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OMB No. 1545-0052

2019

Return of Private Foundation

Form 990-PF

Department of the Treasury

Internal Revenue Service

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

Open to Public Inspection

For	caler	ndar year 2019, or tax year beginning 01-01-20	19 , an	nd endi	ng 12-31-	2019			
Name of foundation TIMOTHY T DAY FOUNDATION INC						A Employer identification number			
11	MOINT	T DAT FOUNDATION INC		8	5-0870436				
		d street (or P.O. box number if mail is not delivered to street address)	Room/suite		Telephone nu	mber (see instruction	ns)		
3	219 E C	AMELBACK RD NO 841		(6	502) 595-8880				
		n, state or province, country, and ZIP or foreign postal code Z 85018			If exemption	application is pendin	a. check here		
FIIO	LINIA, A				II OKOMPONI	app	▶ □		
G C	neck al	I that apply: Linitial return Linitial return of a	former public charity	D	1. Foreign org	ganizations, check he	ere		
		☐ Final return ☐ Amended return				ganizations meeting k here and attach co			
		☐ Address change ☐ Name change		— _E	If private fou	ındation status was t	erminated \Box		
	,	type of organization: $lacksquare$ Section 501(c)(3) exempt private to 4947(a)(1) nonexempt charitable trust \Box Other taxable	oundation private foundation		under section	n 507(b)(1)(A), chec	:k here ▶ Ш		
		T T	Cash		If the founds	tion is in a 60-mont	h termination 🖂		
of	year (f	rom Part II, col. (c),	E cash E Accidi			1 507(b)(1)(B), chec			
IIne	e 16)	Part I, column (d) must	be on cash basis.)						
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements		
		of amounts in columns (b), (c), and (d) may not necessarily	expenses per	1, ,	investment income	(c) Adjusted net income	for charitable purposes		
		equal the amounts in column (a) (see instructions).)	books				(cash basis only)		
	1	Contributions, gifts, grants, etc., received (attach schedule)	1,716,862						
	2	Check ▶ ☐ if the foundation is not required to attach							
	_	Sch. B							
	3	Interest on savings and temporary cash investments Dividends and interest from securities	1 200 947		1,258,811				
	4 5a	Gross rents	1,309,847		1,230,011				
	b	Net rental income or (loss)							
æ	6a	Net gain or (loss) from sale of assets not on line 10	2,003,150						
Revenue	b	Gross sales price for all assets on line 6a	_,,						
eve	-	9,295,745							
~	7	Capital gain net income (from Part IV, line 2)			2,003,150				
	8	Net short-term capital gain							
	9	Income modifications							
	10a b	Gross sales less returns and allowances Less: Cost of goods sold							
	°	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)							
	12	Total. Add lines 1 through 11	5,029,859		3,261,961				
	13	Compensation of officers, directors, trustees, etc.	0		0		c		
	14	Other employee salaries and wages							
Š	15	Pension plans, employee benefits							
ns(16a	Legal fees (attach schedule)							
2	b	Accounting fees (attach schedule)	11,550		5,775		C		
e) Ei	C	Other professional fees (attach schedule)							
Ę	17	Interest							
stra	18	Taxes (attach schedule) (see instructions)	11,744		6,374		С		
Ξ	19	Depreciation (attach schedule) and depletion							
Ę	20	Occupancy							
₹ D	21	Travel, conferences, and meetings	24,293		0		С		
an	22	Printing and publications	1						
ing	23	Other expenses (attach schedule)	54,238		25,583		С		
Operating and Administrative Expenses	24	Total operating and administrative expenses.							
<u>a</u>		Add lines 13 through 23	101,825		37,732		2.722.013		
_	25	Contributions, gifts, grants paid	3,722,810				3,722,810		
	26	Total expenses and disbursements. Add lines 24 and 25	3,824,635		37,732		3,722,810		
	27	Subtract line 26 from line 12:	•		· · ·				
	a	Excess of revenue over expenses and disbursements	1,205,224						
	b	Net investment income (if negative, enter -0-)	1,203,224		3,224,229				
	c	Adjusted net income (if negative, enter -0-)			-,,				

30,097,877

19,814,824

59,071,743

12,000

12,000

59,059,743

59,059,743

59,071,743

9

이얼시

31,333,182

24,062,011

3,151,528

59 080 049

59.080,049

59,080,049

59,080,049

59,059,743

1,205,224

60,264,967

1,184,918

59,080,049 Form **990-PF** (2019)

1

2

3

4

5

6

32,174,004

34,428,131

3,169,404

70.304.867

Other notes and loans receivable (attach schedule) ▶

Investments—U.S. and state government obligations (attach schedule)

Less: allowance for doubtful accounts Inventories for sale or use . . .

Prepaid expenses and deferred charges

Investments—corporate bonds (attach schedule) .

Less: accumulated depreciation (attach schedule) ▶

Investments—other (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow FASB ASC 958, check here

Investments—mortgage loans

Land, buildings, and equipment: basis

instructions. Also, see page 1, item I)

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions . . .

Net assets with donor restrictions . . .

and complete lines 26 through 30.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Other assets (describe > _

Other liabilities (describe ▶_

Grants payable

Investments—land, buildings, and equipment: basis ▶

Less: accumulated depreciation (attach schedule) ▶

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year-Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Paid-in or capital surplus, or land, bldg., and equipment fund

	5
	6
	7
S.	8
Assets	9
As	10a
	b
	c

b

11

12

13

14

15

16

17 18

19 20

21

22 23

24

25

28

30

Part III

2

3

Liabilities

Fund Balances

ō 26

Assets 27

Net 29

Capital Callis a	The E033C3 TOT THE OIL THIVEST	inche Income				
(a) List and describe 2-story brick war	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)			
1 a VANGUARD FTSE DEVELO	2017-01-01	2019-06-18				
	TOCK MARKET INDEX FUND ADMIR	AL SHARES		2019-01-01	2019-06-19	
c MFO VANGUARD TOTAL S	TOCK MARKET INDEX FUND ADMIR	AL SHARES		2017-01-01	2019-06-19	
d CAPITAL GAINS DISTRIBU						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a 5,534	(ріцз ехр	5,387,800	(e) plus (i	146,723	
	,505		82,945		5,560	
	·					
c 3,670	·		1,821,850		1,849,001	
	.,866				1,866	
e						
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		1)	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) s of col. (i) l. (j), if any	col. (k), but not	h) gain minus less than -0-) or om col.(h))	
а					146,723	
b					5,560	
c					1,849,001	
d					1,866	
e						
	ain or (loss) as defined in sections : I, line 8, column (c) (see instructi)- }	3	2,003,150	
Part V Qualification U	nder Section 4940(e) for Re	educed Tay on Net	· Investment Inc	rome		
If section 4940(d)(2) applies, lea					es 🗸 No	
	section 4942 tax on the distributal qualify under section 4940(e). Do	, ,	· ·	Y	es 🛂 No	
1 Enter the appropriate amo	ount in each column for each year;	see instructions before	e making any entries	S.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	ole-use assets	(d) Distribution rat (col. (b) divided by c		
2018	3,630,001		66,123,257		0.054897	
2017	3,277,907		66,042,940		0.049633	
2016	3,109,689		64,332,353	0.048338		
2015	3,401,730		67,888,778		0.050107	
2014	3,551,710		72,426,355		0.049039	
2 Total of line 1, column (d))		2		0.252014	
number of years the found	for the 5-year base period—divide the following state of the second state of the second secon	than 5 years	<u>3</u>		0.050403	
	charitable-use assets for 2019 from				64,983,758	
• •			5		3,275,376	
	nt income (1% of Part I, line 27b)		6		32,242	
			7		3,307,618	
	ns from Part XII, line 4 ,			10/1 : -	3,722,810	
If line 8 is equal to or greatinstructions.	ater than line 7, check the box in Pa	art VI, line 1b, and com	npiete that part usin	g a 1% tax rate. Se	e tne Part VI	

	990-F1 (2019)		- 4-20.14	— • • • • • • • • • • • • • • • • • • •	,		P	age (
श्च		ing Activities for Which	Form 4720 May Be	Required (continued)	<i>)</i>			
ā	During the year did the foundation p	·					Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?							
	(2) Influence the outcome of any specific public election (see section 4955); or to carry							
	on, directly or indirectly, any vot	er registration drive?		· · 🗌 Yes 🛭	✓ No			
	(3) Provide a grant to an individual	for travel, study, or other sim	ilar purposes?	☐ Yes ☐	▼ No			
	(4) Provide a grant to an organization	on other than a charitable, etc	, organization described		<u> </u>			
	in section 4945(d)(4)(A)? See in	structions		· · □ v [✓ No			
	(5) Provide for any purpose other th	an religious, charitable, scien	tific, literary, or	· · L Yes	⊻ No			
	educational purposes, or for the	prevention of cruelty to childr	en or animals?					
b	If any answer is "Yes" to $5a(1)-(5)$,	•		Ceptions described in	⊻ No			
	Regulations section 53.4945 or in a	•		•		5b		
	Organizations relying on a current no			_	t			
_	If the answer is "Yes" to question 5a				ШΙ			
	tax because it maintained expenditu	• • •	•		_			
	If "Yes," attach the statement requir			' '	_ No			
	•	· -						
ìа	Did the foundation, during the year,	, , ,						
	a personal benefit contract?			⊔ Yes D	✓ No			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be	nefit contract?		6b		No
	If "Yes" to 6b, file Form 8870.							
'a	At any time during the tax year, was	the foundation a party to a p	prohibited tax shelter tra	nsaction? Yes	✓ No			
b	If "Yes", did the foundation receive a	any proceeds or have any net	income attributable to the			7b		
3	Is the foundation subject to the sect	ion 4960 tax on payment(s) o	of more than \$1,000,000	in remuneration or				
	excess parachute payment during th	e year?		· · 🗌 Yes	√ N° [
	Information About O	fficers, Directors, Trust	tees. Foundation Ma			ees.		
Pai	t VIIII and Contractors	, 2,	,		,	,,		
1	List all officers, directors, trustee	s. foundation managers ar	nd their compensation	See instructions				
	List an officers, an ectors, trustee	(b) Title, and average	(c) Compensation (If	(d) Contributions to	1,,	_		
	(a) Name and address	hours per week	not paid, enter	employee benefit plans a			ise acci	
		devoted to position	-0-)	deferred compensation	י ו	iller ai	lowanic	.63
ee A	Additional Data Table							
2	Compensation of five highest-pai	d employees (other than t	l hose included on line :	l—see instructions). If ⊢	none, er	ter "l	NONE.	71
	, , ,			(d) Contributions to	1			•
a)	Name and address of each employee [paid (b) Title, and average hours per week	(c) Compensation	employee benefit			se acco	
	more than \$50,000	devoted to position	(c) compensation	plans and deferred	otl	ner all	owance	es
				compensation				
ONI	<u> </u>							
					\perp			
nt2	I number of other employees paid ove	r \$50 000.						
Jid	. Hamber of other employees paid ove				Farr	~ QQ(0-PF (2010
					LOL	□ プラし	5-PF (Z019

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NOI	NE".
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 PROVIDE SUPPORT TO 501(C)(3)'S FOR ACTIVITIES, RESEARCH, PUBLICATIONS & ORGANIZATIONS THAT SUPPORT MARINES & THE UNITED STATES MARINE CORPS.	0
2 PROVIDE SUPPORT TO 501(C)(3)'S FOR ACTIVITIES, RESEARCH, PUBLICATIONS & ORGANIZATIONS THAT SUPPORT ANIMAL WELFARE & ORGANIZATIONS THAT HELP TO RESCUE ABUSED & ABANDONED DOGS.	0
3 PROVIDE SUPPORT TO 501(C)(3)'S FOR ACTIVITIES, RESEARCH, PUBLICATIONS & ORGANIZATIONS THAT EDUCATE, FOSTER & DEVELOP ENTREPRENEURS.	0
4 PROVIDE SUPPORT TO 501(C)(3)'S FOR ACTIVITIES, FACILITIES & PROGRAMS THAT ENCOURAGE PHYSICAL FITNESS, SOUND NUTRITION & A HEALTHY LIFESTYLE AT SELECTED EDUCATION INSTITUTIONS.	0
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. 1	Amount
2	
All other program-related investments. See instructions. 3	
Total. Add lines 1 through 3	0 Form 990-PF (2019)

2a |

2b

3,249,188

32,242

3,216,946

3.216.946

3,216,946

3,722,810

3,722,810

3,690,568

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32,242

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

Distributable amount before adjustments. Subtract line 2c from line 1.

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Tax on investment income for 2019 from Part VI, line 5.

Income tax for 2019. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

1

2a

3

4 5

6

1

2

3

4

5

b

Part XII

3,216,946

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rt	XΙ	

Form 990-PF (2	019)
Part XIII	Undistributed Income (see instructions)

- 1 Distributable amount for 2019 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2019:
- a Enter amount for 2018 only. Excess distributions carryover, if any, to 2019:
- a From 2014.
- **b** From 2015.
- c From 2016. . .
- d From 2017.
- e From 2018.

required—see instructions).

d Applied to 2019 distributable amount. e Remaining amount distributed out of corpus

5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

6 Enter the net total of each column as

b Prior years' undistributed income. Subtract c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. **d** Subtract line 6c from line 6b. Taxable amount —see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 7 Amounts treated as distributions out of corpus 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.

10 Analysis of line 9: a Excess from 2015. . . **b** Excess from 2016. . c Excess from 2017. . . .

d Excess from 2018. . .

e Excess from 2019. . .

Subtract lines 7 and 8 from line 6a

indicated below:

- 3.118
- 348,716 f Total of lines 3a through e. 4 Qualifying distributions for 2019 from Part
 - XII, line 4: ▶ \$
- a Applied to 2018, but not more than line 2a
- **b** Applied to undistributed income of prior years

same amount must be shown in column (a).)

- (Election required—see instructions).
- c Treated as distributions out of corpus (Election

(a)

Corpus

351.834

505.864

857,698

857,698

3.118 348,716

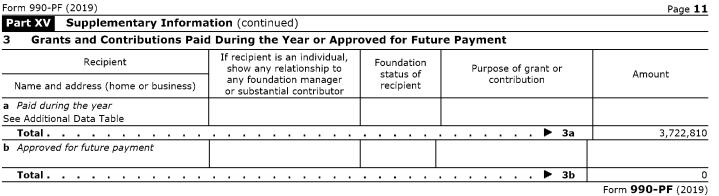
505.864

(b)

Years prior to 2018

(c)

2018



er gross	amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exemp
Program	service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
	and contracts from government agencies					
	ship dues and assessments					
	on savings and temporary cash					
Dividen	ds and interest from securities			14	1,309,847	
let ren	tal income or (loss) from real estate:					
	inanced property					
	ebt-financed property					
	tal income or (loss) from personal property					
	vestment income					
Jain or nvento	(loss) from sales of assets other than			10	2 202 450	
	ome or (loss) from special events:			18	2,003,150	
	rofit or (loss) from sales of inventory					
Other r	evenue: a					
ı						
<u>.</u>						
			0		3,312,997	
Subtota Total.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0	13		
Subtota Total. (See wo	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calcu B Relationship of Activities to the	lations.) le Accomplisi	nment of Exem	ot Purposes	3	3,312,99
Subtota Total. See wo	al. Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Adshructions to verify calcu	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ted importantly to	
Subtota Total. See wo It XVI e No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcuers. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ted importantly to	
Subtota Fotal. See wo T XVI E No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcuers. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ted importantly to	
Subtota Fotal. See wo It XVI e No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcuers. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ted importantly to	
Subtota Fotal. See wo T XVI E No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcuers. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ted importantly to	
Subtota Total. See wo It XVI e No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcuers. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ted importantly to	
Subtota Total. See wo It XVI e No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcuers. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ted importantly to	
Subtota Fotal. See wo t XVI e No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcuers. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ted importantly to	
Subtota Fotal. See wo T XVI E No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcuers. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ted importantly to	
Subtota Total. See wo It XVI e No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcuers. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ted importantly to	
Subtota Fotal. See wo T XVI E No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcuers. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ted importantly to	
Subtota Total. See wo It XVI e No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcuers. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ted importantly to	
Subtota Fotal. See wo It XVI e No.	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcuers. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ted importantly to	
Subtota Total. (See wo Irt XVI	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcuers. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations.) le Accomplisi income is report	hment of Exempled in column (e) of	pt Purposes Part XVI-A contribut	ted importantly to	

orm 990-	-PF (20								Pa	age 1
Part X		Exempt Organiz	zations				Relationships With Nonch			
		nization directly or inc an section 501(c)(3)					ganization described in section 5 anizations?	01	Yes	No
a Transf	ers fro	m the reporting found	dation to a noncha	ritable exe	empt organizati	on of:				
1 1								1a(1		No
` '		ssets						1a(2	 	No
b Other		ctions: ' assets to a nonchari	table evennt orga	nization				1b(1		No
` '		es of assets from a n						. 1b(2	+	No
		of facilities, equipmen						. 1b(3	_	No
(4) F	Reimbui	rsement arrangement	ts					1b(4		No
(5) L	oans o	r loan guarantees.						1b(5)	No
		ince of services or me		-				1b(6)	No
								1c		No
(a) Line No	D. (b) Amount involved	(c) Name of noncha	aritable exer	mpt organization	(d) Des	cription of transfers, transactions, and	sharing arr	angeme	nts
	+									
	+									
	+									
	+									
	_									
descri	bed in :	ition directly or indire section 501(c) (other plete the following so (a) Name of organizatio	than section 501(, c)(3)) or i	•		·	✓ No elationship		
		-		•	-					
	of my l		, it is true, correct,		,	_	companying schedules and state er (other than taxpayer) is based	,		
Sign Here	***	***			2020-04-28		r 	lay the IRS o eturn rith the prep elow		
i 7	_				_	7		21044		

Paid **Preparer Use Only**

Signature of officer or trustee Date Title (see instr.) 🗹 Yes 🗆 No Print/Type preparer's name Preparer's Signature PTIN Date Check if self-P01431672 employed ▶ □ SPENCER WRIGHT Firm's name ▶ TFO PHOENIX INC Firm's EIN ▶45-3635408 Firm's address ► 5060 NORTH 40TH STREET SUITE 200 Phone no. (602) 466-2611 PHOENIX, AZ 85018

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred

			compensation	
TIMOTHY T DAY	CHAIRMAN/	0	0	
3219 E CAMELBACK RD 841 PHOENIX, AZ 85018	PRESIDENT/ DIREC 0.04			

			·	
TIMOTHY T DAY	CHAIRMAN/	0	0	0
3219 E CAMELBACK RD 841 PHOENIX, AZ 85018	PRESIDENT/ DIREC 0.04			
SANDRA R DAY	VICE CHAIRMAN/	0	0	583

1111011111 1 5711	CHAIRPAN/	· · · · · · · · · · · · · · · · · · ·		۰ ۲
3219 E CAMELBACK RD 841 PHOENIX, AZ 85018	PRESIDENT/ DIREC 0.04			
SANDRA R DAY	VICE CHAIRMAN/	0	0	583
3219 E CAMELBACK RD 841	DIRECTOR 0.04			

TGUARD MALLERY		_	_	_
219 E CAMELBACK RD 841 HOENIX, AZ 85018	DIRECTOR 0.04			
ANDRA R DAY	VICE CHAIRMAN/	0	0	583
219 E CAMELBACK RD 841 HOENIX, AZ 85018	0.04			

SANDRA R DAY	VICE CHAIRMAN/	0	0	583
3219 E CAMELBACK RD 841 PHOENIX, AZ 85018	DIRECTOR 0.04			
RICHARD MALLERY	SECRETARY/ DIRECTOR	0	0	0
3219 E CAMELBACK RD 841 PHOENIX, AZ 85018	0.04			

854

DIRECTOR 0.04

DIRECTOR 0.04

DIRECTOR 0.04

0.04

VP/ TREASURER/ DIRECTOR

WILLIAM ERIC CHRISTOPHER GLEASON

3219 E CAMELBACK RD 841 PHOENIX, AZ 85018 LESLIE DAY PELLILLO

3219 E CAMELBACK RD 841

3219 E CAMELBACK RD 841 PHOENIX, AZ 85018

3219 E CAMELBACK RD 841 PHOENIX, AZ 85018

PHOENIX, AZ 85018 TIMOTHY T DAY JR

BRYAN W DAY

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

Name and address (home or business)

Total .

Traine and dadress (nome or pasiness)	or substantial contributor			
a Paid during the year				
2ND CHANCE DOG RESCUE 2449 W ANGEL WAY	NONE	501(C)3	ANIMAL WELFARE	7,000

QUEEN CREEK, AZ 85142				
AMERICAN HUMANE 1400 16TH STREET NW SUITE 360 WASHINGTON, DC 20036	NONE	501(C)3	ANIMAL WELFARE	51,000

1400 16TH STREET NW SUITE 360 WASHINGTON, DC 20036		, ,		·
ANIMAL ADOPTION CENTER 175 N GLENWOOD ST 1ACKSON WY 83001	NONE	501(C)3	ANIMAL WELFARE	50,000

3,722,810

WASHINGTON, DC 20036			
ANIMAL ADOPTION CENTER 175 N GLENWOOD ST JACKSON, WY 83001	501(C)3	ANIMAL WELFARE	50,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
ANIMAL GUARDIAN NETWORK 4815 E CAREFREE HIGHWAY 108-504	NONE	501(C)3	ANIMAL WELFARE	63,750

815 E CAREFREE HIGHWAY 108-504 AVE CREEK, AZ 85331				
PARN1106 N GILBERT RD 2 PMB 192	NONE	501(C)3	ANIMAL WELFARE	

·				
APARN1106 N GILBERT RD 2 PMB 192 MESA, AZ 85203	NONE	501(C)3	ANIMAL WELFARE	40,000
AZ PET PROJECT16 W CAMELBACK RD	NONE	501(C)3	ANIMAL WELFARE	55,000

MESA, AZ 85203				
AZ PET PROJECT16 W CAMELBACK RD PHOENIX, AZ 85013	NONE	501(C)3	ANIMAL WELFARE	55,000

AZ PET PROJECT16 W CAMELBACK RD PHOENIX, AZ 85013	NONE	501(C)3	ANIMAL WELFARE	55,000
Total			▶ 3a	3,722,810

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

	or substantial continuation	l		
a Paid during the year				
AZ PUG LIFE RESCUE SOCIETY 13236 N 7TH ST 4-201 PHOENIX, AZ 85308	NONE	501(C)3	ANIMAL WELFARE	2,000

PHOENIX, AZ 85308				
BAD RAPPO BOX 27005 OAKLAND, CA 94602	NONE	501(C)3	ANIMAL WELFARE	2,0

OAKLAND, CA 94602	NONE	501(C)3	ANIMAL WELFARE	2,000
COCHISE CANINE RESCUEPO BOX 87 POMERANE, AZ 85627	NONE	501(C)3	ANIMAL WELFARE	1,000

OARLAND, CA 54002				
COCHISE CANINE RESCUEPO BOX 87 POMERANE, AZ 85627	NONE	501(C)3	ANIMAL WELFARE	1,000

3,722,810

POMERANE, AZ 85627	NONE	501(C)3	ANIMAL WELFARE	:

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
COLORADO STATE UNIVERSITY FOUNDATION 1062 CAMPUS DELIVERY FORT COLLINS. CO 80523	NONE	501(C)3	EDUCATION	40,000

FORT COLLINS, CO 80523				
COMMUNITY FOUNDATION OF JACKSON HOLE P O BOX 574	NONE	501(C)3	SOCIAL SERVICES	8,500

CONTROLLER FOR STREET	110112	1 30 1 (0)3	5001 (2 52)(11025	0,500
HOLE P O BOX 574				
JACKSON, WY 83001				
DEEREIELD ACADEMYZ BOYDEN RD	NONE	501(C)3	EDUCATION	5 000

P O BOX 574 JACKSON, WY 83001				
DEERFIELD ACADEMY7 BOYDEN RD	NONE	501(C)3	EDUCATION	5,000

JACKSON, WY 83001				
DEERFIELD ACADEMY7 BOYDEN RD DEERFIELD, MA 01342	NONE	501(C)3	EDUCATION	5,000

DEERFIELD ACADEMY7 BOYDEN RD DEERFIELD, MA 01342	NONE	501(C)3	EDUCATION	5,00

DEERFIELD, MA 01342	NONE	301(0)3	EDOCATION	5,
Total			> 3a	3,722,810

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
DOG IS MY COPILOTPO BOX 3399 JACKSON HOLE, WY 83001	NONE	501(C)3	ANIMAL WELFARE	5,000
FACE FOLINDATION	NONE	F01/C\2	ANTMAL WELFARE	F00

JACKSON HOLE, WT 83001				
FACE FOUNDATION 10505 SORRENTO VALLEY ROAD STE175 SAN DIEGO, CA 92121	NONE	501(C)3	ANIMAL WELFARE	500

10505 SORRENTO VALLEY ROAD STE175 SAN DIEGO, CA 92121				
FIGHTING FOR DAWNPO BOX 17664	NONE	501(C)3	ANIMAL WELFARE	3,500

SAN DIEGO, CA 92121				
FIGHTING FOR DAWNPO BOX 17664 ATLANTA, GA 30316	NONE	501(C)3	ANIMAL WELFARE	3,500

D, ((1 D1200) G, (D2121				
FIGHTING FOR DAWNPO BOX 17664 ATLANTA, GA 30316	NONE	501(C)3	ANIMAL WELFARE	3,500

Total .

3,722,810

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

· ·				
HARVARD BUSINESS SCHOOL SOLDIERS FIELD BOSTON, MA 02163	NONE	501(C)3	EDUCATION	1,000,000

331011/11/1 02203				
BS ADVANCED MANAGEMENT ROGRAM	NONE	501(C)3	EDUCATION	
DLDIERS FIELD				

Total .

HBS ADVANCED MANAGEMENT PROGRAM SOLDIERS FIELD BOSTON, MA 02163	NONE	501(C)3	EDUCATION	328,000
HBS MARINE CORPS ENTREPRENEUR	NONE	501(C)3	EDUCATION	40,000

BOSTON, MA 02163				
HBS MARINE CORPS ENTREPRENEUR FELLOWSHIP SOLDIERS FIELD	NONE	501(C)3	EDUCATION	40,000

HBS MARINE CORPS ENTREPRENEUR FELLOWSHIP SOLDIERS FIELD	NONE	501(C)3	EDUCATION	40,00
BOSTON, MA 02163				

3,722,810

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

	Or Substantial Continuation			
a Paid during the year				
LOST OUR HOME PET RESCUE 2323 S HARDY DR TEMPE, AZ 85282	NONE	501(C)3	ANIMAL WELFARE	50,950
LUV OF DOGZ FUND INC	NONE	501(C)3	ANIMAL WELFARE	7,000

12/11/2/12 00202				
LUV OF DOGZ FUND INC 7841 E VIA DE BELLEZA SCOTTSDALE, AZ 85258	NONE	501(C)3	ANIMAL WELFARE	7
MARINE CORPS ASSOCIATION	NONE	501(C)3	SOCIAL SERVICES	25

SCOTTSDALE, AZ 85258				
MARINE CORPS ASSOCIATION FOUNDATION 715 BROADWAY ST	NONE	501(C)3	SOCIAL SERVICES	25,000

MARINE CORPS ASSOCIATION FOUNDATION 715 BROADWAY ST QUANTICO, VA 22134	NONE	501(C)3	SOCIAL SERVICES	25,000

3,722,810

MARINE CORPS ASSOCIATION	NONE	501(C)3	SOCIAL SERVICES	25,0
FOUNDATION				
715 BROADWAY ST				
QUANTICO, VA 22134				

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year

a Falu during the year				
MARINE CORPS HERITAGE FOUNDATION 3800 FETTLER PARK DRIVE STE 104 DUMFRIES, VA 22025	NONE	501(C)3	SOCIAL SERVICES	1,202,310
		I		

MARINE CORPS SCHOLARSHIP FOUNDATION 909 N WASHINGTON STREET STE 400 ALEXANDRIA, VA 22314	NONE	501(C)3	EDUCATION	100,000
MARINE CORPS UNIVERSITY	NONE	501(C)3	EDUCATION	100,000

ALEXANDRIA, VA 22314				
MARINE CORPS UNIVERSITY FOUNDATION PO BOX 122 QUANTICO, VA 22134	NONE	501(C)3	EDUCATION	100,000

PO BOX 122 QUANTICO, VA 22134			▶ 3a	3,722,810
MARINE CORPS UNIVERSITY FOUNDATION	NONE	501(C)3	EDUCATION	100,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

NATIONAL MILL BOO BECCUE	NONE	E04 (6) 2	ANITAGAL MELEADE	7.00
a Paid during the year				
Name and address (home or business)	any foundation manager or substantial contributor	recipient		

PO BOX 88468 COLORADO SPRINGS, CO 80908	NONE	501(C)3	ANIMAL WELFARE	7,000
OLD FRIENDS SENIOR DOG SANCTUARY	NONE	501(C)3	ANIMAL WELFARE	2,000

COLORADO SPRINGS, CO 80908				
OLD FRIENDS SENIOR DOG SANCTUARY PO BOX 93 MOUNT JULIET, TN 37121	NONE	501(C)3	ANIMAL WELFARE	2,000
PACC911 10645 N TATUM BLVD STE 200-516	NONE	501(C)3	ANIMAL WELFARE	50,000

OLD FRIENDS SENIOR DOG SANCTUARY PO BOX 93 MOUNT JULIET, TN 37121	NONE	501(C)3	ANIMAL WELFARE	2,000
PACC911 10645 N TATUM BLVD STE 200-516 PHOENIX, AZ 85028	NONE	501(C)3	ANIMAL WELFARE	50,000
Total			▶ 35	3 722 810

Total			▶ 3a	3,722,810
PACC911 10645 N TATUM BLVD STE 200-516 PHOENIX, AZ 85028	NONE	501(C)3	ANIMAL WELFARE	50,000
PO BOX 93 MOUNT JULIET, TN 37121	NONE	301(0)3	ANIMAL WELFARE	2,000

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
PAWS OF JACKSON HOLEPO BOX 10333 JACKSON, WY 83001	NONE	501(C)3	ANIMAL WELFARE	6,000
DINTLER DETSONS NI STLVER ST	NONE	501(C)3	ANTMAL WELFARE	7 300

3ACKSON, WT 03001				
PINTLER PETS205 N SILVER ST ANACONDA, MT 59711	NONE	501(C)3	ANIMAL WELFARE	7,300
PUG NATION RESCUE OF LOS ANGELES PO BOX 270	NONE	501(C)3	ANIMAL WELFARE	7,500

*				
PUG NATION RESCUE OF LOS ANGELES PO BOX 270 TORRANCE, CA 90507	NONE	501(C)3	ANIMAL WELFARE	7,500

Total			▶ 3a	3,722,810
PO BOX 270 TORRANCE, CA 90507				1
PUG NATION RESCUE OF LOS ANGELES	NONE	201(C)2	ANIMAL WELFARE	/,50

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year				
PUG RESCUE OF SAN DIEGO COUNTY PO BOX 151449 SAN DIEGO. CA 92175	NONE	501(C)3	ANIMAL WELFARE	7,500

RUSTY'S ANGEL SANCTUARY 49459 N 7TH AVE NEW RIVER, AZ 85087	NONE	501(C)3	ANIMAL WELFARE	
SCRIPPS HEALTH FOUNDATION	NONE	501(C)3	HEALTH SERVICES	İ

NEW RIVER, AZ 85087				
SCRIPPS HEALTH FOUNDATION PO BOX 2669 LA JOLLA, CA 92038	NONE	501(C)3	HEALTH SERVICES	2,000

2,000

3,722,810

NEW RIVER, AZ 85087				
SCRIPPS HEALTH FOUNDATION PO BOX 2669	NONE	501(C)3	HEALTH SERVICES	2,0
LA JOLLA, CA 92038				

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year				
SEEK FIRST MINISTRY KINGDOM X 4250 S 25TH E IDAHO FALLS, ID 83404	NONE	501(C)3	SOCIAL SERVICES	50,000
SEMPER FI FUNDBOX 555193	NONE	501(C)3	SOCIAL SERVICES	200.000

IDAHO FALLS, ID 83404				
SEMPER FI FUNDBOX 555193 CAMP PENDLETON, CA 92055	NONE	501(C)3	SOCIAL SERVICES	200,000
SOUTHERN NEVADA PUG RESCUE PO BOX 20875 LAS VEGAS, NV 89112	NONE	501(C)3	ANIMAL WELFARE	5,000

Total .

3,722,810

■ 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

,	or substantial contributor			
a Paid during the year				
STREET PAWS INC	NONE	501(C)3	ANIMAL WELFARE	1,000

925 ALEXANDER HAMILTON DR MCDONOUGH, GA 30253				
SURRENDERED SOULS RESCUE 3507 SSIESTA LANE TEMPE, AZ 85282	NONE	501(C)3	ANIMAL WELFARE	7,000

SURRENDERED SOULS RESCUE 3507 SSIESTA LANE TEMPE, AZ 85282	NONE	501(C)3	ANIMAL WELFARE	7,000
THE INNER PUP OF NEW ORLEANS 465 LOWERLINE ST	NONE	501(C)3	ANIMAL WELFARE	6,500

3,722,810

TEMPE, AZ 85282			ı	
THE INNER PUP OF NEW ORLEANS 465 LOWERLINE ST NEW ORLEANS, LA 70118	NONE	501(C)3	ANIMAL WELFARE	6,500

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Amount Foundation show any relationship to contribution status of

recipient

any foundation manager

Name and address (home or business)

,	or substantial contributor			
a Paid during the year				
THE LITTLE RED DOG 23046 AVENIDA DE LA CARLOTA LAKE FOREST, CA 92630	NONE	501(C)3	ANIMAL WELFARE	7,500

VALLEY OF THE SUN UNITED WAY 3200 E CAMELBACK RD SUITE 375 PHOENIX, AZ 85018	NONE	501(C)3	SOCIAL SERVICES	10,000

3200 E CAMELBACK RD SUITE 375 PHOENIX, AZ 85018				
WATERSPRINGS MINISTRIES 4250 S 25TH E IDAHO FALLS. ID 83404	NONE	501(C)3	SOCIAL SERVICES	50,000

THOUNTA, AL 05010				
WATERSPRINGS MINISTRIES 4250 S 25TH E IDAHO FALLS, ID 83404	NONE	501(C)3	SOCIAL SERVICES	50,000
Total			▶ 3a	3,722,810

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Foundation status of recipient recipient

a Paid during the year				
WESLEYAN UNIVERSITY45 WYLLYS AVE MIDDLETOWN, CT 06459	NONE	501(C)3	EDUCATION	15,000
ANGELS WITHOUT WINGSPO BOX 1125 MOORPARK, CA 93020	NONE	501(C)3	ANIMAL WELFARE	5,000

MOORPARK, CA 93020				-,
CANINE COMPANION FOR INDEPENDENCE PO BOX 446 SANTA ROSA, CA 95402	NONE	501(C)3	ANIMAL WELFARE	5,000

Total .

3,722,810

■ 3a

Recipient
Recipient
Recipient
If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

HOUSE OF FAITH 321 MONTECITO DRIVE SAN ANGELO, TX 76903	NONE	501(C)3	SOCIAL SERVICES	1,000
LOVE PUP FOUNDATION	NONE	501(C)3	ANIMAL WELFARE	15,000

LOVE PUP FOUNDATION 6405 E THOMAS RD SCOTTSDALE, AZ 85251	NONE	501(C)3	ANIMAL WELFARE	15,000
MAYO CLINIC13400 EAST SHEA BLVD SCOTTSDALE, AZ 85259	NONE	501(C)3	HEALTH SERVICES	5,000

Total . .

3,722,810

■ 3a

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year				
NORTH PHOENIX ANIMAL CLINIC 1610 E BELL ROAD STE 108 PHOENIX, AZ 85022	NONE	501(C)3	ANIMAL WELFARE	1,000

THOUNT, NE 03022				
SOUTHWESTERN OKLAHOMA STATE UNIVERSITY FOUNDATION 100 W CAMPUS DR WEATHERFORD, OK 73096	NONE	501(C)3	EDUCATION	60,000

3,722,810

Total.

efile GRAPHIC print - DO NOT	PROCESS As Filed	Data -	D	LN: 93491122006310	
TY 2019 Accounting F	ees Schedule			_	
_					
Name: TIMOTHY T DAY FOUNDATION INC EIN: 86-0870436					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
ACCOUNTING	11,556	5,775		0	

erile GRAPHIC Print - DO NOT PROCESS	AS Filed Data -	DLN: 93491122006310
TY 2019 Investments Corpora	te Bonds Schedul	e
Name:	TIMOTHY T DAY FOU	NDATION INC

EIN: 86-0870436

ofile CRAPHIC print - DO NOT PROCESS | As Filed Data -

NT ULTRA-SHORT BOND FUND

Investments Corporate Bonds Schedule		
Name of Bond	End of Year Book	End of Year Fair
	Value	Market Value

3,169,404

3,151,528

DIN: 02/01122006210

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491122006310				
TY 2019 Investments Corporate Stock Schedule						

Name: TIMOTHY T DAY FOUNDATION INC.

EIN: 86-0870436

US EQUITIES ETF

Investments Corporation Stock Schedule				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		

24,062,011

34,428,131

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491122006310			
TY 2019 Investments Governr	TY 2019 Investments Government Obligations Schedule					
Name:	TIMOTHY T D/	AY FOUNDATION INC				
EIN:	86-0870436					
US Government Securities - End of Year Book Value:	3	31,333,182				
US Government Securities - End of Year Fair Market Value:	3	32,174,004				
State & Local Government Securities - End of Year Book Value:		0				
State & Local Government Securities - End of Year Fair Market Value:		0				

ATION INC					
ATION INC					
TY 2019 Other Decreases Schedule					
DLN: 93491122006310					

1,184,918

FMV IN EXCESS OF COST BASIS OF CONTRIBUTED SECURITIES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491122006310		
TY 2019 Other Expenses Schedule						
Name: TIMOTHY T DAY FOUNDATION INC						
EIN:	EIN: 86-0870436					
Other Expenses Schedule	Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FEES - CUSTODY FEES	25,496	25,496		0		

87

4,772

23,883

87

FEES - OTHER INVESTING

OTHER EXPENSES

MEALS

ile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491122006310					
TY 2019 Other Liabilities Schedule					
Name: TIMOTHY T DAY FOUNDATION INC					
EIN: 86-0870436					
Description	Beginning of Year - Book Value	End of Year - Book Value			
END OF THE YEAR OUTSTANDING CHECK	 KS	12,000	0		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491122006310		
TY 2019 Taxes Schedule						
Name:	TIMOTHY T [DAY FOUNDATION	INC			
	EIN: 86-0870436					
LIN: 60-06/0430						
Category A	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FOREIGN TAXES	6,374	6,374		0		

5,370

FEDERAL TAXES

efile GRAPHIC print - DO	NOT PROCESS As Filed Data	-		DLN: 93491122006310		
Schedule B	Sched	dule of Contributors		OMB No. 1545-0047		
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	P90-PF) ► Attach to Form 990, 990-EZ, or 990-PF. The treasury ► Go to www.irs.gov/Form990 for the latest information.					
Name of the organization TIMOTHY T DAY FOUNDAT:	ON INC		Employer i	dentification number		
Organization type (chec	k one):		86-0870436	5		
	,					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt ch	aritable trust not treated as a _l	orivate foundation			
	☐ 527 political organization					
Form 990-PF	✓ 501(c)(3) exempt private	foundation				
	4947(a)(1) nonexempt ch	aritable trust treated as a priva	ate foundation			
	☐ 501(c)(3) taxable private	501(c)(3) taxable private foundation				
	cion filing Form 990, 990-EZ, or 990 property) from any one contributor.					
Special Rules						
under sections 50 received from any	on described in section 501(c)(3) fil 9(a)(1) and 170(b)(1)(A)(vi), that cl one contributor, during the year, to 11, or (ii) Form 990-EZ, line 1. Co	necked Schedule A (Form 990 otal contributions of the greate	or 990-EZ), Part II, line 13	, 16a, or 16b, and that		
during the year, to	on described in section 501(c)(7), (a otal contributions of more than \$1,0 ne prevention of cruelty to children	00 exclusively for religious, ch	aritable, scientific, literary,			
during the year, c If this box is chec purpose. Don't co	on described in section 501(c)(7), (a contributions <i>exclusively</i> for religious ked, enter here the total contributio mplete any of the parts unless the le, etc., contributions totaling \$5,00	s, charitable, etc., purposes, buns that were received during the General Rule applies to this o	ut no such contributions tot ne year for an e <i>xclusively</i> r rganization because it rece	aled more than \$1,000. eligious, charitable, etc., eived <i>nonexclusively</i>		
990-EZ, or 990-PF), but i	that isn't covered by the General I t must answer "No" on Part IV, line rt I, line 2, to certify that it doesn't r	2, of its Form 990; or check the	ne box on line H of its Form			
For Paperwork Reduction Ac	t Notice, see the Instructions	Cat. No. 30613X	Schedule B (Form 99	0, 990-EZ, or 990-PF) (2019)		

for Form 990, 990-EZ, or 990-PF.

\$

Payroll

Noncash

(Complete Part II for noncash

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

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)			Page 4
	rganization r DAY FOUNDATION INC			mployer identification number 6-0870436
Part III	than \$1,000 for the year from any one conti	ributor. Complete c total of exclusively instructions.) > \$	olumns <mark>(a)</mark> througl [,] religious, charitab	n section 501(c)(7), (8), or (10) that total more h (e) and the following line entry. For ole, etc., contributions of \$1,000 or less for
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and z	` '	nsfer of gift Relatio	nship 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, and Z		nsfer of gift Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	-	se of gift	(d) Description of how gift is held
	Transferee's name, address, and Z		nsfer of gift Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) U:	se of gift	(d) Description of how gift is held
,	Transferee's name, address, and z		nsfer of gift Relatio	nship of transferor to transferee
			Sch	nedule B (Form 990, 990-EZ, or 990-PF) (2019)