SCANNED JAN 1 0 2022

990-PF |

Return of Private Foundation

^	or Section 4947(a)(1) Trust Treated	d as Private Foundation 🚶
Department of the Treasury	▶ Do not enter social security numbers on the	nis form as it may be made publi
Internal Revenue Service	► Go to www.irs gov/Form990PF for instruct	tions and the latest information.
	07.7	21

For	calendar year 2019 or tax year beginning	3000 01113301 1 101 III.	07/31 , 2019 , an			12/31 , 20 19
Name	of foundation		-		A Employer identif	ication number
DR	UG PREVENTION AND REHABILITATI	ON FOUNDATION			84-666012	6
Numb	er and street (or P O box number if mail is not delivered t	o street address)	Ro	om/suite	B Telephone numb	per (see instructions)
	UNDATION SOURCE 501 SILVERSIDE				(800) 83	39-1754
City o	r town, state or province, country, and ZIP or foreign posta	al code			C If exemption applic pending, check here	
WI	LMINGTON, DE 19809-1377					
G C	neck all that apply X Initial return	Initial retur	n of a former publ	ic charity	D 1 Foreign organiza	itions, check here
	Final return	Amended	return	r	2 Foreign organiza	ations meeting the
	Address change	Name char	nge	١,	85% test, check to computation	here and attach
H C	neck type of organization X Section 501(c)(3) exempt private	foundation	M	E If private foundation	n etatus was terminated
	Section 4947(a)(1) nonexempt charitable trust		private foundation	<u>U</u> .	l '	p)(1)(A), check here .
I Fa	air market value of all assets at JAcco	unting method X	Cash Accrua	1	F If the foundation is	in a 60-month termination
er		ther (specify)	· <u>·</u>		under section 507(b	o)(1)(B), check here .
16	5) \triangleright \$ 1,430,943. (Part I,	column (d), must be on	cash basis)			
Par	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	(a) Revenue and expenses per books	(b) Net investmincome	ent	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
_	column (a) (see instructions))	1,545,000	- 			(Cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule) .	1,343,000	' · 			
2	attach Sch B	4,20	7. 4	207.		
3	Interest on savings and temporary cash investments.	5,93		937.		· · · · · · · · · · · · · · · · · · ·
4	Dividends and interest from securities	3,33		-		
5	() ()		-		RF	CEIVED
- 1	b Net rental income or (loss)	19,417	7 .	-	1	00/1/1/
Revenue	a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 1,564,417.				Ö AH	
8 7	assets on line 6aCapital gain net income (from Part IV, line 2) .		1,068,	217.	<u> ⊕ AU(</u>	1 0 3 2020 Y
ᅑᆝ ,	Net short-term capital gain					100
9	Income modifications				OG	DEN LIT
10	a Gross sales less returns and allowances					, <u></u>
	b Less Cost of goods sold .		<u> </u>			
	c Gross profit or (loss) (attach schedule)					
11	Other income (attach schedule)	1,574,561	1,078,	361		
12	Total. Add lines 1 through 11).	-		
္အ (၁)	Compensation of officers, directors, trustees, etc		<u> </u>			
14 12 14	Other employee salaries and wages Pension plans, employee benefits					-
9 15						
Х 16 Ш	b Accounting fees (attach schedule)		-			
e	c Other professional fees (attach schedule).[1]	761	-	761.	-	
Administrative Exp	Interest				- · · -	
18	Taxes (attach schedule) (see instructions)					_
= 19	Depreciation (attach schedule) and depletion.					
5 20	Occupancy					
4 21	Travel, conferences, and meetings					
E 22	Printing and publications					
[23	Other expenses (attach schedule) ATCH .2 .	6,500	-			6,500.
23 24 25	Total operating and administrative expenses					
e.	Add lines 13 through 23	7,261		761.		6,500.
	Contributions, gifts, grants paid	125,000		7.6.1		125,000.
26	Total expenses and disbursements Add lines 24 and 25	132,261		761.		131,500.
27	Subtract line 26 from line 12	1 440 000	l l	`` *		
- 1	a Excess of revenue over expenses and disbursements	1,442,300		500		
	b Net investment income (if negative, enter -0-)		1,077,	500.	<u> </u>	
<u></u>	c Adjusted net income (if negative, enter -0-)					Fr 990-PE (2010)

P	art I	Balance Sheets	Attached schedules and amounts in the	Beginning of year	Er	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-beari	ing			
	2		cash investments		754,32	0. 754,320
	3	Accounts receivable ▶		and the grant of	mag e gere	* , , ,
		Less allowance for doub	btful accounts ▶			
	4			ing the same of th	ي ساه در پهراه	A 44 A 4
			btful accounts ▶			
	5					
	6	Receivables due from o	officers, directors, trustees, and other			
		disqualified persons (att	ach schedule) (see instructions)			
	7	Other notes and loans re	enervable (attach schedule) 🕨 🔠	we are about the graphing	1 Table 1 180 193 1 803	
		Less allowance for doub	btful accounts >			
ssets	8		e 	· · · · · · · · · · · · · · · · · · ·		
SSE	9	Prepaid expenses and de	eferred charges	-		
Ä	10a	Investments - U.S. and state	e government obligations (attach schedule)			
	b	Investments - corporate	stock (attach schedule) ATCH 3		687,980	0. 676,623
i	С		bonds (attach schedule)			
	11	Investments - land, buildings and equipment basis				
		Less accumulated deprecial (attach schedule)	tion >			ļ
	12	•	loans			
	13	Investments - other (atta	ch schedule)	· -		
		Land, buildings, and equipment basis	>	12.100		
		Less accumulated deprecial	tion			1
	15	Other assets (describe		· 		
			completed by all filers - see the			
\Box		instructions Also, see pa	age 1, item I)	0.	1,442,300	1,430,943
	17	Accounts payable and a	ccrued expenses			
	18	Grants payable				
es						
Liabilities			rs, trustees, and other disqualified persons			
ap	21	Mortgages and other not	tes payable (attach schedule)			
	22	Other liabilities (describe	▶)			
\downarrow	23	Total liabilities (add lines	s 17 through 22)	0.	(0.
တ္ထ		Foundations that follow	FASB ASC 958, check here			
Balances		and complete lines 24,	25, 29, and 30.			
흶	24	Net assets without donor	r restrictions		-	
			strictions · · · · · · · · · · · · · · · ·	_	_	
밀		Foundations that do not fo	llow FASB ASC 958, check here ► X			
Fund		and complete lines 26 thro	ugh 30			
Ӹ	26	Capital stock, trust princi	ipal, or current funds			
ş	27	Paid-in or capital surplus, or l	land, bldg , and equipment fund			
SS	28	•	lated income, endowment, or other funds		1,442,300	
Net Assets	29	Total net assets or fund	balances (see instructions)	0.	1,442,300	
٥	30		net assets/fund balances (see			
_				0.	1,442,300	<u> </u>
			ges in Net Assets or Fund Bala			 _
1			alances at beginning of year - Part I			_
_			d on prior year's return)			0
			line 27a			1,442,300.
3	Othe	r increases not include	ed in line 2 (itemize) ▶		3	
			,		4	1,442,300.
		eases not included in	· · · · · · · · · · · · · · · · · · ·		5	1
6	Tota	net assets or fund ba	alances at end of year (line 4 minus	line 5) - Part II, column (t	o), line 29 <u>.</u> 6	1,442,300.

P		s and Losses for Tax on Investment the kind(s) of property sold (for		(b) How	(c) Date acquired	(d) Date sold
	2-story b	prick warehouse, or common stock, 200	-	P - Purchase D - Donation	(mo , day, yr)	(mo , day, yr)
1	a SEE PART IV SCHE	DULE				
	<u> </u>			 		
	<u>c </u>			-		
	d e			+		
		(f) Depreciation allowed	(g) Cost or other basis	 	(h) Gain or (lo	 ss)
	(e) Gross sales price	(or allowable)	plus expense of sale		((e) plus (f) minu	
	a					
	b			<u> </u>		
				-		
	d e		-			
	•	howing gain in column (h) and owned	by the foundation on 12/31/69	0	Gains (Col. (h) ga	ain minus
	(ı) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any		(k), but not less the Losses (from col	han -0-) or
	a					
	b					· —
			<u> </u>			
	d .					
	9	(If o	ain, also enter in Part I, line 7	 		
2	Capital gain net income		loss), enter -0- in Part I, line 7	2	1,	068,217.
3	Net short-term capital g	ain or (loss) as defined in sections	· · ·			
	•		structions If (loss), enter -0- in $\}$			_
_			duced Tax on Net Investment I	3		0.
Wa		the section 4942 tax on the distrib	r AVAILABLE FOR INITIAL butable amount of any year in the b			Yes No
1		n't qualify under section 4940(e) [ear, see the instructions before mak	ing any en	trios	
÷	(a)	(b)	(c)	ling arry cri	(d)	
Ca	Base period years lendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
	2018					
	2017					
	2016 2015			-	 	
	2013		1			
_				 		· · · · · · · · · · · · · · · · · · ·
2	Total of line 1, column (d)		2		
3			de the total on line 2 by 5 0, or by			
	the number of years the	foundation has been in existence	ıf less than 5 years	3	_	
4	Enter the net value of no	oncharitable-use assets for 2019 f	from Part X, line 5	4		
5	Multiply line 4 by line 3.			5		<u></u>
6	Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
8			ın Part VI, line 1b, and complete		using a 1% tax	rate See the

Pai	tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	<u>instrı</u>	uction	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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		21,	552.
	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			1
	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		21,	552.
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-		21,	552.
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).			
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 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		21,5	552.
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			
Par	t VII-A Statements Regarding Activities			
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	-	Х
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
_	instructions for the definition	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
c	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
•	(1) On the foundation \$\\$ (2) On foundation managers \$\\$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
٠	on foundation managers \$			
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			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
3	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		x
4-		4a		Х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4b		<u> </u>
	If "Yes," has it filed a tax return on Form 990-T for this year?	5		Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-		
e	If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			1
	By language in the governing instrument, or By state languages, that offsetively empede the governing instrument so that he mandatory directions that			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remove in the coverning instrument?	6	Х	1
	conflict with the state law remain in the governing instrument?	7	- <u>x</u>	\vdash
	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			\vdash
	Enter the states to which the foundation reports or with which it is registered. See instructions. VA,			
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	X	<u> </u>
	ls 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		X
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses ATCH 4	10	X	l

84-6660126

Pa	t VII-A Statements Regarding Activities (continued)			
	o tatomonio reggianing rotatino (commonly)		Yes	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	-	 		
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	12		X
40	person had advisory privileges? If "Yes," attach statement See instructions	13	Х	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13		L
	Website address ► N/A The books are in care of ► FOUNDATION SOURCE Telephone no ► 800-839-	175	4	
14	Located at \triangleright 501 SILVERSIDE ROAD, SUITE 123 WILMINGTON, DE ZIP+4 \triangleright 19809-13	177		
45				1 1
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			ـــا
40	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
10	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		1.03	X
	over a bank, securities, or other financial account in a foreign country?	16	İ	
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
Dat	the foreign country ▶ t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>	_	
га		[Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	ļ	163	140
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			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	(c) carries geode, convicte, or resimilate to (or descript them nom) a disquarries person 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?Yes			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	· · · ·			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, in terminating within services (i.e., i.e.,			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	46		
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	4 -		Х
_	were not corrected before the first day of the tax year beginning in 2019?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	i		
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?			
_	If "Yes," list the years \(\)			
D	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	2b		
	all years listed, answer "No" and attach statement - see instructions) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	20		
·				
20	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ja	·			
.	at any time during the year?			
b				
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the	34		
4-	foundation had excess business holdings in 2019)	3b 4a		<u>x</u>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	+ a		
D	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		Х
	character perpeter that had not been removed from jeopardy before the first day of the tax year beginning in 2015.	70		

Pa	rt VII-B	Statements Regarding Activities	for Which Form	4720 May Be Red	quired (con	tinued)			
5a	During th	e year, did the foundation pay or incur any an	nount to					Yes	No
	(1) Carry	on propaganda, or otherwise attempt to influ	uence legislation (section	on 4945(e))?	. Tyes	X No			
	(2) Influe	ence the outcome of any specific public e	lection (see section	4955), or to carry o	n,				:
	direc	tly or indirectly, any voter registration drive?.			Yes	X No		ł	
		de a grant to an individual for travel, study, or				X No			1 '
		de a grant to an organization other than	• •		_				
		on 4945(d)(4)(A)? See instructions				X No			
		de for any purpose other than religious, of							, ,
		oses, or for the prevention of cruelty to children				X No			,
ь		nswer is "Yes" to 5a(1)-(5), did any of the							Ι.
_		ns section 53 4945 or in a current notice rega					5b		-
		tions relying on a current notice regarding disa				_			
С		iswer is "Yes" to question 5a(4), does the							
·		it maintained expenditure responsibility for the		•		□ No		1	;
		attach the statement required by Regulations:	•				İ		
6a		foundation, during the year, receive any fu	` '	eathy to now promus					•
va			•			X No			
ь		onal benefit contract?					6ь	-	х
b		o 6b, file Form 8870	ectly of indirectly, off a	personal benefit contri	act		- 00		
7a		ne during the tax year, was the foundation a j	narty to a prohibited to	v shalter transaction?	Yes	X No		İ	
b		did the foundation receive any proceeds or ha	•	=			76		
8		ndation subject to the section 4960 tax on pa	•				7b		
0		tion or excess parachute payment(s) during the			. Yes	X No			
Dat	t VIII	Information About Officers, Directo					ovees		
		and Contractors		•		•			
1	List all of	ficers, directors, trustees, and founda	(b) Title, and average	(c) Compensation	(d) Contribut				
		(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee bene and deferred con	efit plans	(e) Expens other all	owance	unt, es
				•					
ATC	1 5			0.	1	0.			0.
			`						
2	Compens	ation of five highest-paid employees	(other than thos	e included on lin	e 1 - see i	nstructio	ns). If n	one,	enter
	"NONE."								
(a)	Name and a	ddress of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contribut employee b		(e) Expens	e accou	ınt,
(-/			devoted to position	(c) companion	plans and de compensa	eterred Ition	other all	owance	S
	NONE					1			
		* ***							
									
Total	number o	f other employees paid over \$50,000.							

Form 990-PF (2019)

3

NONE

All other program-related investments. See instructions

Pa	t X	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign found	ations,
1		market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purp			154 000
		age monthly fair market value of securities	1a	154,008.
b	Aver	age of monthly cash balances	1b	771,913.
C		market value of all other assets (see instructions),	1c	140,455.
d		I (add lines 1a, b, and c)	1d	1,066,376.
е		action claimed for blockage or other factors reported on lines 1a and		
	1c (a	attach detailed explanation)		
2		uisition indebtedness applicable to line 1 assets	2	
3	Subt	ract line 2 from line 1d	3	1,066,376.
4		deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
		uctions)	4	15,996.
5		value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,050,380.
6		mum investment return. Enter 5% of line 5	6	22,159.
Par	t XI	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part)	ndations	
_	N 4		1	22,159.
1	IVIININ	num investment return from Part X, line 6	-	22,139.
2 a		or involution in come to 2010 from t art VI, into 0		
		me tax for 2019 (This does not include the tax from Part VI) 2b		01 550
		lines 2a and 2b	2c	21,552.
3		ibutable amount before adjustments Subtract line 2c from line 1	3	607.
4		overies of amounts treated as qualifying distributions	4	605
5		lines 3 and 4	5	607.
6		uction from distributable amount (see instructions)	6	
7		ibutable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	<u>1 </u>	7	607.
Par	t XII	Qualifying Distributions (see instructions)		
1	Amoi	unts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expe	nses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	131,500.
		ram-related investments - total from Part IX-B	1b	
2		unts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		- · · · · · · · · · · ·
		oses	2	
3		unts set aside for specific charitable projects that satisfy the		
а		bility test (prior IRS approval required)	3a	
		distribution test (attach the required schedule)	3b	
4		fying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	131,500.
5		dations that qualify under section 4940(e) for the reduced rate of tax on net investment income	-	101,000.
-		r 1% of Part I, line 27b See instructions.	_	0.
6		sted qualifying distributions. Subtract line 5 from line 4	6	131,500.
•	•	: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		<u> </u>
	14016	qualifies for the section 4940(e) reduction of tax in those years	iculating V	vnemer me roundatior

Form **990-PF** (2019)

Part	XIII Undistributed Income (see inst	ructions)			
4 6	Distributable amount for 2010 from Day VI	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
	Distributable amount for 2019 from Part XI,		1 0 0 10 10 10 10 10 10 10 10 10 10 10 1	2010	607.
	ne 7				007.
	Indistributed income, if any, as of the end of 2019 Enter amount for 2018 only				,
	otal for prior years 20_17_,20_1620_15			-	
	Excess distributions carryover, if any, to 2019		 		·-
	from 2014				
	From 2015				
					'
	rom 2016				
	rom 2018			•	
	otal of lines 3a through e	***************************************	,		
	Qualifying distributions for 2019 from Part XII,				
ln	ne 4 ▶ \$131,500.				
аА	pplied to 2018, but not more than line 2a				
	pplied to undistributed income of prior years Election required - see instructions)				
	reated as distributions out of corpus (Election equired - see instructions)		. ,		
d A	pplied to 2019 distributable amount				607.
e R	demaining amount distributed out of corpus	130,893.			
(It	xcess distributions carryover applied to 2019 f an amount appears in column (d), the same mount must be shown in column (a))				
6 E	inter the net total of each column as				
	orpus Add lines 3f, 4c, and 4e Subtract line 5	130,893.			
	rior years' undistributed income Subtract				
	ne 4b from line 2b				
c Er in be	nter the amount of prior years' undistributed come for which a notice of deficiency has een issued, or on which the section 4942(a) ix has been previously assessed				
d Si	ubtract line 6c from line 6b Taxable				
	mount - see instructions				
48	ndistributed income for 2018 Subtract line a from line 2a Taxable amount - see structions				
40	ndistributed income for 2019 Subtract lines d and 5 from line 1. This amount must be stributed in 2020				
to 17	mounts treated as distributions out of corpus satisfy requirements imposed by section 70(b)(1)(F) or 4942(g)(3) (Election may be quired - see instructions)			;	
	cess distributions carryover from 2014 not				
ар	oplied on line 5 or line 7 (see instructions)				
	xcess distributions carryover to 2020.	130,893.			
	ubtract lines 7 and 8 from line 6a				
	nalysis of line 9 ccess from 2015				
	ccess from 2015		,		
	ccess from 2017				• •
	acess from 2018				
	cess from 2019 130,893.				

		JENETON AND DEL		INDAMION 0.4	
Form 990-PF (2019)			ABILITATION FOL		-6660126 Page 10
Part XIV Private Ope 1 a lf the foundation has a foundation, and the ruling	eceived a ruling or o	letermination letter th		rating	NOT APPLICABLE
b Check box to indicate v					1)(8) or 4942(j)(5)
2a Enter the lesser of the ad-	Tax year	is a private operating	Prior 3 years	11 00011011	11,007 01 4042(1)(0)
rusted net income from Part	·	(1) 0040	-	(1) 2010	(e) Total
I or the minimum investment	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
retum from Part X for each					
year listed			<u> </u>		ļ
b 85% of line 2a					
C Qualifying distributions from Part XII, line 4, for each year listed .					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c		_			
Complete 3a, b, or c for the alternative test relied upon "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- enter 2/3 of minimum invest- ment return shown in Part X. line 6 for each year listed					
C "Support" alternative test - enter	7				
(1) Total support other than gross investment income (interest, dividends, rents, payments on secunties loans (section 512(a)(5)), or royalities)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942					
(j(3)(B)(iii)					
(4) Gross investment income.					
Part XV Supplement any time du	tary Information (C ring the year - see	Complete this part instructions.)	only if the founda	ation had \$5,000 o	r more in assets at
1 Information Regarding			_		
a List any managers of t before the close of any					ved by the foundation
JULIE F SCH	AUER				
b List any managers of to ownership of a partners					/ large portion of the
N/A					
2 Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsl	nip, etc., Programs:		

Check here \blacktriangleright \boxed{X} if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

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

Form 990-PF (2019)				Page 1 1
Part XV Supplementary Information (c	ontinued)			
3 Grants and Contributions Paid During Recipient Name and address (home or business)	ng the Year or App	roved for	Future Payment	
Recipient	show any relationship to	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Commodien	
a Paid during the year				
ATCH 6				
1				
•				
Total			▶ 3a	125,000.
b Approved for future payment		<u>, , , , , , , , , , , , , , , , , , , </u>	•	
j				
1				
		-		
Total			▶ 3b	

Part .	XVI-A Analysis of Income-Prod			1		7-1
Enter g	ross amounts unless otherwise indicated	(a)	ated business income (b)	(c)	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Pro	gram service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
а						
b .						
c .						
d .				_		
e						
f.				 		
g i	Fees and contracts from government agencies				-	
2 Mer	mbership dues and assessments	<u> </u>	<u></u>	14	4,207.	
3 Inter	rest on savings and temporary cash investments -			14	5,937.	<u>.</u>
	dends and interest from securities			14	3,337.	
	rental income or (loss) from real estate	i		+		-
	Debt-financed property			 		
	Not debt-financed property			 		
	rental income or (loss) from personal property			 		
	er investment income			18	19,417.	
	or (loss) from sales of assets other than inventory					
	income or (loss) from special events					· -
	ss profit or (loss) from sales of inventory er revenue a					<u> </u>
				· · · · ·		_
_				<u> </u>		
d .						
е -						
-	total Add columns (b), (d), and (e)				29,561.	
	al Add line 12, columns (b), (d), and (e)				13	29,561.
	orksheet in line 13 instructions to verify calci					·
Line N ▼	be. Explain below how each activity accomplishment of the foundation					
						 -
				·	_	
					_	
						<u> </u>
_						<u> </u>
			<u>.</u>			<u>. </u>
					 	
	1					

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

1	ın sec	e organization direct ction 501(c) (other zations?									Yes	No
а	Transf	ers from the reportin	g foundation to a	noncharitable e	xempt organ	nzation of:						
	(1) Cas	sh								1a(1)		X
	(2) Oth	ner assets								1a(2)		Х
ь	Other	transactions:										
		les of assets to a no	ncharitable exemi	ot organization.						1b(1)	ŀ	Х
		rchases of assets fro										X
		ntal of facilities, equi										X
		ımbursement arrange										X
		ans or loan guarantee										X
		rformance of service										X
_		g of facilities, equipm										<u>x</u>
		answer to any of th									air m	arket
u		of the goods, other										
		n any transaction or										
(-) 1			r -				ption of transf					
(a) L	ine no	(b) Amount involved	(c) Name of nor	charitable exempt or	ganization	N/A	iption of transi	ers, transactio	JIIS, AIIU SIIA	iliy arra	-	113
		N/A				N/A		-				
				 								
												
					<u> </u>							
												
					-							
	describ	foundation directly oped in section 501(c)	(other than secti								s X] No
		(a) Name of organization	n	(b) Type of	forganization		(c) Descriptio	n of relations	ship		
Sigi	correc	r penalties of perjury, I declar	f preparer (other than taxp	this return, including payer) is based on all info	accompanying so	chedules and st preparer has any	atements, and to knowledge	[·	May the IRS	6 discus	this	retum
ler	e J	nature of officer or trustee	eurs	Date	<u>- 4000</u> 1	Title			with the pro		Yes	no
		Print/Type preparer's na	me	Preparer's signatu	re		Date	Chec	k lif ¹	PTIN		
Paid	3	JEFFREY D HASI	KELL	JEFFREY D	HASKELL		06/16/2	2020 self-e	employed	P013	4577	0
re	parer	Firm's name FO	UNDATION SOU	JRCE			•	Firm's EIN	▶ 5103	9834	7	
Jse	Only	T III TO TIGHTS	E HOLLOW LN,							-		
		1	KE SUCCESS,	NY		110	42	Phone no	800-83	39-17	754	
									Fo	m 990	-PF	(2019)

Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

DRUG PREVENTION AND REHABILITATION FOUNDATION

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

84-6660126 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Employer identification number 84-6660126

Part I	Contributors (see instructions). Use duplicate cop	oles of Part I if additional space is no	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SCHAUER, JULIE F. 9356 SIBELIUS DRIVE VIENNA, VA 22182	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(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 84-6660126

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed.

Part II	Noncash Property (see instructions) Ose duplicate copies		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	LA SALLE BANCORP, INC. (IL) 750 SH.		
		\$\$.	09/13/2019
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
11_	LA SALLE BANCORP, INC. (IL) 14250 SH.		
		\$1,467,750.	09/13/2019
(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 organization DRUG PREVENTION AND REHABILITATION FOUNDATION

Employer identification number 84-6660126

		ions completing Par e year. (Enter this in	t III, enter the tota formation once.	. Complete columns (a) through (e) and all of exclusively religious, charitable, etc. See instructions.) ► \$
(a) No from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, a	nd ZIP + 4	Relat	onship of transferor to transferee
(a) No from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transf		onship 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) Transf	er of gift	
	Transferee's name, address, a	nd ZIP + 4	Relati	onship 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) Transf	er of gift	
	Transferee's name, address, ar			onship of transferor to transferee

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or

OTHER PROFESSIONAL FEES ı PART I FORM 990PF,

DESCRIPTION

EXPENSES PER BOOKS REVENUE AND

NET INVESTMENT INCOME

761.

INVESTMENT MANAGEMENT SERVICES

TOTALS

761.

761.

761.

84-6660126

- OTHER EXPENSES PART I FORM 990PF,

DESCRIPTION ADMINISTRATIVE SET-UP FEE

REVENUE AND EXPENSES PER BOOKS

6,500.

TOTALS

6,500. CHARITABLE PURPOSES

6,500.

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION	ENDING BOOK VALUE	ENDING <u>FMV</u>
DYNAMIC ASSET ALLOCATION CLASS SEI CORE FIXED INCOME FUND SEI EMERGING MKTS DEBT FUND SEI EMERGING MKTS EQUITY FUND SEI HIGH YIELD BOND FUND SEI INST MGD TR MULTI-STRA A SEI INSTL MGD LARGE CAP A SEI INSTL MGD SMALL CAP A SEI INSTL MGD SMALL CAP A SEI INTERNATIONAL EQUITY FUND SEI MULTI ASSET INCOME FD CL A SEI MULTI-ASSET ACCUMULATION F	33,860. 142,013. 33,729. 20,497. 33,761. 27,212. 70,742. 54,425. 20,003. 68,121. 33,811.	34, 437. 140, 916. 34, 533. 21, 371. 34, 136. 26, 971. 68, 939. 54, 304. 20, 560. 69, 157. 34, 101.
TOTALS	687,980.	676,623.

2019 FORM 990-PF DRUG PREVENTION AND REHABILITATION FOUNDATION 84-6660126
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Gross sale price less allowed/ allowable Cost or other as of as of expenses of sale allowable Depreciation allowable allowable Depreciation other as of as of Excess of FMV over adj basis (loss) PUBLICLY-TRADED SECURITIES 19,417.	Kınd of I	Property			ription		P 5 D	Date acquired	Date sold
PUBLICLY-TRADED SECURITIES 19,417. LA SALLE BANCORP, INC. (IL) 496,200. D 09/13/2019 1,048,800.	Gross sale	Depreciation	Cost or		Adj basis	Excess of	P	Gain	
19,417. LA SALLE BANCORP, INC. (IL) 19,417. D 09/13/2019 09/26/2019 1,048,800.	expenses of sale	allowable	basis	12/31/69	12/31/69	adj basis	H	(loss)	
LA SALLE BANCORP, INC. (IL) 1,545,000. D 09/13/2019 1,048,800.			PUBLICLY-TR	ADED SECURIT	CIES		$\ \ $		
1,545,000. 496,200. 1,048,800.	19,417.							19,417.	
				NCORP, INC.	(IL)		D		09/26/2019
TOTAL GAIN(LOSS)	1,545,000.		496,200.					1,048,800.	
TOTAL GAIN(LOSS)									
	TOTAL GAIN(L	OSS)	,					1,068,217.	
		·							
				•					
	!								
							$\ \ $		

PART VII-A, LINE 10 - SUBSTANTIAL CONTRIBUTORS

FORM 990PF,

NAME AND ADDRESS

SCHAUER, JULIE F. 9356 SIBELIUS DRIVE VIENNA, VA 22182

ATTACHMENT 5	EXPENSE ACCT AND OTHER ALLOWANCES		
ATTACE	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	0.
	COMPENSATION	.0	0
ERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE 1.00	GRAND TOTALS
FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	NAME AND ADDRESS	JULIE F SCHAUER FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	

84-6660126

2019 FORM 990-PF

DRUG PREVENTION AND REHABILITATION FOUNDATION

DRUG PREVENTION AND REHABILITATION FOUNDATION 2019 FORM 990-PF

84-6660126

	l
YEAR	
THE	
DURING	
PAID	
CONTRIBUTIONS	
AND CO	
GRANTS	
-4	l
ネ	l
PART	
990PF,	
FORM	

ATTACHMENT 6

125,000

TOTAL CONTRIBUTIONS PAID