + 4 | Relationship of transferor to transferee |

AMBER OAK FOUNDATION

ATTACHMENT

- OTHER EXPENSES PART I FORM 990PF,

EXPENSES DESCRIPTION
ADMINISTRATIVE FEES
ADMINISTRATIVE SET-UP FEE
DELAWARE INCORPORATION FEES
IRS APPLICATION FEES

4,712. 5,400. 500. PER BOOKS

REVENUE

AND

PURPOSES 4,712. 5,400. 500.

CHARITABLE

11,212.

TOTALS

ATTACHMENT

FORM 990PF, PART II - CORPORATE STOCK

| : | | | | | | | | | | |
|---|-------------|------------------|--------------|--------------|--------------|-------------|--------------------|--------------------|---------------------|-------------------|
| | | CORE EQ P | PORTFOLIO | SMALL CAP | VALUE POR | FIXED INC | E EQUITY | | LL CAP VA | SMALL CO POR |
| | NOI | EMERGING MARKETS | SING MARKETS | SING MARKETS | SING MARKETS | YEAR GLOBAL | INTERNATIONAL CORE | INTERNATIONAL REAL | INTERNATIONAL SMALL | INTERNATIONAL SMA |
| | DESCRIPTION | DFA EMER(| DFA EMERGING | DFA EMERGING | DFA EMERGING | DFA FIVE | DFA INTER | DFA INTER | DFA INTER | DFA INTER |

| ENDING <u>FMV</u> | | 7,04 | 55,89 | 5,94 0,73 | 68,86 | 69,20 | 61,09 | 55,46 | 69,44 | 56,42 | 56,45 | 67,84 | 66,68 | , 48 |
|----------------------|---------------------|------|-------|--------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|------|
| ENDING BOOK VALUE | 129,919. 64,784. | 5,77 | 60,17 | 0,99 3,01 | 60,31 | 61,71 | 61,37 | 55,78 | 65,67 | 56,54 | 58,02 | 61,79 | 43,54 | 66,3 |

SHORT TERM GOVERNMENT PORT TWO-YEAR GLOBAL FIXED INC U.S. LARGE CAP VALUE PORTF U.S. TARGETED VALUE PORTFO VECTOR EQUITY PORTFOLIO

DFA DFA U S

INTERNATIONAL VALUE PORTFO ONE-YEAR FIXED INC PORTFOL

DFA DFA

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REAL ESTATE SECURITIES POR

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2019 FORM 990-PF

AMBER OAK FOUNDATION

| | | | INVEST | MENTS - LAND, | INVESTMENTS - LAND, BUILDINGS, EQUIPMENT | | ATTACHMENT 3 | NT 3 | , |
|--------------------|------------------|-----------|-----------|--------------------|--|-----------|---------------|---------------------------------|-------------------|
| | | | FIXED AS: | FIXED ASSET DETAIL | | ACC | UMULATED DEPR | ACCUMULATED DEPRECIATION DETAIL | |
| ASSET DESCRIPTION | METHOD/ CLASS | BEGINNING | ADDITIONS | DISPOSALS | ENDING BALANCE | BEGINNING | ADDITIONS | DISPOSALS | ENDING BALANCE |
| LAND-2400 ROCK CRE | ı | 388,000 | | | 388,000 | | | | |
| LAND-3200 ROCK CRE | ъ | 202,500 | | | 202,500 | | | | |
| TOTALS | | 290, 500 | | | 290, 500 | | | | |

ATTACHMENT 4

FORM 990PF, PART VII-A - LIQUIDATION, TERMINATION, ETC. STATEMENT

AS EXPLAINED BELOW, THE FOUNDATION HAS NO PLANS FOR DISSOLUTION.

THIS STATEMENT IS SUBMITTED TO REPORT THE DISTRIBUTION OF CERTAIN ASSETS DURING THE YEAR. THE DISTRIBUTIONS RESULTED IN A SUBSTANTIAL CONTRACTION OF ASSETS.

THE FOLLOWING INFORMATION IS SUBMITTED IN ACCORDANCE WITH TREASURY REGULATION SECTION 1.6043-3(A)(1) AND THE FORM 990-PF INSTRUCTIONS:

TYPICALLY, A FINDING OF A SUBSTANTIAL CONTRACTION OF ASSETS IS MADE BY REFERENCE TO THE FAIR MARKET VALUE OF A FOUNDATION'S NET ASSETS ON THE FIRST DAY OF ITS CALENDAR YEAR. HOWEVER, THE TAXABLE YEAR ENDING DECEMBER 31, 2019 WAS THE YEAR IN WHICH THE FOUNDATION RECEIVED ITS INITIAL ENDOWMENT AND THE FINDING OF A SUBSTANTIAL CONTRACTION IN THIS CASE WAS MADE BY REFERENCE TO THE FAIR MARKET VALUE OF THE FOUNDATION'S ASSETS ON THE DATE THAT IT RECEIVED ITS INITIAL ENDOWMENT. ACCORDINGLY, THE DEGREE OF CONTRACTION OF THE FOUNDATION'S NET ASSETS MAY HAVE BEEN EXAGGERATED.

DURING THE TAXABLE YEAR ENDING DECEMBER 31, 2019, THE FOUNDATION MADE DISTRIBUTIONS FROM ASSETS FROM SOURCES OTHER THAN CURRENT INCOME. COLLECTIVELY, THE DISTRIBUTIONS IN EXCESS OF CURRENT INCOME TOTALED \$2,600. THIS AMOUNT REPRESENTS 25% OR MORE OF THE FOUNDATION'S NET ASSETS OF \$10,000 (AS MEASURED BY FAIR MARKET VALUE) ON THE DAY THAT THE FOUNDATION RECEIVED ITS INITIAL ENDOWMENT IN THE FOUNDATION'S TAXABLE YEAR ENDING DECEMBER 31, 2019. ALTHOUGH THE FOUNDATION TECHNICALLY EXPERIENCED A SUBSTANTIAL CONTRACTION, IT WILL CONTINUE IN EXISTENCE AND HAS NO PLANS FOR DISSOLUTION.

THE FOUNDATION MADE DISTRIBUTIONS OF CASH TO THE GRANTEES LISTED IN THE ATTACHMENT TO PART XV, LINE 3A; EACH SUCH GRANT WAS MADE SOLELY FOR THE CHARITABLE PURPOSE SPECIFIED THEREIN.

PART VII-A, LINE 10 - SUBSTANTIAL CONTRIBUTORS FORM 990PF,

NAME AND ADDRESS

BLOMMER-O'MALLEY, ANN STORY 206 N. VANBUREN ST. MOSCOW, ID 83843

JESSICA O'MALLEY 1997 MGMT TRUST 690 SOUTH HIGHWAY 89 SUITE 260 JACKSON HOLE, WY 83001

MACKENZIE O'MALLEY 1997 MGMT TRUST 690 SOUTH HIGHWAY 89 SUITE 260 JACKSON HOLE, WY 83001

STEPHEN O'MALLEY 1997 MGMT TRUST 690 SOUTH HIGHWAY 89 SUITE 260 JACKSON HOLE, WY 83001

O'MALLEY, THOMAS JOHN 206 N. VANBUREN ST. MOSCOW, ID 83843

| FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES | ERS, DIRECTORS, AND TRUSTEES | | ATTACH | ATTACHMENT 6 | |
|--|---|--------------|---|-----------------------------------|---|
| NAME AND ADDRESS | TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION | COMPENSATION | CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS | EXPENSE ACCT AND OTHER ALLOWANCES | • |
| ANN STORY BLOMMER-O'MALLEY FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377 | DIR, CO- PRES, SEC, TREAS 1.00 | °O | .0 | .0 | |
| THOMAS JOHN O'MALLEY FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377 | CO- PRES, DIR 1.00 | Ö | .0 | .0 | |
| | GRAND TOTALS | 0. | 0. | 0 | |

ATTACHMENT 7

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

ANN STORY BLOMMER-O'MALLEY THOMAS JOHN O'MALLEY

| FOUNDATION | |
|------------|--|
| OAK | |
| AMBER | |

2019 FORM 990-PF

83-4113853

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

N/A PC

ST MARYS CATHOLIC CHURCH OF POTLATCH

POTLATCH, ID 83855 PO BOX 3457

RECIPIENT NAME AND ADDRESS

PURPOSE OF GRANT OR CONTRIBUTION

FOR THE PURCHASE OF AN ALTAR RUG

2,600

AMOUNT

ATTACHMENT 8

TOTAL CONTRIBUTIONS PAID

2,600

ATTACHMENT 8

2019 FORM 990-PF AMBER OAK FOUNDATION

83-4113853

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| Kind of Property | | Description | | | | or D | Date | Date sold |
|--------------------------------|-----------------------|----------------|-------------------|-------------------|-----------------------|---------|--------------|-----------|
| Gross sale | Depreciation | Cost or | FMV | Adj basis | Excess of | Ψ | Gain | |
| price less expenses of sale | allowed/ allowable | other basis | as of 12/31/69 | as of 12/31/69 | FMV over adj basis | | or (loss) | |
| | #11-11-0010 | | | | | T | ,:===, | |
| | | PUBLICLY-TR | ADED SECURI | TIES | | | | |
| 32,878. | | 9,813. | | | | | 23,065. | |
| ļ | | | | | | | | |
| | | | | | | | | |
| OTAL GAIN(L |)SS) | | | | | | 23,065. | |
| OIAL GAIN(LC |)55) | | | | • • • • • | | | |
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