Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

	or cale	endar year 2019 or tax year beginning		, and	d ending				
_	Name of	oundation "			A Employer	identification number	54260		
یے	JORGE	NSEN CHARITABLE TRUST				84-62	392 <i>0</i> 8.		
	Number a	and street (or PO box number if mail is not delivered to street address)		Room/suite		84-6329208			
(Great V	lestern Trust Management, TTE 3800 E 15th St			B Telephone	number (see instructio	ns) .		
-	City or to	wn, state or province, country, and ZIP or foreign postal code							
L	_ovelan	d CO	80538	3	970-613-2189				
	Foreign c	ountry name Foreign province/state/county	Foreign	postal code	C If exempt	on application is pendir	ng, check here 🕨 🗌		
٠ _			,				1		
(G Che	ck all that apply 🔲 Initial return 🔲 Initial return	of a former pub	lic charity	D 1 Foreig	n organizations, check l	nere 🕟 🖿		
	·	☐ Final return ☐ Amended re		•	2. Foreign	n organizations meeting	the 85% test,		
			je .			here and attach comput	_		
Ţ	-l Che	ck type of organization X Section 501(c)(3) exempt pr	ivate foundatioi	7 0 U		foundation status was te	erminated under		
	☐ Sect	tion 4947(a)(1) nonexempt charitable trust	able private fou	indation	section 50	7(b)(1)(A), check here	. ► 🗀		
_		market value of all assets at J Accounting method		Accrual			•		
. •		of year (from Part II, col (c), Other (specify)	<u> </u>		F if the foun	dation is in a 60-month tion 507(b)(1)(B), check			
		16) ► \$ 1,196,762 (Part I, column (d), must be	ne on cash hasis	`	dilder sec	tion 507 (b)(T)(b), check	·		
	Part I		1	′ 			(d) Disbursements		
	الكالي	amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue au expenses per		let investment	(c) Adjusted net	for charitable		
		equal the amounts in column (a) (see instructions)	books		income	income	purposes (cash basis only)		
<u></u>	1	Contributions, gifts, grants, etc., received (attach schedule)	, 75.	000	e de la compania del compania del compania de la compania del compania de la compania de la compania del compania de la compania de la compania de la compania del compania	The same of the sa	(cash basis only)		
•		· · · · · · · · · · · · · · · · · · ·	75,		TABLE PARTY AND AND A				
,	2 3	Check ► If the foundation is not required to attach Sch B Interest on savings and temporary cash investments.	AUGEOTIVE MARKET	350	1.350	《在水道》中的一个种"水柱"的"水"的一种。			
	4	Dividends and interest from securities				<u> </u>	2010/25 2010/04/201		
	5a		\ <u> </u>	838	24,838		C. 1900 C. Land Control		
	b								
			TANK TANK TANK TA	981 注文数		APPRECIATION OF THE CASE OF TH	AND ANY OF THE PROPERTY.		
	Hevenue 6a		J.	DIN STATE	State North				
	ر 2 م	Capital gain net income (from Part IV, line 2)		DATES SESTAL	9 427				
4 6	8 8	Net short-term capital gain	Section 1	THE BASE	325 73 3 562	SACRETARING TO SERVICE AND			
` -	- ŏ	Income modifications 1		PORT ET ALS					
<u>5</u> -	10a	* · · · · · · · · · · · · · · · · · · ·				WIND THOUSAND			
ار لا ج	` . E		Emily and the				17 15 A THE SEC. 164		
			100000000000000000000000000000000000000			TO DESTRUCTION OF THE PARTY OF	STREET, CONTRACT		
Z	11	Other income (attach schedule)		10.0000000	14-				
Z	12	Total. Add lines 1 through 11	107.	169	34,615	0	0 5 6 6 6		
Č	ற் 13	Compensation of officers, directors, trustees, etc	 	066	\$10 a. 3,920		9,146		
THURST OF THE PROPERTY OF THE	<u>6</u> 14	Other employee salaries and wages			*				
	등 15	Pension plans, employee benefits					·		
	16a	Legal fees (attach schedule)							
_ L	6 b	Accounting fees (attach schedule)							
j	≧ o	Other professional fees (attach schedule)	1,	215	1,215				
3	17	Interest							
3	18	Taxes (attach schedule) (see instructions)	3,	173	3,173				
- 1	틀 19	Depreciation (attach schedule) and depletion			REC	IVED			
÷	5 20	Occupancy				2020			
_	₹ 21	Travel, conferences, and meetings		164	APR (
3	22	Printing and publications			AFR	10/1			
į	23	Other expenses (attach schedule)							
3	24	Total operating and administrative expenses.		·		EN, UT			
}	<u> </u>	Add lines 13 through 23		454	8,308	0			
٠ }	16a 17 17 18 19 20 21 22 23 24 25 26	Contributions, gifts, grants paid	60,	000		的工程的公司	60,000		
_		Total expenses and disbursements. Add lines 24 and 25	77,	454	8,308	0	69,146		
_	27	Subtract line 26 from line 12				alia Highlan			
	a	•	29,	715		meet a statistist.			
-	t	· · · · · · · · · · · · · · · · · · ·			26,307		TARREST TO BE AND		
		Adjusted net income (if negative enter -0-)		250E150E-10	A TOMER AND		"STATE OF BUILDING STATE		

Pa	art II	Balance Sheets	Attached schedules and amounts in the description column	Beginning of year	End o	of year
	١,٠		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	60		
	2	Savings and tempor	ary cash investments	102,950	75,212	75,212
	3	Accounts receivable	· ·			
		Less allowance for	doubtful accounts			
	4	Pledges receivable	•	Validation A. Dis	A Collins	The Contract of the Contract o
		_	doubtful accounts			
	5	Grants receivable		<u> </u>		
	6	Receivables due fro	m officers, directors, trustees, and other			
			(attach schedule) (see instructions)			
	7		eceivable (attach schedule)			
		Less allowance for dou	, , , , , , , , , , , , , , , , , , , ,		301 183 183 183 183	July Charles of Light Conference of the Conferen
g	8	Inventories for sale				
set	9		nd deferred charges			
Assets	10a		state government obligations (attach schedule)			
•	b		rate stock (attach schedule)	898,432	958,676	1,121,550
	C	-	rate stock (attach schedule)	090,432	930,070	1,121,000
	11		dings, and equipment basis			
	''	•	eciation (attach schedule)			
	12	Investments—mortg	, , , , , , , , , , , , , , , , , , , ,			· · · · · · · · · · · · · · · · · · ·
	13	Investments—nong	•			
	14				N. 2010 (2012) 1. 12.00 (1. 12.00	
	'*	Land, buildings, and equ				
	ءَ ا	•	reciation (attach schedule)	 		·
	15	Other assets (descri				
-	16	•	completed by all filers—see the	4 004 440	4 000 000	4 400 700
_	4 4	instructions Also, se		1,001,442	1,033,888	1,196,762
	17	• •	nd accrued expenses			The first of the later of the l
S	18	Grants payable				A STATE OF THE STA
≝	19	Deferred revenue				PARTON AND THE THE
ق	20,.		rectors, trustees, and other disqualified persons			地震活動。在2018年10日
Liabilities	21		r notes payable (attach schedule)			
	22	Other liabilities (des				U. S.
	23.		d lines 17 through 22)	0	0	
Balances	•		ollow FASB ASC 958, check here			
2	l	-	24, 25, 29, and 30.			
a	24	Net assets without of			·	A STATE OF THE PROPERTY OF THE
	25	Net assets with don			·	
Ē			not follow FASB ASC 958, check here ►X			
Ī		and complete lines 2	_			
6	26	· · · · · · · · · · · · · · · · · · ·	orincipal, or current funds	279,223	279,223	
Net Assets or Fund	27	•	rplus, or land, bldg , and equipment fund			
Se	28	-	cumulated income, endowment, or other funds	722,219	754,665	
As	29		fund balances (see instructions)	1,001,442	1,033,888	
et	30		net assets/fund balances (see			
_		instructions)		1,001,442	1,033,888	
	rt III		anges in Net Assets or Fund Balances			
1			lances at beginning of year—Part II, column (a)), line 29 (must agree	with	
			d on prior year's return)		1	1,001,442
2		amount from Part I, I			2	29,715
3		r increases not includ	ed in line 2 (itemize) Reallocation of inco	ome	3	2,731
4		ines 1, 2, and 3			4	1,033,888
5		eases not included in			5	
_6	Total	net assets or fund ba	lances at end of year (line 4 minus line 5)—Par	t II, column (b), line 2	9 6	1,033,888

Part	V Capital Gains and	Losses for Tax on Investr	nent Income					
		d(s) of property sold (for example, real est se, or common stock, 200 shs MLC Co)	ate,	(b) How acquired P—Purchase D—Donation		ite acquired , day, yr)	(d) Date sold (mo , day, yr)	
1a	See summary			Р				
b								
С	<u></u>							
<u>d</u>								
<u>е</u>	Capital Gains Distributions		i					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale (h) Gain or (loss) ((e) plus (f) minus (g))				
a							2,446	
<u> </u>								
<u> </u>								
<u>d</u> _							5.004	
ее	0			40/04/00			5,981	
	Complete only for assets sno	owing gain in column (h) and owned					(h) gain minus	
	(ı) F M ∨ as of 12/31/69	(¡) Adjusted basis as of 12/31/69		ss of col (ı) (ı), ıf any			t less than -0-) or rom col. (h))	
			0,0,00			<u> </u>	2.446	
<u>a</u> b							2,446	
C							·	
d	-							
<u>u</u>							5,981	
		(If gain	also enter in Par	rt Line 7	<u> </u>		J,301	
2	Capital gain net income or	iner canital ineel 1 -	, enter -0- in Par	,	2		8,427	
3	Net short-term capital gain	or (loss) as defined in sections 1		(1, 11110)			0,421	
_	,	line 8, column (c) See instructio		er -0- in 1	1			
	Part I, line 8	2, 22.2 (2) 222	()	}	3		0	
Part		er Section 4940(e) for Redu	iced Tax on N	let investment	Incon	1e		
Was t		e this part blank ection 4942 tax on the distributal alify under section 4940(e) Do n			e period	17	Yes No	
1	 	int in each column for each year,	· · · · · · · · · · · · · · · · · · ·		no any e	entries		
	(a)		, see the mstruct		ig ally t	51111105	(d)	
Cal	Base period years	(b) Adjusted qualifying distributions	Net value o	(c) of nonchantable-use as	sets		tribution ratio	
Cale	endar year (or tax year beginning in) 2018	6:	3,797	1 030	9,861	(coi (b)	divided by col (c)) 0 061351	
	2017		5,612		4,167		0 055938	
	2016		4,808		5,484		0 061896	
	2015		9,485	· -	1,193		0 058827	
	2014	_	9,173		5,157		0 061841	
		- - 1 · · · · · · · · · · · · · · · · · ·	-1		1.0.			
2	Total of line 1, column (d)					2	0 299853	
3	Average distribution ratio for	or the 5-year base period—divide	the total on line	2 by 5 0, or by			•	
	-	undation has been in existence if		•		3	0 059971	
4	Enter the net value of nonc	haritable-use assets for 2019 fro	m Part X, line 5			4		
5	Multiply line 4 by line 3					5		
6	Enter 1% of net investment	income (1% of Part I, line 27b)				6	0	
7	Add lines 5 and 6					7	0	
8		s from Part XII, line 4 er than line 7, check the box in P	art VI, line 1b, ai	nd complete that	part usi	8 ng a 1% tax	orate See the	
	Part VI instructions							

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see inst	ructi	ons)		
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	660m: 5 7********	H. Y-124	526
4	here ▶ ☐ and enter 1% of Part I, line 27b	539			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col (b)	FI.		Section 18 1	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2			0
3	Add lines 1 and 2	3	ļ		526
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4	<u> </u>		
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	S	554	526
6	Credits/Payments 2019 estimated tax payments and 2018 overpayment credited to 2019 6a 1,400				
a b	2019 estimated tax payments and 2018 overpayment credited to 2019 Exempt foreign organizations—tax withheld at source 6a 1,400 6b				
C	Tax paid with application for extension of time to file (Form 8868) 6c			24.	
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d	7	7,100		1,400
8	Enter any penalty for underpayment of estimated tax. Check here	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			874
11	Enter the amount of line 10 to be Credited to 2020 estimated tax 874 Refunded	11			0
Part \			Lates		T
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did i	t		***	
b	participate or intervene in any political campaign? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the		<u> 1a</u>	+	<u>X</u>
	instructions for the definition		16	.	l x
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materia	ls	4.20	57.23	
	published or distributed by the foundation in connection with the activities				
С	Did.the foundation file Form 1120-POL for this year?		10	;	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		76	33.00	
	(1) On the foundation > \$ (2) On foundation managers > \$		B		
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax important on foundation managers • \$	sed			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities				4 - 6 -
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	\rightarrow	X
4a L	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•	4a		X
ь 5	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?		4b	N/A	X
J	If "Yes," attach the statement required by General Instruction T		3		36231
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 the state of th	nat	5		
	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	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions				
	CO				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gene	:ral			
•	(or designate) of each state as required by General Instruction G? If "No," attach explanation	۵۱	8b		2 284 . 146
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(or 4942(i)(5) for calendar year 2019, or the tay year hearinging in 20193. See the instructions for Both XIV.				We C
	or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV "Yes," complete Part XIV	If	9		,
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the	heir	9	+	X
	names and addresses		10	X	
				90-PF	(2019)

Page 5

Form 99	90-PF (2019) JORGENSEN CHARITABLE TRUST		84	-632920	8	Page 5
Part	VII-A • Statements Regarding Activities (continued)					
	,			K.	Ye	s No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the					
	meaning 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 disqual	ıfied				
	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 applicat	ion?		13	X	
	Website address Great Western Wealth Managementg				· 	
14	The books are in care of ▶ Cindy Kindsfater Telephone no		970-	613-218	9	
	Located at ► 3800 E 15th Street Loveland CO ZIP+4		8053	38		
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	_	15		_	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other a	uthor	ity	_	Ye	
	over a bank, securities, or other financial account in a foreign country?			16	MIRE SPIRE	X
	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			Castle-	- INF	1
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			LAS	Ye	s No
1a	During the year, did the foundation (either directly or indirectly)		_			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X	No	y Mari	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	.,	₩.		T ST	
	disqualified person?	Yes	=	No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	=	No	p bei	
-	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X	No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	V	X		7	
	the benefit or use of a disqualified person)?	Yes		NO I	Ter.	
	(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	Yes	X			
	termination of government service, if terminating within 90 days)		\triangle	NO		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in					
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instruction Örganizations relying on a current notice regarding disaster assistance, check here	IS	▶ [1t	N/	A Commo
_		that	٠ ١		排圖網	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts were not corrected before the first day of the tax year beginning in 2019?	tnat		1.5		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a pr	wata		1 1 c		X Vene
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	valc				
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines					
_	6d and 6e) for tax year(s) beginning before 2019?	Yes	X	No		
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 494	2(a)(2	2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942			14		
	all years listed, answer "No" and attach statement—see instructions)			2t	N/	A
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years	here			i ki	Z Side
	▶ 20, 20, 20, 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		_			
	at any time during the year?	Yes	Ш	No		
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation	n or				
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved	-				
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the	-)			
	of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the	e				T CHE
_	foundation had excess business holdings in 2019)			3t	4	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes	?		42		X 1751 (3 4) (5 5)
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	100				
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20	197		4t	'	X

Part	VII-B	Statements Regarding Activities	for W	hich Form	4720 N	<i>l</i> lay Be Re	quire	d (contin	ued)			
5a		e year, did the foundation pay or incur any	40.45(=)\0					Yes	No			
		on propaganda, or otherwise attempt to in nee the outcome of any specific public ele		•				∐ Yes	X No			
		y or indirectly, any voter registration drive		SEE SECTION 4	900), U	to carry on	,	☐ Yes	X No			
	(3) Provid	le a grant to an individual for travel, study	, or oth	er sımılar pur	poses?			Yes	X No			
		de a grant to an organization other than a n 4945(d)(4)(A)? See instructions	charitable, etc , organization described in					☐ Yes	X No	3		
		de for any purpose other than religious, ch ses, or for the prevention of cruelty to chil			terary, o	or education	nal	☐ Yes	X No			
b	-	wer is "Yes" to 5a(1)–(5), did any of the tins section 53 4945 or in a current notice		•	-		•		d ın	5b	N/A	
С	Organizat	tions relying on a current notice regarding wer is "Yes" to question 5a(4), does the fo	disasto oundatio	er assistance on claim exer	, check	here		_	► []			
6a	If "Yes," attach the statement required by Regulations section 53 4945–5(d) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums											
b	on a personal benefit contract?b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							Yes	X No	6b		
		6b, file Form 8870	directi	y or manectry,	, on a p	croonal ber	iciii wi	ill act.		JD		
7a			oundation a party to a prohibited tax shelter transaction?						X No			
ь 8		- · · · · · · · · · · · · · · · · · · ·		have any net income attributable to the tra						7b	N/A	,
	remuneration or excess parachute payment(s) during the year?											
Part		nformation About Officers, Directourd Contractors	ors, Tr	ustees, Fo	undati	on Manag	gers, I	lighly P	aid Em	ploye	es,	
1	List all of	ficers. directors. trustees. and foundat	ion ma	inagers and '	their co	ompensatio	n. See	instructi	ons.			
1	List all of	fficers, directors, trustees, and foundat (a) Name and address	(b) Title	e, and average rs per week	(c) Co	mpensation not paid,	(d) empl	Contribution byee benefit	s to plans	(e) Expe	ense acc	
			(b) Title	e, and average rs per week ed to position	(c) Co	mpensation	(d) empl	Contribution	s to plans			
Great	Western V	(a) Name and address	(b) Title hou devot	e, and average rs per week ed to position	(c) Co (If i	mpensation not paid,	(d) empl	Contribution byee benefit	s to plans			
Great	Western V	(a) Name and address Vealth Management	(b) Title hou devot	e, and average rs per week led to position	(c) Co (If i	mpensation not paid, iter -0-)	(d) empl	Contribution byee benefit	s to plans			
Great	Western V	(a) Name and address Vealth Management	(b) Title hou devot	e, and average rs per week led to position	(c) Co (If i	mpensation not paid, iter -0-)	(d) empl	Contribution byee benefit	s to plans			
Great	Western V	(a) Name and address Vealth Management	(b) Title hou devot	e, and average rs per week led to position	(c) Co (If i	mpensation not paid, iter -0-)	(d) empl	Contribution byee benefit	s to plans			
Great	Western V	(a) Name and address Vealth Management	(b) Title hou devot	e, and average rs per week led to position	(c) Co (If i	mpensation not paid, iter -0-)	(d) empl	Contribution byee benefit	s to plans			
Great	Western V E 15th Stre	(a) Name and address Vealth Management	(b) Title hou devot Truste	e, and average rs per week ed to position e	(c) Co (if i er	mpensation not paid, iter -0-)	(d) empl and del	Contribution byee benefit erred compe	s to plans ensation	other	allowan	
Great 3800 E	Western V E 15th Stre	(a) Name and address Vealth Management et Loveland, CO 80538	(b) Tittle hou devot Truste	e, and average rs per week ed to position e	(c) Co (lf or er	mpensation not paid, iter -0-)	(d) empl and del	Contribution byee benefit erred compe	s to plans ensation s). If nor utions to benefit deferred	ne, ent	eer	count,
Great 3800 E	Western V E 15th Stre	(a) Name and address Wealth Management set Loveland, CO 80538 Sation of five highest-paid employees ((b) Tittle hou devot Truste	e, and average rs per week ted to position e 2 00 han those in (b) Title, and a hours per v	(c) Co (lf or er	mpensation not paid, iter -0-) 13,066	(d) empl and del	contribution byee benefit erred compe struction: (d) Contrib employee plans and	s to plans ensation s). If nor utions to benefit deferred	ne, ent	erense acc	count,
Great 3800 E	Western V E 15th Stre	(a) Name and address Wealth Management set Loveland, CO 80538 Sation of five highest-paid employees ((b) Tittle hou devot Truste	e, and average rs per week ted to position e 2 00 han those in (b) Title, and a hours per v	(c) Co (lf or er	mpensation not paid, iter -0-) 13,066	(d) empl and del	contribution byee benefit erred compe struction: (d) Contrib employee plans and	s to plans ensation s). If nor utions to benefit deferred	ne, ent	erense acc	count,
Great 3800 E	Western V E 15th Stre	(a) Name and address Wealth Management set Loveland, CO 80538 Sation of five highest-paid employees ((b) Tittle hou devot Truste	e, and average rs per week ted to position e 2 00 han those in (b) Title, and a hours per v	(c) Co (lf or er	mpensation not paid, iter -0-) 13,066	(d) empl and del	contribution byee benefit erred compe struction: (d) Contrib employee plans and	s to plans ensation s). If nor utions to benefit deferred	ne, ent	erense acc	count,
Great 3800 E	Western V E 15th Stre	(a) Name and address Wealth Management set Loveland, CO 80538 Sation of five highest-paid employees ((b) Tittle hou devot Truste	e, and average rs per week ted to position e 2 00 han those in (b) Title, and a hours per v	(c) Co (lf or er	mpensation not paid, iter -0-) 13,066	(d) empl and del	contribution byee benefit erred compe struction: (d) Contrib employee plans and	s to plans ensation s). If nor utions to benefit deferred	ne, ent	erense acc	count,
Great 3800 E	Western V E 15th Stre	(a) Name and address Wealth Management set Loveland, CO 80538 Sation of five highest-paid employees ((b) Tittle hou devot Truste	e, and average rs per week ted to position e 2 00 han those in (b) Title, and a hours per v	(c) Co (lf or er	mpensation not paid, iter -0-) 13,066	(d) empl and del	contribution byee benefit erred compe struction: (d) Contrib employee plans and	s to plans ensation s). If nor utions to benefit deferred	ne, ent	erense acc	count,
Great 3800 E	Western V E 15th Stre	(a) Name and address Wealth Management set Loveland, CO 80538 Sation of five highest-paid employees ((b) Tittle hou devot Truste	e, and average rs per week ted to position e 2 00 han those in (b) Title, and a hours per v	(c) Co (lf or er	mpensation not paid, iter -0-) 13,066	(d) empl and del	contribution byee benefit erred compe struction: (d) Contrib employee plans and	s to plans ensation s). If nor utions to benefit deferred	ne, ent	erense acc	count,

Pa	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	ployees,
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONI	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	E	
		*
Tota	I number of others receiving over \$50,000 for professional services	
Pa	rt IX-A Summary of Direct Charitable Activities	
	the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of inizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	NONE	
2		
3		
4		
	rt IX-B Summary of Program-Related Investments (see Instructions) scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
	NONE	Amount
·	NONL	
2		
All	other program-related investments. See instructions	
3		
Tota	Add lines 1 through 3	

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. Part X see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., а Average monthly fair market value of securities 1a 1,114,821 Average of monthly cash balances 1b 89.111 1c Fair market value of all other assets (see instructions) 1,203,932 d Total (add lines 1a, b, and c) 1d Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e 2 Acquisition indebtedness applicable to line 1 assets 2 3 3 1,203,932 Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see instructions) 18,059 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 1,185,873 Minimum investment return. Enter 5% of line 5 6 59,294 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here

| and do not complete this part) 1 Minimum investment return from Part X, line 6 1 59,294 Tax on investment income for 2019 from Part VI, line 5 2a 526 Income tax for 2019 (This does not include the tax from Part VI) 2b b 2c C 526 58,768 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 5 58,768 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 7 58,768 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 1a 69,146 1b Program-related investments—total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 purposes Amounts set aside for specific charitable projects that satisfy the 3 Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 69,146 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 5 Enter 1% of Part I, line 27b See instructions Adjusted qualifying distributions. Subtract line 5 from line 4 6 69.146 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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

Part	XIII Undistributed Income	(see instructions	5)			-
-	• ,		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from	n Part XI,				
_	line 7					58,768
2	Undistributed income, if any, as of the	end of 2019				
a	Enter amount for 2018 only	20 20				
b	Total for prior years 20,					
3	Excess distributions carryover, if a From 2014) *				
a	From 2015	10,345 8,037				
C	From 2016	10,884				
d	From 2017	7,444				
e	From 2018	13,113				
f	Total of lines 3a through e		49,823			
4	Qualifying distributions for 2019 fro	om Part XII,				
	line 4 ▶ \$ 69,146					
а	Applied to 2018, but not more than	line 2a				
b	Applied to undistributed income of	prior years	被争起的背景 系统			
	(Election required—see instruction					
_, C`	Treated as distributions out of corp	ous (Election				
•	required—see instructions)		ahnega upingin Munggilaran Stoaszacolungan			
; d	Applied to 2019 distributable amou					58,768
_E e	Remaining amount distributed out	,	10,378		が、	
5	Excess distributions carryover app (If an amount appears in column (o		•			
	amount must be shown in column					
6	Enter the net total of each colum					
	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e S	Subtract line 5	60,201			
b	Prior years' undistributed income	Subtract				
•	line 4b from line 2b			0		
,C	Enter the amount of prior years' un					
· 1	income for which a notice of deficit been issued, or on which the secti	-		• •		
1	tax has been previously assessed	011 4342 (a)				
d	Subtract line 6c from line 6b Taxal	ble				
	amount—see instructions					
. е	Undistributed income for 2018 Su					
	4a from line 2a Taxable amount—	see			_	
f	Instructions Undistributed income for 2019 Su	htraat linaa				
•	4d and 5 from line 1 This amount					
• `	distributed in 2020	muot be				0
7	Amounts treated as distributions o	ut of corpus				
	to satisfy requirements imposed by	y section				
	170(b)(1)(F) or 4942(g)(3)-(Electio	n may be				
	required—see instructions).	<u>.</u>				
8	Excess distributions carryover from					
•	applied on line 5 or line 7 (see inst		10,345			
9 .	Excess distributions carryover t Subtract lines 7 and 8 from line 6a		40.056			
10	Analysis of line 9		49,856			
.o -a	Excess from 2015	8,037				
b	Excess from 2016	10,884				
С	Excess from 2017	7,444				
d	Excess from 2018	13,113				
e	Excess from 2019	10 378				

Form 990-PF (2019) JORGENSEN CHARITABLE	and the second s		84-6329	208 Page 1 1
Part XV Supplementary Information (cont 3 Grants and Contributions Paid During		ed for Fu	ture Payment	_
 	If recipient is an individual,		ayment	<u> </u>
Recipient Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
Hearts and Horses		PC	Gereral purposes	5,000
163 N Co Road 29				
Loveland, CO 80537				
Pulliam Community Building Foundation		PC	General purposes	4,000
545 N Cleveland Ave				
Loveland, CO 80537				
Alternatives to Violence		PC	General purposes	12,000
313 E 4th Street				
Loveland, CO 80537		PC	Conoral numanos	4 00
Namaqua Center 404 E 7th Street		PC	General purposes	4,00
Loveland, CO 80537				
Boys and Girls Club		PC	General purposes	4,000
2366 E 1st Street		'	Constant part posses	,,,,,,
Loveland, CO 80537				
Habitat for Humanity		PC	General purposes	4,000
PO Box 56			' '	·
Loveland, CO 80539				
Project Self Sufficiency		PC	General purposes	15,000
375 W 37th Street				
Loveland, CO 80538			1_	
House of Neighborly Service		PC	General purposes	12,000
1510 E 11th Street				
Loveland, CO 80537				
				İ
Total			▶ 3.	a 60,000
b Approved for future payment				
				1
				1
		į		
		İ		
			!	1
				1
				1
			,	1
				<u> </u>
Total			<u> </u>	b (

_	TAVIFA . Analysis of income-producing Ac	1'		I		·
Ente	r gross amounts unless otherwise indicated	Unrelated bu	Isiness income	Excluded by sect	ion 512, 513, or 514	(e)
_	Danasan assure ass	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1	Program service revenue			 		
	<u>a</u>			 		
	b			<u> </u>		
	<u> </u>					
	d					
	e					
_	g Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments			4.4	00.400	
4	Dividends and interest from securities			14	26,188	
5	Net rental income or (loss) from real estate	<u> </u>				
	a Debt-financed property					
	b Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income			40	0.407	
8	Gain or (loss) from sales of assets other than inventory			18	8,427	
9	Net income or (loss) from special events	ļ				
. 10	Gross profit or (loss) from sales of inventory	-				
11	Other revenue a			-		
	b	-				
	7**	}		 		
	<u> </u>	-		 		
40	E				24.645	0
	Subtotal Add columns (b), (d), and (e)		0		34,615	0 34,615
13	Total. Add line 12, columns (b), (d), and (e)				13	34,013
1000	workshoot in line 12 instructions to verify calculations	1				
	worksheet in line 13 instructions to verify calculations		ant of Evamo	t Burnosso		
Pai	t XVI-B Relationship of Activities to the A	ccomplishm	•			
Pai		ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)
Pai	Relationship of Activities to the A	ccomplishm	column (e) of Part	XVI-A contributed	I importantly to the ses) (See instruction	ons)

Part XVII	Information Regarding Transfers to and Transactions and Relationships With Noncharitable
	Exempt Organizations

Part	XVII	Information Exempt Org	Regarding Tr	ansfer	s to and	Transa	ctions	and Re	elationshi	ps Wi	th No	nchari	table		
1	ın sec	e organization d tion 501(c) (othe	irectly or indirectler than section 50		•		_	•	_		escrib	ed		Yes	No
	_	izations?													
а		•	orting foundation	to a no	ncharitable	exemp	organ	ization of							
	(1) Ca												1a(1)		X
		her assets											1a(2)		Х
b		transactions				_							41-44		
			a noncharitable e				_						1b(1)	<u> </u>	X
			ets from a noncha equipment, or ot			anizatioi	1						1b(2) 1b(3)		X
		embursement ar		1161 855	eis								1b(3)		x
		ans or loan gua	-										1b(5)		x
		-	rvices or membe	rshin or	fundraising	ı solicita	tions						1b(6)		x
С			quipment, mailing	-	_			vees					1c	 	X
d		_	he above is "Yes,"			•	•	•	should always	s show	the fa	ır market			
	value o	of the goods, othe	er assets, or service or sharing arrange	es given	by the repo	rting fou	ndation	If the four	ndation recei	ved les	s than	fair mark	et ed.		
(a) Line	no (I	b) Amount involved	(c) Name of	noncharita	able exempt or	ganization		(d) De:	scription of tran	sfers, tra	nsactio	ns, and sha	nng arrar	igeme	nts
				· · · · · · · · · · · · · · · · · · ·											
							· · · · · · · · · · · · · · · · · · ·								
	-					· · · · ·									
															
	,									·		 			
							-								
				•						•					
	'														
2a			 ctly or indirectly af 01(c) (other than						exempt orga	anızatı	ons		Yes		
b			following schedul									_		-	
		(a) Name of organ			(b) Ty	pe of orga	nızatıon			(c) D	escription	on of relation	nship		
													•		
		, -													
			<u> </u>												
			lare that I have examined to on of preparer (other than to						-	knowledg	e and bel	ief, it is true,			
Sign Here		Ature of officer or trus	4 LINGS	de la la la la la la la la la la la la la	Date	4/20	Title	<u>lealt</u>	n Odu	180Y	1	May the IR with the pre See instruc	eparer sho		ow?
Paid Prepa	ror	Print/Type preparer's	L Heth	F	Preparens signa	ature	L	Heth	Date 3/8.5/	40		k K f	PTIN		
Prepa Use O		Firm's name	Attorney at							Firm's	EIN Þ				
<u> </u>	ıııy	Firm's address 🕨	2005W12+b	<u>5+2 #</u>	=186, Lo	ovelan	<u>d,CC</u>) 80 <u>5</u>	37	Phon	e no 9	70-66	3-75	138	
				-	-							-	001	1_DE	10046

Form **990-PF** (2019)

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

JORGENSEN CHARITABLE TRUST 84-63292			84-6329208		
Organization type (check	one)				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization			
	4947(a)(1) n	4947(a)(1) nonexempt charitable trust not treated as a private foundation			
	527 political	organization			
Form 990-PF	501(c)(3) ex	empt private foundation			
	4947(a)(1) n	onexempt charitable trust treated as a private foundat	cion		
	X 501(c)(3) tax	kable private foundation			
		ral Rule or a Special Rule. ration can check boxes for both the General Rule and	a Special Rule See		
General Rule					
	or property) from any or	Z, or 990-PF that received, during the year, contribution ne contributor. Complete Parts I and II. See instruction			
Special Rules					
regulations under 13, 16a, or 16b, ar	sections 509(a)(1) and 1 and that received from an	01(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or y one contributor, during the year, total contributions or m 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1	or 990-EZ), Part II, line of the greater of (1)		
contributor, during	the year, total contributi	01(c)(7), (8), or (10) filing Form 990 or 990-EZ that recons of more than \$1,000 exclusively for religious, charge prevention of cruelty to children or animals. Complete	ritable, scientific,		
contributor, during contributions totale during the year for General Rule app	the year, contributions of ed more than \$1,000 If to an exclusively religious	01(c)(7), (8), or (10) filing Form 990 or 990-EZ that recexclusively for religious, charitable, etc., purposes, but this box is checked, enter here the total contributions to, charitable, etc., purpose. Don't complete any of the pubecause it received nonexclusively religious, charitable.	t no such that were received parts unless the		
Caution: An organization t	hat isn't covered by the	General Rule and/or the Special Rules doesn't file Sci	hedule 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)

Name of organization

JORGENSEN CHARITABLE TRUST

Employer identification number 84-6329208

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	Norman K Jorgensen and Anna Marie Jorgensen 914 Logan Court Loveland CO 80538 Foreign State or Province Foreign Country	\$ 25,000	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
<u>. 2</u>	Hans Jorgensen and Kathy Jorgensen 2420 Logan Drive Loveland CO 80538 Foreign State or Province Foreign Country	\$ 25,000	Person X Payroll		
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution		
3	Earl W Sethre and Lisbeth B Sethre 1450 North Van Buren Ave Loveland CO 80538 Foreign State or Province Foreign Country	\$ 25,000	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) ; Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	Foreign State or Province Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	Foreign State or Province Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	Foreign State or Province Foreign Country	\$	Person Payroll Occupate Part II for noncash contributions)		

Name of organization
JORGENSEN CHARITABLE TRUST

Employer identification number 84-6329208

Part II	Noncash Property (see instructions). Use duplicate of	opies of Part II if additional spa	ce is needed
(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
		\$	
(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
		\$	

Name of org	aniżation EN CHARITABLE TRUST		Employer identification number 84-6329208				
Part III	Exclusively religious, charitable, etc., co (10) that total more than \$1,000 for the y the following line entry. For organizations of contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	ear from any one contributor. O ompleting Part III, enter the total (Enter this information once Se	escribed in section 501(c)(7), (8), or complete columns (a) through (e) and of exclusively religious, charitable, etc.				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Paili							
	(e) Transfer of gift						
	Transferee's name, address, and 2	CIP + 4 Rela	Relationship of transferor to transferee				
	For Prov Country						
(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, and ZIP + 4 Relationship of transferor to transferee						
(a) No.	For Prov Country						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
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•	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
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(a) No. from	For Prov Country (b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	(b) Fullpose of gift		(u) Description of now gift is field				
	(e) Transfer of gift						
	Transferee's name, address, and 2	ZIP + 4 Rela	ationship of transferor to transferee				
	For Prov Country						