Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990PFfor instructions and the latest information

Open to Public Inspection

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	ilendar year 2019 or tax year beginning of foundation		, 2019, and e	naing	A Employer identifi	, ZU , cation number
	RTER, JOHN W. T/U/W				1	6030315
Numbe	r and street (or PO box number if mail is not delivered to	street address)	Room/	suite	B Telephone number	
Numbe	Tand street (or F O box humber if main is not delivered to	311001 00010337	11001117	Juito	2 velephone number	,, (300 111011 00110113)
622	25 S RAINBOW BLVD STE 300				98	8-730-4933
	town, state or province, country, and ZIP or foreign posta	l code				0-130-4333
011, 01	(out.), state of province, estating, and all or release	,			C If exemption applica	
T 7\ C	S VEGAS, NV 89118				pending, check here	
	eck all that apply: Initial return	Initial return	of a former public c	harity		
G CIR	Final return	Amended re	·	arrey	D 1 Foreign organizati 2 Foreign organizati	
	Address change	Name chang			85% test, check h	ere and attach
H Cha	eck type of organization X Section 501(71	computation .	
	Section 4947(a)(1) nonexempt charitable trust		rivate foundation	4	E If private foundation	.
		unting method: X C			1)(1)(A), check here • •
		ther (specify)	7,00,00			n a 60-month termination ((1)(B), check here
		column (d), must be on c	ash basis)			
	Analysis of Revenue and Expenses (The				I	(d) Disbursements
	total of amounts in columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net investment	((c) Adjusted net	for charitable purposes
	may not necessarily equal the amounts in column (a) (see instructions))	books	income		income	(cash basis only)
1				\neg		
2	Check Y if the foundation is not required to					
; 3	Interest on savings and temporary cash investments-					
• 4	Dividends and interest from securities	52,086	52,08	6.		STMT
5a	Gross rents		,			
	Net rental income or (loss)					
	Not gain or (loss) from sale of assets not on line 10	47,693				(ED
<u>و</u> و					RECEI	VLU-10
Revenue	Capital gain net income (from Part IV, line 2) .		47,69	3.		SC
ž 8	Net short-term capital gain				12 MAY 20	2020
9	Income modifications				8 11/11	<u> </u>
10a	Gross sales less returns and allowances				OGUE	TUT
b	Less Cost of goods sold .	1			UGDL	
С	Gross profit or (loss) (attach schedule)					
11	Other income (attach schedule)					
12	Total Add lines 1 through 11	99,779	. 99,77	$\overline{}$		
13	Compensation of officers, directors, trustees, etc	27,232	. 24,50			2,72
Seg 14	Other employee salaries and wages		NO		NONE	
15	Pension plans, employee benefits		NO	ИН	NONE	
Expens 15 16a	•	022	370	NT I	37037	
o o	Accounting fees (attach schedule) STMT. 2	939	. NO	NE	NONE	93
貟	Other professional fees (attach schedule)			_	· · · · · ·	
Administrative 12 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Interest	4 001	1 10	+		
18	Taxes (attach schedule) (see instructions, 3.	4,901	1,10	" 		
Ē 19	Depreciation (attach schedule) and depletion.			+		
	Occupancy		NO	NE	NONE	
21 22	Travel, conferences, and meetings		NO:		NONE	
	Printing and publications	10		1417	NONE	1
E 23	Other expenses (attach schedule) STMT. 4.	10	•	+-		
23 24 25 25	Total operating and administrative expenses.	33,082	25,61	7	NONE	3,67
g	Add lines 13 through 23	95,000		' 	NONE	95,00
-	Contributions, gifts, grants paid	128,082		7	NONE	
26	Total expenses and disbursements Add lines 24 and 25	120,002	. 23,61	' 	NONE	20,014
27	Subtract line 26 from line 12	-28,303				
a		-20,303	74,16	2	<u> </u>	
þ	Adjusted net income (If negative, enter -0-)	·····	/4,10			
~	rajusted her medille (ii negative, citter -0-/+ +		1	1		

JSA For Paperwork Reduction Act Notice, see instructions.

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P	art II	Balance Sheets	Attached schedules and amounts in the	Beginning of year		End o	f 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	ng				
			cash investments	44,371.	73,0)57.	73,057
						,	
			otful accounts >				
			otful accounts				
	5	Grants receivable					
			officers, directors, trustees, and other				·
i		disqualified persons (atta	ach schedule) (see instructions)				
	7	Other notes and loans in	-cervable (anach schedule) 🕨	30 - 30 -	-		, eq. (1)
		Less allowance for doub	otful accounts NONE				
ts	8		se				
Assets	9	Prepaid expenses and de	eferred charges				
ğ	10a	Investments - U S and state	government obligations (attach schedule)				
	b	Investments - corporate	stock (attach schedule)		-		
	С	Investments - corporate	bonds (attach schedule)				
	11	Investments - land, building and equipment basis	s, >	_			,
		Less accumulated deprecia (attach schedule)	ition ▶				
	12		loans				
	13	Investments - other (atta	ch schedule)	1,648,1 <u>50</u> .	1,590,9	96.	2,030,115
	14	Land, buildings, and equipment basis	<u> </u>				
ı		Less accumulated deprecia (attach schedule)	tion				
ļ		Other assets (describe	<u> </u>				
	16	Total assets (to be	completed by all filers - see the				
		instructions Also, see pa	age 1, item I)	1,692,521.	1,664,0	153.	2,103,172
ı	17	Accounts payable and a	ccrued expenses		 :		
	18	Grants payable					
Liabilities	19	Deferred revenue					
ilit	20	Loans from officers, directo	rs, trustees, and other disqualified persons	=			
iab	21	• •	tes payable (attach schedule)				
7	22	Other liabilities (describe	· • •				
					.,		
_	23		s 17 through 22)		N	ONE	
nces			FASB ASC 958, check here				
ınc		and complete lines 24,					
ale	24		r restrictions				
9	24 25		estrictions				
Ľ		Foundations that do not for and complete lines 26 thro	billow FASB ASC 958, check here				
rΕ		•	•	1,692,521.	1,664,0	153	
9	26		apal, or current funds	1,092,321.	1,004,0		
ets	20		land, bldg , and equipment fund		١		
155	27 28 29	•	ated income, endowment, or other funds	1,692,521.	1,664,0	53	
it /	30		net assets/fund balances (see	1,002,021.	1,001,0	٠, ر	
Net	30			1,692,521.	1,664,0	153	,
_	art III		nges in Net Assets or Fund Bala			·	
			palances at beginning of year - Part		must agree with		
•			d on prior year's return)			1	1,692,521.
2			line 27a			2	-28,303.
			ded in line 2 (itemize) ► ROUNDING		· · · · · · · · ·	3	10.
					 	4	1,664,228.
			line 2 (itemize) ► MUTUAL FUND TIMINO			5	175.
			alances at end of year (line 4 minus l		o), line 29	6	1,664,053.

	990-PF (2019)					Page 3
Par	Capital Gains	and Losses for Tax on Inve	estment Income			
		scribe the kind(s) of property sold (for e		(b) How acquired	(c) Date acquired	(d) Date sold
	2-story bi	rick warehouse, or common stock, 200	shs MLC Co)	P - Purchase D - Donation		(mo , day, yr)
1 a	PUBLICLY TRADED	SECURITIES				
b						
С						
d						
e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo	
a	932,113.		884,420.			47,693.
ь						
C						
d						
е						
	Complete only for assets sh	lowing gain in column (h) and owned b	by the foundation on 12/31/69	(1)	Gains (Col (h) ga	un minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ı), ıf any		(k), but not less t Losses (from co	han -0-) or
				<u> </u>		47,693.
a	·	<u> </u>		<u> </u>		<u> </u>
<u>b</u>				 		•••
<u>c</u>					-	
<u>d</u>			· · · · · · · · · · · · · · · · · · ·	 		
<u>e</u>				 		
2	Capital gain net income	or (net capital loss)	ain, also enter in Part I, line 7			45 603
_		(II ti	oss), enter -0- in Part I, line 7	2		47,693.
3		ain or (loss) as defined in sections				
	If gain, also enter in P	'art I, line 8, column (c). See ins	structions. If (loss), enter -0- in $\}$			
	Part I, line 8	<u> </u>	<u> </u>	3		
Par	t V Qualification U	Inder Section 4940(e) for Red	uced Tax on Net Investment I	ncome		
	ction 4940(d)(2) applies,		outable amount of any year in the b	ase perio	d ⁷]Yes █ X No
If "Ye	es," the foundation doesn	't qualify under section 4940(e) D	o not complete this part.			
1	Enter the appropriate an	nount in each column for each yea	ar, see the instructions before making	ng any en	tries.	
	(a)	(b)	(c)		(d) Distribution ra	***
Cale	Base period years ndar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		(col (b) divided by	
	2018	73,694.	2,045,940.			0.036020
	2017	58,050.	2,013,866.			0.028825
	2016	83,686.	1,891,500.			0.044243
	2015	108,025.	2,005,383.	—		0.053868
	2013	133,717.	2,132,760.			0.062697
	£0 14	133,111.	2,100.	 		0.002071
_	Takal after 4	۱۱		2		0.225653
2				-	<u> </u>	0.223033
3		, ,	de the total on line 2 by 5.0, or by			0 045101
	the number of years the	foundation has been in existence	ıf less than 5 years	3	_ 	0.045131
4	Enter the net value of no	oncharitable-use assets for 2019 for	rom Part X, line 5	4	1,	<u>9</u> 81,132.
E	Multiply line 4 by line 2			5		89,410.
5	, ,				<u>-</u>	
6	Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		742.
7	Add lines 5 and 6			7		90,152.
8	Enter qualifying distribu	tions from Part XII, line 4		8		98,672.
	If line 8 is equal to or g Part VI instructions.	greater than line 7, check the box	on Part VI, line 1b, and complete	that part	using a 1% tax	rate. See the

orm 9	990-PF (2019)	<u>/</u>	<u>95-6030315</u>			P	age 4
Part	VI Excise Tax Based on Investment Income (Section	n 4940(a), 49	340(b), 4940(e), or	4948 - see	instru	ction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here	and enter "	N/A" on line 1)				4
	Date of ruling or determination letter (attach copy					_	_ '
b	Domestic foundations that meet the section 4940(e) requirements	in Part V, check	. (1		7	742.
	here ► X and enter 1% of Part I, line 27b						
	All other domestic foundations enter 2% of line 27b Exempt for					_	الما
	Part I, line 12, col (b)		i				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxa	able foundations	only, others, enter -0-)	2		Ŋ	ONE
3	Add lines 1 and 2			3		7	742.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxa			4		<u>l</u>	ONE
5	Tax based on investment income. Subtract line 4 from line 3. If zero or	r less, enter -0		5		7	742.
	Credits/Payments						í
а	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	2,560.				
b	Exempt foreign organizations - tax withheld at source	6b	NONE	2			į
c	Tax paid with application for extension of time to file (Form 8868)	6c	NONE NONE	2			
d	Backup withholding erroneously withheld	6d					
	Total credits and payments Add lines 6a through 6d			7		2,5	60.
	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 of	owed		9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the	amount overpaid	۱	10			318.
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶		744. Refunded ▶	11		<u> 1,0</u>)74.
Part	VII-A Statements Regarding Activities	· · · · · · · · · · · · · · · · · · ·					
1a	During the tax year, did the foundation attempt to influence	any national, s	tate, or local legislation	on or did it		Yes	No
	participate or intervene in any political campaign?				1a		X
b	Did it spend more than \$100 during the year (either direct	tly or indirectly) for political purpos	es? See the		Į l	
	instructions for the definition				1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed descript	tion of the activ	vities and copies of a	any materials			
	published or distributed by the foundation in connection with the activity	ties					•
C	Did the foundation file Form 1120-POL for this year?				1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955)		•				
	(1) On the foundation > \$ (2) On foundation	on managers 🕨 💲					
е	Enter the reimbursement (if any) paid by the foundation during	the year for p	olitical expenditure tax	(imposed			
	on foundation managers \$					-	
2	Has the foundation engaged in any activities that have not previously be	een reported to th	e IRS?		2		Х
	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported	to the IRS, in	ı ıts governing instrur	nent, articles		-	
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach	a conformed cop	y of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or $\frac{1}{2}$	more during the y	ear ⁷		4a_		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?				4b_		
5	Was there a liquidation, termination, dissolution, or substantial contract	ion during the yea	ır ⁷		5_		Х
	If "Yes," attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 thro	ough 4945) satisf	ied either				
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing		· ·			٠, -	
	conflict with the state law remain in the governing instrument?				6	X	
	Did the foundation have at least \$5,000 in assets at any time during the			and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is regis	stered See instruc	itions ►				
b	If the answer is "Yes" to line 7, has the foundation furnished	a copy of Form	n 990-PF to the Atto	rney General			
	(or designate) of each state as required by General Instruction G7If "No,				8b	X	
	Is the foundation claiming status as a private operating foundation				_	. 7	
	4942(j)(5) for calendar year 2019 or the tax year beginning in						
	complete Part XIV				9		X
	Did any persons become substantial contributors during the ta				[Ī	
	names and addresses	,		J	10		Х

7

Par	VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
-	Website address ► N/A			
14	The books are in care of ► SEE STATEMENT 7 Telephone no ►			
	Located at ► ZIP+4 ►			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		•	\Box
	and enter the amount of tax-exempt interest received or accrued during the year			ш
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of		'	
	the foreign country >			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	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			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	•		ŀ
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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			l
	termination of government service, if terminating within 90 days)			
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			l.
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1ь		X
	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		'	_
	were not corrected before the first day of the tax year beginning in 2019?	1c		Х
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))			ĺ
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			ĺ
	6d and 6e) for tax year(s) beginning before 2019? Yes X No			ĺ
	If "Yes," list the years			
b	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			
	all years listed, answer "No" and attach statement - see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			i '
	at any time during the year?			1
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or			
	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			-
	foundation had excess business holdings in 2019)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			ا
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X

Part	VII-B Statements Regarding Activities	for Which Form 4	1720 May Be Req	uired (continued)			
5a	During the year, did the foundation pay or incur any am	ount to				Yes	No
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (section	n 4945(e))?	. Yes X N	0		
	(2) Influence the outcome of any specific public el	ection (see section	4955), or to carry o	n,			
	directly or indirectly, any voter registration drive?			. Yes X N	o		
	(3) Provide a grant to an individual for travel, study, or o	other similar purposes	?	. Yes X N	o		
	(4) Provide a grant to an organization other than a						
	section 4945(d)(4)(A)? See instructions			. Yes X N	o		
	(5) Provide for any purpose other than religious, of						
	purposes, or for the prevention of cruelty to children	or animals?		. Yes X N	o		
ь	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions described i	ın		
	Regulations section 53 4945 or in a current notice rega	rding disaster assistar	nce? See instructions .		5b		
	Organizations relying on a current notice regarding disa	ster assistance, check	here		· 🔲		
C	If the answer is "Yes" to question 5a(4), does the	foundation claim e	exemption from the	ax]		
	because it maintained expenditure responsibility for the	grant?		Yes N	о		· ·
	If "Yes," attach the statement required by Regulations so	ection 53 4945-5(d)					
6a	Did the foundation, during the year, receive any fu	nds, directly or indi	rectly, to pay premiu	ms			
	on a personal benefit contract?			. Yes X N	o _	_	
b	Did the foundation, during the year, pay premiums, dire	ctly or indirectly, on a	personal benefit contra	act ⁷	. 6b		X
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was the foundation a pa	arty to a prohibited tax	x shelter transaction?.	. Yes X N	o	_	
b	If "Yes," did the foundation receive any proceeds or have	e any net income attri	butable to the transact	ion ⁷	. 7b		
8	Is the foundation subject to the section 4960 tax on pay	ment(s) of more thar	1,000,000 in				
	remuneration or excess parachute payment(s) during th						<u> </u>
Par	Information About Officers, Directors	ors, Trustees, Fou	undation Manage	s, Highly Paid Em	ployees,		
1	List all officers, directors, trustees, and foundation	on managers and t	heir compensation.	See instructions.			
-	(a) Name and address	(b) Title, and average hours per week	(If not paid,	(d) Contributions to employee benefit plans	(e) Expension		
2.1.19W		hours per week devoted to position	(c) Compensation (If not paid, enter -0-)				
	FARGO BANK N.A.	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation			es
		hours per week devoted to position	(If not paid,	employee benefit plans			
	FARGO BANK N.A.	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation			es
	FARGO BANK N.A.	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation			es
	FARGO BANK N.A.	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation			es
	FARGO BANK N.A.	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation			es
	FARGO BANK N.A.	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation			es
100 N	FARGO BANK N.A.	hours per week devoted to position TRUSTEE 1	(If not paid, enter -0-)	e 1 - see instructi	Other all	lowance	-0-
100 N	FARGO BANK N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 Compensation of five highest-paid employees "NONE."	hours per week devoted to position TRUSTEE 1 (other than those (b) Title, and average	(If not paid, enter -0-) 27,232. se included on lin	employee benefit plans and deferred compensation - 0 -	other all	one,	-0- enter
100 N	FARGO BANK N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 Compensation of five highest-paid employees	hours per week devoted to position TRUSTEE 1 (other than those	(If not paid, enter -0-)	e 1 - see instructi (d) Contributions to employee benefit plans and deferred	Other all	one,	-0- enter
100 N	FARGO BANK N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 Compensation of five highest-paid employees "NONE."	hours per week devoted to position TRUSTEE 1 (other than those than those hours per week	(If not paid, enter -0-) 27,232. se included on lin	e mployee benefit plans and deferred compensation - 0 - e 1 - see instructi (d) Contributions to employee benefit	ons). If n	one,	-0- enter
2 (a)	FARGO BANK N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 (other than those than those hours per week	(If not paid, enter -0-) 27,232. se included on lin (c) Compensation	e 1 - see instructi (d) Contributions to employee benefit plans and deferred compensation	ons). If n (e) Expensother all	one,	-0- enter
100 N	FARGO BANK N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 (other than those than those hours per week	(If not paid, enter -0-) 27,232. se included on lin	e 1 - see instructi (d) Contributions to employee benefit plans and deferred	ons). If n (e) Expensother all	one,	-0- enter
2 (a)	FARGO BANK N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 (other than those than those hours per week	(If not paid, enter -0-) 27,232. se included on lin (c) Compensation	e 1 - see instructi (d) Contributions to employee benefit plans and deferred compensation	ons). If n (e) Expensother all	one,	-0- enter
2 (a)	FARGO BANK N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 (other than those than those hours per week	(If not paid, enter -0-) 27,232. se included on lin (c) Compensation	e 1 - see instructi (d) Contributions to employee benefit plans and deferred compensation	ons). If n (e) Expensored other all	one,	-0- enter
2 (a)	FARGO BANK N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 (other than those than those hours per week	(If not paid, enter -0-) 27,232. se included on lin (c) Compensation	e 1 - see instructi (d) Contributions to employee benefit plans and deferred compensation	ons). If n (e) Expensored other all	one,	-0- enter
2 (a)	FARGO BANK N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 (other than those than those hours per week	(If not paid, enter -0-) 27,232. se included on lin (c) Compensation	e 1 - see instructi (d) Contributions to employee benefit plans and deferred compensation	ons). If n (e) Expensored other all	one,	-0- enter
2 (a)	FARGO BANK N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 (other than those than those hours per week	(If not paid, enter -0-) 27,232. se included on lin (c) Compensation	e 1 - see instructi (d) Contributions to employee benefit plans and deferred compensation	ons). If n (e) Expensored other all	one,	-0- enter
2 (a)	FARGO BANK N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 (other than those than those hours per week	(If not paid, enter -0-) 27,232. se included on lin (c) Compensation	e 1 - see instructi (d) Contributions to employee benefit plans and deferred compensation	ons). If n (e) Expensored other all	one,	-0- enter
2 (a)	FARGO BANK N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 (other than those than those hours per week	(If not paid, enter -0-) 27,232. se included on lin (c) Compensation	e 1 - see instructi (d) Contributions to employee benefit plans and deferred compensation	ons). If n (e) Expensored other all	one,	-0- enter
2 (a)	FARGO BANK N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE 1 (other than those than those hours per week devoted to position	(If not paid, enter -0-) 27,232. se included on lin (c) Compensation NONE	e 1 - see instructi (d) Contributions to employee benefit plans and deferred compensation NONE	other all	one,	-0- enter

Page 7

	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation

ON.	<u> </u>	NONE
		-
		-
otal	number of others receiving over \$50,000 for professional services	NONI
	IX-A Summary of Direct Charitable Activities	
List	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N	ONE	
_		
_ —		
2_		
_	· · · · · · · · · · · · · · · · · · ·	
3_		
_		
. –		
4		
_		
art	IX-B Summary of Program-Related Investments (see instructions)	
	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 <u>N</u>	ONE	
_		
2	<u> </u>	
AII	other program-related investments. See instructions	
	ONE	
3 <u>N</u>		

Par	Minimum Investment Return (All domestic foundations must complete this part. Foreisee instructions.)	gn found	lations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
	Average monthly fair market value of securities	1a	1,915,397.
b	Average of monthly cash balances	1b	95,905.
C	Fair market value of all other assets (see instructions)	1c	NONE
d		1d	2,011,302.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2 .	NONE
3	Subtract line 2 from line 1d	3	2,011,302.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	30,170.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,981,132.
6	Minimum investment return. Enter 5% of line 5	6	99,057.
Par	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations, check here ▶ and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	99,057.
	Tax on investment income for 2019 from Part VI, line 5 2a 742.		
 h	Income tax for 2019. (This does not include the tax from Part VI.) 2b		
c		2c	742.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	98,315.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	98,315.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1	7	98,315.
Par	t XII • Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		1a	98,672.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		•
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the		
a		3a	NONE
	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	98,672.
5	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	5	742.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	97,930.
U	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	qualifies for the section 4940(e) reduction of tax in those years.	iculatiliy	whether the loundation

Page 9

Рa	rt XIII Undistributed Income (see instri	uctions)			
1	Distributable amount for 2019 from Part XI,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
•	line 7				98,315.
2	Undistributed income, if any, as of the end of 2019				30/3131
	Enter amount for 2018 only			88,797.	
	• Total for prior years 20,20		NONE	00,757.	
	Excess distributions carryover, if any, to 2019	7 . 11	NONE		
	170370			,	
	MONTH				ì
	MONTH				
	MONTH				!
	MONTH				j
	. 110111 2010 1 1 1 1 1	NONE	The Late 1	a aprilia a se	t continue to
	Total of lines 3a through e	NONE	· · · · · · · · · · · · · · · · · · ·		
4	Qualifying distributions for 2019 from Part XII,				,
	line 4 ▶ \$98,672.			00 707	1
а	Applied to 2018, but not more than line 2a			88,797.	<u>.</u>
b	Applied to undistributed income of prior years		NONE		Į
	(Election required - see instructions)	·	NONE		i i
C	Treated as distributions out of corpus (Election	,,,,,,,,			1
	required - see instructions)	NONB			0.075
d	Applied to 2019 distributable amount	770777			9,875.
	Remaining amount distributed out of corpus Excess distributions carryover applied to 2019	NONB			<u>l</u>
3	(If an amount appears in column (d), the same				,,,,,,,,
	amount must be shown in column (a))	NONB	rimbu a bir	1.001030 1	NONE
6	Enter the net total of each column as indicated below:		tillingers on i	16011341 1	, (1000) 1 144 (*) 11
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	NONB			·
b	Prior years' undistributed income Subtract				
	line 4b from line 2b		NONE		
С	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		NONE		<u> </u>
d	Subtract line 6c from line 6b Taxable				į
	amount - see instructions		NONE		
е	Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount - see instructions				
٤	Undistributed income for 2019 Subtract lines	,			
'	4d and 5 from line 1 This amount must be				
	distributed in 2020				88,440.
7	Amounts treated as distributions out of corpus				1
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				ļ
	required - see instructions)	NONI	1 m		The contract of the contract of
8	Excess distributions carryover from 2014 not				•
	applied on line 5 or line 7 (see instructions)	NONI		1 11911	ļ
9	Excess distributions carryover to 2020.	"			1
	Subtract lines 7 and 8 from line 6a	NONE			
10	Analysis of line 9				
	Excess from 2015 NONE			}	1
	Excess from 2016 NONE		1		
	Excess from 2017 NONE				
	Excess from 2018 NONE				
	Excess from 2019 NONE				

Par	t XIV Private Ope	erating Foundations	(see instructions a	nd Part VII-A, questi	on 9)	NOT APPLICABI
1 a	If the foundation has	received a ruling or d	etermination letter that	t it is a private opera	ating	
	foundation, and the ruling					
ь	Check box to indicate		_			(3) or 4942(j)(5)
			is a private operating		3000001 4342())	137 01 4342(J)(37
Za	Enter the lesser of the ad- justed net income from Part	Tax year	"	Prior 3 years	1 1 2 2 2 2	(e) Total
	I or the minimum investment	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
	return from Part X for each					
	year listed					
ь	85% of line 2a					
	Qualifying distributions from Part					
٠	XII, line 4, for each year listed					
d	Amounts included in line 2c not					
-	used directly for active conduct					
	of exempt activities					
е	Qualifying distributions made					
	directly for active conduct of exempt activities Subtract line					
	2d from line 2c			_		
3	Complete 3a, b, or c for the]		
а	"Assets" alternative test - enter					
_	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section					
	4942(j)(3)(B)(i)					
В	"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					
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on securities					
	loans (section 512(a)(5)),				`	
	or royalties) (2) Support from general					
	public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(m)					
	(3) Largest amount of sup- port from an exempt					\ \ \
	organization					
	(4) Gross investment income .					
Par	t XV Supplemen	tary Information (C	Complete this part	only if the founda	tion had \$5,000 o	r more in assets at
	any time de	uring the year - see	instructions.)	-		
1	Information Regarding	Foundation Manager	s:			
	List any managers of			e than 2% of the tota	l contributions receiv	ed by the foundation
	before the close of any					,
	•					
_	NONE	Alea farradation rela	100/	fabo stock of a soun	aration for an accordi	· loves service of the
D	List any managers of ownership of a partner			•		range portion of the
	•	ship of other entity) of	which the loundation	i ilas a 10 % oi greater	milerest.	
	NONE					
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarshi	p, etc., Programs:		
	Check here ▶ if t	he foundation only i	makes contributions	to preselected charm	table organizations a	ind does not accept
	unsolicited requests for					
	complete items 2a, b, o				-	
	The name, address, an			person to whom appli	ications should be add	ressed
•		•	oman address of the	person to triioin appi	outions stroute so due	
	SEE STATEMENT 8		mitted and inform -ti-	n and materials there	bould indude	
a	The form in which app			on and materials they s	snoula include	
	SEE ATTACHED ST	TATEMENT FOR LI	NE 2			
C	Any submission deadli	nes·		···		
	SEE ATTACHED ST	TATEMENT FOR IT	NE 2			
			-			
<u> </u>	Any restrictions or li	mitations on awards	such as by geogra	ophical areas charita	ble fields, kinds of	institutions or other
•	factors:			arodo, oriarita		
		דו מסים שומשמשמח	NE O			

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or contribution Amount status of recipient Name and address (home or business) a Paid during the year JOSEPH LEARNING LAB 1316 EAST 29TH STREET SIGNAL HILL CA 90755 NONE PC GENERAL OPERATING 10,000. THERAPEUTIC RIDING CENTER OF HUNTINGTON BEACH 18381 GOLDENWEST ST, Huntington Beach CA 926 NONE PC GENERAL OPERATING 10,000. EDUCATION EQUALS OPPORTUNITY TOO FOUNDATION Long Beach CA 90802 NONE PC GENERAL OPERATING 5,000. FOODBANK OF SOUTHERN CALIFORNIA PC GENERAL OPERATING 1444 SAN FRANCISCO AVE Long Beach CA 90813 NONE 10,000. PHOTOCHARITY NONE PC GENERAL OPERATING PO BOX 177 Cardiff CA 92007 10,000. SYMPHONIC JAZZ ORCHESTRA P.O. BOX 1421 Culver City CA 90232-1421 NONE PC GENERAL OPERATING 5,000. URBAN COMMUNITY OUTREACH INCORPORATED 241 CEDAR AVE Long Beach CA 90802 NONE PC GENERAL OPERATING 6,000. VOICE FOR THE ANIMALS 2633 LINCOLN BLVD #202 Santa Monica CA 90405 NONE PC GENERAL OPERATING 10,000. YOUNG HORIZONS NONE PC GENERAL OPERATING 10,000. 501 ATLANTIC AVENUE Long Beach CA 90802 FIRST CHRISTIAN CHURCH OF LONG BEACH 440 ELM AVE LONG BEACH CA 90802 NONE PC GENERAL OPERATING 19,000. 95,000. b Approved for future payment

ightharpoons

Total

Part XVI-	A Analysis of Income-Produ	ucing Acti	ivities				
	amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	1 (e)	
J	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)	
-				 		(See instructions)	
	-						
			-	ı			
			,		,		
f						 	
g Fees	and contracts from government agencies						
_	ship dues and assessments				-		
	n savings and temporary cash investments						
	Is and interest from securities			14	52,086.		
5 Net renta	al income or (loss) from real estate						
a Debt-	financed property						
b Not c	debt-financed property						
-	I income or (loss) from personal property						
7 Other in	vestment income					<u></u>	
8 Gain or (lo	oss) from sales of assets other than inventory			18	47,693.		
9 Net inco	me or (loss) from special events · · ·		_				
	ofit or (loss) from sales of inventory					<u> </u>	
	venue a			_	_		
			-				
				-			
		<u>-</u>					
e	Add columns (b), (d), and (e)				99,779.		
	dd line 12, columns (b), (d), and (e)		<u> </u>	<u> </u>			
	eet in line 13 instructions to verify calcu					77,117.	
Part XVI-			ccomplishment of Ex	cempt Pur	poses		
Line No.	Explain below how each activity					itad importantly to the	
	accomplishment of the foundation						
	accomplishment of the foundation	on a exemp	t purposes (other than i	by providing		s). (See mistructions)	
		·					
			 				
							
					- .		
							
			-				
			NOT APPLICABLE				
			NOT APPLICABLE	<u> </u>	1		
			**				
			.				
		<u> </u>	<u> </u>				
				-			
					· -	-	
	\				<u>-</u>		

Part 2	XVII	Information Organization		Transfers	to and	Transact	ions and	Relationships	With	Noncha	ritabl	e Ex	emp
II	n sect	organization d	rectly or indi		-		-	any other organ				Yes	No
		rs from the repo	-					of 			1a(1)		X
											1a(2)		Х
b 0	ther t	ransactions:											
(1) Sale	es of assets to a	noncharitable	exempt org	ganization						1b(1)		X
												-	X
													X
												1	X
												I	X
					_								X
	_			_				Column (h) ob				fair m	
V	alue o	of the goods, ot	her assets, o	services gi	iven by th	e reporting	foundatio	Column (b) shan If the founda e of the goods,	tion red	eived less	than	faır n	narke
(a) Line	e no	(b) Amount involv	ed (c) Na	me of nonchari	table exempt	torganization	(d) D	escription of transfer	s, transac	tions, and sha	ing arra	angeme	nts
					 			·····					
	-+												
		_										-	
	$\overline{}$												
	\perp												
d	lescrib	ed in section 50 complete the f	01(c) (other the	an section 5	i01(c)(3))	or in sectio	n 527?	1		[es 🔼	 No
		(a) Name of organ	nization		(b) Type	of organization	en	(c	Descripti	on of relations	ship		
-			· · · · · · · · · · · · · · · · · · ·		_				-				
	<u> </u>				_								
	Under	penalties of perjury, and complete beclar	declare that I have	e examined this than taxpayer)	return, includi is based on all	ing accompanyi information of w	ng schedules a hich preparer ha	nd statements, and to as any knowledge	the best of	_			
Sign	V	Vells Fargo f	Bank, N.A.		04/07	/2020	_ TRU	STEE		May the IRS with the pre		s this	
Here	Sign	ature of officer or tru	ıstee		Date		Title			See instruction		Yes	No
		Print/Type prepare	er's name	Pre	eparer's signa	ature		Date	Che	eck X if F	PTIN		
Paid		JOSEPH J.			1	L/1	_	- 04/07/20				5160)3
Prepa	rer		► PRICEWAT		OOPERS	LLP			irm's EIN		4008		
Use (Only		►600 GRAN										

15219

412-355-6000 Form **990-PF** (2019)

Phone no

PITTSBURGH,

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	3,414. 7,145. 13,015. 1,926. 13,304. 12,409.	52,086.
REVENUE AND EXPENSES PER BOOKS	3,414. 7,145. 13,015. 1,926. 13,304. 12,409. 872.	52,086.
DESCRIPTION	USGI REPORTED AS NONQUALIFIED DIVIDENDS FOREIGN DIVIDENDS DOMESTIC DIVIDENDS OTHER INTEREST US GOVERNMENT INTEREST REPORTED AS QUALI NONQUALIFIED FOREIGN DIVIDENDS NONQUALIFIED DOMESTIC DIVIDENDS SECTION 199A DIVIDENDS	TOTAL

Tq.

FEES	11 11 11 11
COUNTING	
I - ACC	
PART]	
990PF,	
FORM	

ABLE SES	, ! !	939.	939.
CHARITABLE PURPOSES	1 1 1 1 1 1 1	1 1 1	11 11 11 11 11 11
ADJUSTED NET INCOME	1 1 1 1		NONE
NET INVESTMENT INCOME	1 1 1 1		NONE
REVENUE AND EXPENSES PER BOOKS		. 686	939.
		(NON-ALLOC	TOTALS
DESCRIPTION		TAX PREPARATION FEE (NON-ALLOC	

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TAXES	
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NET INVESTMENT INCOME	358. 358. 594. 1,109.
REVENUE AND EXPENSES PER BOOKS	157. 1,232. 2,560. 358. 594.
DESCRIPTION	FOREIGN TAXES FEDERAL TAX PAYMENT - PRIOR YE FEDERAL ESTIMATES - PRINCIPAL FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED

,	REVENUE AND EXPENSES PER BOOKS	10.	10.
FORM 990PF, PART I - OTHER EXPENSES	Z ı	/STATE TAX	TOTALS
FORM 990PF,	DESCRIPTION	FILING FEE/STATE	

10.

CHARITABLE PURPOSES 10.

ESCRIPTION	COST/ FMV C OR F	ENDING BOOK VALUE	END I NG FMV
	1 1 1 1 1		!!!!
64287705 ISHARES S&P MIDCAP	Ū	31,217.	76,146.
1369Y852 COMM SERV S	ָט		,
1369Y209 AMEX HEALTH CARE SP	י ס	42,651.	86,072.
0203H859 AOR MANAGED FUTURE	י ט		
6434G103 ISHARES CORE MSCI	ָ ט	119,586.	129,562.
1369Y803 AMEX TECHNOLOGY	บ	7,10	2,30
9260C703 BLACKROCK GL L/S	บ		
812C0803 JPMORGAN HIGH YI	ט		
7803M168 JOHN HANCOCK	บ		
21937827 VANGUARD	บ	8,42	9,02
22042858 VANGUARD	Ü	2,49	2,55
21937819	U	139, 598.	
64287606 ISHARES S&	U	6,11	4,76
3872T885 ASG GLOBAL ALTE	U		
6090F100 INVESCO OPTIMUM	บ		
1369Y704 AMEX INDUSTRIP	Ü	1,19	9,71
7234N765 TCW EMRG MKTS	υ	75,726.	900
1369Y605 AMEX FINANCIAI	ບ	1,02	8,766
1369Y100	U		
1641Q763 FIDELITY NEW P	Ü		
1369Y407	U	9,16	0,32
79919307 T ROWE PR REAL ES	υ	17,467.	896
64287655	ບ	4,36	8,136
1369Y506	ט		
4128R608 NEUBERGER BERMAN	Ü		
7958B402 T ROWE PRICE INS	ບ		
8463X863 SPDR DJ WILSHIRE	D	3,91	9,12
VANCE GL	<u>ت</u> ا	60,171.	59,301.
21943858 VANGUARD EUROPE	U	123,27	9,09

Ŋ

FORTER, JOHN W. T/U/W FORM 990PF, PART II - OTHER INVESTMENTS ===================================

2,030,115.

1,590,996.

_TOTALS

30,860. 39,666. 245,547. 59,020. 34,389.

9

FORM 990PF, PART VII-A, LINE 14 - BOOKS ARE IN THE CARE OF

NAME: WELLS FARGO BANK N.A

ADDRESS: 100 N MAIN ST MAC D4001-117

WINSTON SALEM, NC 27101

TELEPHONE NUMBER: (888)730-4933

PORTER, JOHN W. T/U/W FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME:

WELLS FARGO BANK

ADDRESS:

6325 S RAINBOW BLVD STE 300

LAS VEGAS, NV 89118

RECIPIENT'S PHONE NUMBER: 888304933

FORM, INFORMATION AND MATERIALS:

APPLICATIONS MUST BE SUBMITTED THROUGH THE ONLINE GRANT

APPLICATION FORM OR ALTERNATIVE ACCESSIBLE APPLICATION DESIGNED FOR AS SUBMISSION DEADLINES:

APPLICATIONS ARE ACCEPTED YEAR-ROUND, BUT MUST BE SUBMITTED BY AUGUST RESTRICTIONS OR LIMITATIONS ON AWARDS:

APPLICATIONS MUST BE SUBMITTED THROUGH THE ONLINE GRANT APPLICATION FO

FEDERAL FOOTNOTES

PART VIII: INFORMATION ABOUT OFFICERS, DIRECTORS, TRUSTEES, FOUNDATION MANAGERS, HIGHLY PAID EMPLOYEES, AND CONTRACTORS. THE CORPORATE TRUSTEE'S COMPENSATION REPORTED IN COLUMN (C) IS CALCULATED BASED ON PERIODIC MARKET VALUES AND/OR THE APPLICABLE FEE AGREEMENT. IT IS NOT DETERMINED ON AN HOURLY BASIS AND THE REFERENCE TO ONE HOUR PER WEEK IS AN ESTIMATE ONLY. CORPORATE TRUSTEE SERVICES INCLUDE, BUT ARE NOT LIMITED TO, ADMINISTRATIVE SERVICES SUCH AS FIDUCIARY ACCOUNTING, CUSTODY OF ASSETS, COMPLYING WITH TAX FILING REQUIREMENTS, COMPLYING WITH DISTRIBUTION PROVISIONS, AND COMPLYING WITH FEDERAL AND STATE LAWS APPLICABLE TO PRIVATE FOUNDATIONS, PLUS ASSET MANAGEMENT SERVICES SUCH AS CREATING ASSET ALLOCATION STRATEGIES, INVESTMENTS REPORTING AND REALLOCATING AND REBALANCING OF PORTFOLIOS AS NECESSARY.
