Form **99.0-PF**

Return of Private Foundation

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

2949105115007 1

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public DO

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

			endar year 2019 or tax year beginning	02/	01 , 2019 ,	and ending		01/31, 20 20
	Na	me of	foundation				A Employer identific	ation number
			NING FOUNDATION TRUST				<u>6105634</u>	
	Νι	ımber	and street (or P O box number if mail is not delivered to	street address)		Room/suite	B Telephone number	r (see instructions)
		632	5 S RAINBOW BLVD STE 300		88	8-730-4933		
	Cit	City or town, state or province, country, and ZIP or foreign postal code						
		T. 7\ C'	VEGAS, NV 89118				C If exemption application pending, check here.	
	_		ck all that apply Initial return	Initial return o	of a former p	ublic charity	D 1 Foreign organization	and shoot have
•	_	00	Final return Address change	X Amended retu	ırn	,	2 Foreign organization 85% test, check he	ons meeting the
	H	Che	ck type of organization X Section 501(E If private foundation	
. ¥	1	_	ection 4947(a)(1) nonexempt charitable trust	Other taxable priv	vate foundat		under section 507(b)	~ ! I
	ı	-		inting method: X Ca	sh Acc	rual	F If the foundation is in	
			· ' '	her (specify)			under section 507(b)	(1)(B), check here .
				olumn (d), must be on ca	sn basis)			(d) Disbursements
.	_	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net inve		(c) Adjusted net income	for charitable purposes (cash basis only)
202	<u>3</u> –	1						<u> </u>
G		2	Check X if the foundation is not required to attach Sch B					
c		3	Interest on savings and temporary cash investments.		•			
C <	MAR	4	Dividends and interest from securities	92,102.		2,102.		STMT 1
4	≥		Gross rents	74,651.	7	<u>4,651.</u>		<u> </u>
Ç	\supset	ь	Net rental income or (loss) 55,978.	02 404				<u> </u>
1	SRANNEU	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1,413,479.	83,484.	. <u> </u>			
•	₩	7	Capital gain net income (from Part IV, line 2) .	RECEIVE	D 8	3,484.		<u> </u>
	8	8	Net short-term capital gain	1000111	- 			
		9	Income modifications	8 FFB 0 2 2				
			and allowances	© FEB 0 2 2	- 1001			
			Less Cost of goods sold		14			
7			Gross profit or (loss) (attach schedule) Other income (attach schedule)	OGDEN,	<u>UT</u>			-
202		11 12	Total. Add lines 1 through 11 · · · · · · ·	250,237.	25	0,237.		
8	_	13	Compensation of officers, directors, trustees, etc	66,173.		0,338.		25,835
<u></u>	ès	14 15 16a	Other employee salaries and wages			NONE	NONE	
FEB	Sus	15	Pension plans, employee benefits			NONE	NONE	
	ğ	16a	Legal fees (attach_schedule)					
T b	E E	ь	Accounting fees (attach schedule) STMT . 2	983.		NONE	NONE	983
Received In Batching Ogden	Administrative	C	Other professional fees (attach schedule)					
9.E	tra	17	Interest	4 400	- · · · · · · · · · · · · · · · · · · ·	2 200		
22	ī.	18	Taxes (attach schedule) (see instructions). 3.	4,428.		3,369.		
6	E	19	Depreciation (attach schedule) and depletion.					<u> </u>
			Occupancy			NONE	NONE	
	and	21	Printing and publications			NONE	NONE	
	<u> </u>	23	Other expenses (attach schedule) STMT. 4.	18,718.	1	8,718.		
	ĭţin	23 24 25	Total operating and administrative expenses.					
	ērs	1	Add lines 13 through 23	90,302.	6	2,425.	NONE	26,818
	Ö	25	Contributions, gifts, grants paid	216,000.				216,000
	_	26	Total expenses and disbursements Add lines 24 and 25	306,302.	6	2,425.	NONE_	242,818
		27	Subtract line 26 from line 12:					
		1	Excess of revenue over expenses and disbursements	-56,065.	10	7 012	 	
		1	Net investment income (if negative, enter -0-)			7,812.		
		C	Adjusted net income (if negative, enter -0-).					

Pa	art II	'Balance Sheets	Attached schedules and amounts in the	Beginning of year	End o	of year
		_	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ng		1,741.	1,741.
			cash investments	10,530.	5,068.	
		Accounts receivable				
		'	otful accounts			
			otful accounts ▶			
١						
	-		officers, directors, trustees, and other		<u>-</u>	
1			ach schedule) (see instructions)			
		· ·	eceivable (attach schedule)		-	1
			otful accounts ►NONE			
s			6e			
Assets			eferred charges			
As			government obligations (attach schedule).			
			stock (attach schedule)	-		
		•	bonds (attach schedule)		· - ·	
	11	Investments - land, building	is.		. =	
		and equipment hasis Less accumulated deprecia	ation •			
		(attach schedule)	1			1,741.
	12 13	Investments - mortgage	loans	3.351.184.	3.307.109.	
	14	Land, buildings, and	▶	0,000,000	0/00:/200	
		equipment basis Less accumulated deprecia	ation			
	15	(attach schedule) Other assets (describe	>)			
	16	Total assets (to be	completed by all filers - see the			
	. •		age 1, item I)	3,361,714.	3,313,918.	4,370,354.
П	17		occrued expenses	•		I
	18					1
S	19	* *				
ij	20		ors, trustees, and other disqualified persons.			
Liabilities	21		otes payable (attach schedule)			
Lia	22	• •	e ▶}}			1
		• • • • • • • • • • • • • • • • • • • •				
	23	Total liabilities (add line	es 17 through 22)		NONE	<u> </u>
5			v FASB ASC 958, check here			
nces		and complete lines 24,				ļ
lan	24	Net assets without done	or restrictions			
Ва	25		estrictions · · · · · · · · · · · · · · · ·			
Þ			ollow FASB ASC 958, check here			
Ξ		and complete lines 26 thr				}
5	24 25 26	Capital stock, trust princ	cipal, or current funds	3,361,714.	3,313,918.	
S	27		r land, bldg , and equipment fund			
Assets	28		lated income, endowment, or other funds			
As	29	Total net assets or fund	d balances (see instructions) [3,361,714.	3,313,918.	,
Net	30	Total liabilities and	. (
Z		instructions)		3,361,714.	3,313,918.	<u> </u>
	art li		nges in Net Assets or Fund Bala			
	Tota	al net assets or fund	balances at beginning of year - Part I			,
	end	-of-year figure reporte	d on prior year's return)		<u>1</u>	3,361,714.
	Ente	er amount from Part I,	line 27a			-56,065.
			ded in line 2 (itemize) ► COST BASIS AL		3	9,222.
					4	3,314,871.
5	Dec	reases not included in	n line 2 (itemize) ► MUTUAL FUND TIMING	DIFFERENCE	5	953.
_6	Tota	al net assets or fund b	alances at end of year (line 4 minus li	ne 5) - Part II, column (b), line 29 6	3,313,918.
						Form 990-PF (2019)

Page 3

Par:	t IV Capital Gains	and Losses for Tax on Inve	stment Income			
		scribe the kind(s) of property sold (for exrick warehouse, or common stock, 200 s		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	PUBLICLY TRADED	SECURITIES		D DOMOCION		
b						
С						
<u>d</u>						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) mini	
a	1,413,479.		1,329,995.			83,484.
<u>b</u>						
<u>c</u>						
<u>d</u>						
<u> </u>		Land and the second by				
	Complete only for assets sr	nowing gain in column (h) and owned by			Gains (Col (h) ga (k), but not less t	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		Losses (from co	
a						83,484.
<u>b</u>		** .				
<u>c</u>						
<u>d</u>						
<u>е</u>		15	Bad Land	- 1		
2	Capital gain net income	or (not capital loce)	on, also enter in Part I, line 7 soss), enter -0- in Part I, line 7	2		83,484.
3		ain or (loss) as defined in sections 1				
	•	Part I, line 8, column (c). See inst	•			
				3		
		Inder Section 4940(e) for Reduce private foundations subject to the				
Was		leave this part blank. the section 4942 tax on the distrib 't qualify under section 4940(e). Do		ase perio	d?	Yes X No
1		mount in each column for each year		ig any en	tries.	
	(a)	(b)	(c)		(d) Distribution ra	***
Cale	Base period years andar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		(col (b) divided by	
	2018	242,667.	4,919,995.			0.049323
	2017	335,119.	5,055,603.			0.066287
	2016	192,537.	6,323,951.			0.030446
	2015	170,465.	6,124,514.			0.027833
	2014	98,534.	3,463,686.			0.028448
			'			0 000007
2		(d)		2		0.202337
3	•	io for the 5-year base period - divid				0 040467
	the number of years the	e foundation has been in existence i	If less than 5 years	3		0.040467
4	Enter the net value of n	oncharitable-use assets for 2019 from	om Part X, line 5	4	4,	917,912.
5	Multiply line 4 by line 3			5		199,013.
6	Enter 1% of net investm	nent income (1% of Part I, line 27b)		6		1,878.
7						200,891.
8		itions from Part XII, line 4				242,818.
3	If line 8 is equal to or a Part VI instructions.	greater than line 7, check the box	in Part VI, line 1b, and complete		using a 1% tax	

orm S	990-PF (2019) 76-6105634			age 4
Part	YI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstru	ctions	s)
1a .	Exempt operating foundations described in section 4940(d)(2), check here			1
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1,8	78.
	here X and enter 1% of Part I, line 27b			- 1
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		N	ONE
3	Add lines 1 and 2		1,8	78.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			ONE
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		<u>1,8</u>	78.
6	Credits/Payments			}
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 3,124.]
b	Exempt foreign organizations - tax withheld at source			- {
C	Tax paid with application for extension of time to file (Form 8868) 6c NONE			1
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		3,1	24.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1,2	46.
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ► 1,246. Refunded ► 11			
	t VII-A Statements Regarding Activities	- 1		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			37
	Instructions for the definition	1b		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ►\$ (2) On foundation managers ►\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers \$			X
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	3		X
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	4a		<u>X</u>
4a	•	4b		
_	If "Yes," has it filed a tax return on Form 990-T for this year?	5		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
6				
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that 			
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х	
7	Enter the states to which the foundation reports or with which it is registered. See instructions.			
8a	TX			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		X	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV if "Yes,"			Х
	complete Part XIV	9_	$\vdash \vdash$	├_^
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10		Х
	names and addresses	10		47

Form **990-PF** (2019)

Part	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 th	е		
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	. 11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualifie	d		
	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	7 13	X	
	Website address ► N/A			
14	The books are in care of ▶ SEE STATEMENT 8 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		•	• <u> </u>
	and enter the amount of tax-exempt interest received or accrued during the year		l v	I
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other author		Yes	No
	over a bank, securities, or other financial account in a foreign country?		1	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name	of		
D	the foreign country			<u> </u>
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Yes	No
_	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	163	1.40
па	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			
	(1) Engage in the sale of exchange, or leasing of property with a disqualified person?		1	
	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			
	termination of government service, if terminating within 90 days)		1	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described i	∩ <u></u>	.	.
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	. 1b		X
	Organizations relying on a current notice regarding disaster assistance, check here			[
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		-	اــــا
	were not corrected before the first day of the tax year beginning in 2019?	. 1c	₩-	X,
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	e		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			
L .	If "Yes," list the years ▶,,,,,,,,,,,	,		
b	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) t			
	all years listed, answer "No" and attach statement - see instructions)			
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	-		1
-	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation of	ır	1	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	e	1	
	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 th		-	لــــا،
	foundation had excess business holdings in 2019)		+	
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes		+-	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize if	l l	-	اا
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019	7 4b	OO DE	X

Part	VII-B Statements Regarding Activities f	or Which Form 4	720 May Be Req	uired (continued)			_
5a 、	During the year, did the foundation pay or incur any amo	ount to				Yes	No
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (sectio	n 4945(e)) ⁷	. Yes X N	0		
	(2) Influence the outcome of any specific public ele	ection (see section	4955), or to carry or	n,			
	directly or indirectly, any voter registration drive?			. Yes X N	0		
	(3) Provide a grant to an individual for travel, study, or o	ther similar purposes	,	. Yes X N	ю		1
	(4) Provide a grant to an organization other than a	charitable, etc., org	janization described i	n			ļ
	section 4945(d)(4)(A)? See instructions	=			o		j
	(5) Provide for any purpose other than religious, cl						1
	purposes, or for the prevention of cruelty to children				lo		
b	If any answer is "Yes" to 5a(1)-(5), did any of the				ın .	1	
	Regulations section 53 4945 or in a current notice regar				1		
	Organizations relying on a current notice regarding disas	ster assistance, check	here		•		1
c	If the answer is "Yes" to question 5a(4), does the						
•	because it maintained expenditure responsibility for the		•		lo		
	If "Yes," attach the statement required by Regulations se	_]	- 1
6a	Did the foundation, during the year, receive any fur		ectly, to pay premiur	ms			ŀ
	on a personal benefit contract?	•	. , , ,	Yes X N	lo		
ь	Did the foundation, during the year, pay premiums, direct			ict ⁷	. 6b		\overline{x}
-	If "Yes" to 6b, file Form 8870	.,					J
7a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?	. Yes X N	lo		
Ь	If "Yes," did the foundation receive any proceeds or have				. 7b		
8	Is the foundation subject to the section 4960 tax on pay						- 1
•	remuneration or excess parachute payment(s) during the			. Yes X N	lo .		į
Part	Information About Officers, Directo				ployees,		•
	and Contractors						
1		n managers and the	heir compensation	See instructions			
1	List all officers, directors, trustees, and foundatio	(b) Title, and average	(c) Compensation	See instructions. (d) Contributions to	(e) Expen	se accou	ınt,
1					(e) Expen other al	se accou owance	
	List all officers, directors, trustees, and foundatio	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans			
WELLS	List all officers, directors, trustees, and foundatio (a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans			
WELLS 100 N	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A.	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation			s
WELLS 100 N GERAR	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101	(b) Title, and average hours per week devoted to position TRUSTEE	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation			s
WELLS 100 N GERAR 4970	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation			s
WELLS 100 N GERAR 4970 NANCY	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation			s
WELLS 100 N GERAR 4970 NANCY	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096 ROBINSON	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1 CO-TRUSTEE	(c) Compensation (if not paid, enter -0-) 48,173.	(d) Contributions to employee benefit plans and deferred compensation - 0 -			-0- -0-
WELLS 100 N GERAR 4970 NANCY 1 LON	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096 ROBINSON G TIMBERS LANE, HOUSTON, TX 77024	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1 CO-TRUSTEE 1	(c) Compensation (If not paid, enter -0-) 48,173. 9,000.	(d) Contributions to employee benefit plans and deferred compensation - 0 - - 0 -	Other al	owance	-0- -0-
WELLS 100 N GERAR 4970 NANCY 1 LON	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096 ROBINSON G TIMBERS LANE, HOUSTON, TX 77024 Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1 CO-TRUSTEE 1	(c) Compensation (If not paid, enter -0-) 48,173. 9,000.	(d) Contributions to employee benefit plans and deferred compensation - 0 - - 0 -	Other al	owance	-0- -0-
WELLS 100 N GERAR 4970 NANCY 1 LON	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096 ROBINSON G TIMBERS LANE, HOUSTON, TX 77024	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1 CO-TRUSTEE 1 (other than those	(c) Compensation (If not paid, enter -0-) 48,173. 9,000.	(d) Contributions to employee benefit plans and deferred compensation - 0 0 0 0 - (d) Contributions to	other al	one, (-0- -0- -0-
WELLS 100 N GERAR 4970 NANCY 1 LON	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096 ROBINSON G TIMBERS LANE, HOUSTON, TX 77024 Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1 CO-TRUSTEE 1 (other than thos	(c) Compensation (If not paid, enter -0-) 48,173. 9,000.	(d) Contributions to employee benefit plans and deferred compensation - 0 0 0 - (d) Contributions to employee benefit	ions). If n	one, (-0- -0- -0-
WELLS 100 N GERAR 4970 NANCY 1 LON	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096 ROBINSON G TIMBERS LANE, HOUSTON, TX 77024 Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1 CO-TRUSTEE 1 (other than those)	(c) Compensation (If not paid, enter -0-) 48,173. 9,000. 9,000.	(d) Contributions to employee benefit plans and deferred compensation - 0 0 0 0 - (d) Contributions to	ions). If n	one, (-0- -0- -0-
WELLS 100 N GERAR 4970 NANCY 1 LON	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096 ROBINSON G TIMBERS LANE, HOUSTON, TX 77024 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1 CO-TRUSTEE 1 (other than thos	(c) Compensation (If not paid, enter -0-) 48,173. 9,000. 9,000. se included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - 0 - - 0 - - 0 - (d) Contributions to employee benefit plans and deferred compensation	ions). If n	one, (-0- -0- -0-
WELLS 100 N GERAR 4970 NANCY 1 LON	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096 ROBINSON G TIMBERS LANE, HOUSTON, TX 77024 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1 CO-TRUSTEE 1 (other than thos	(c) Compensation (If not paid, enter -0-) 48,173. 9,000. 9,000.	(d) Contributions to employee benefit plans and deferred compensation - 0 - - 0 - - 0 - (d) Contributions to employee benefit plans and deferred	ions). If n	one, (-0- -0- -0-
WELLS 100 N GERAR 4970 NANCY 1 LON	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096 ROBINSON G TIMBERS LANE, HOUSTON, TX 77024 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1 CO-TRUSTEE 1 (other than thos	(c) Compensation (If not paid, enter -0-) 48,173. 9,000. 9,000. se included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - 0 - - 0 - - 0 - (d) Contributions to employee benefit plans and deferred compensation	ions). If n	one, (-0- -0- -0-
WELLS 100 N GERAR 4970 NANCY 1 LON	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096 ROBINSON G TIMBERS LANE, HOUSTON, TX 77024 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1 CO-TRUSTEE 1 (other than thos	(c) Compensation (If not paid, enter -0-) 48,173. 9,000. 9,000. se included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - 0 - - 0 - - 0 - (d) Contributions to employee benefit plans and deferred compensation	ions). If n	one, (-0- -0- -0-
WELLS 100 N GERAR 4970 NANCY 1 LON	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096 ROBINSON G TIMBERS LANE, HOUSTON, TX 77024 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1 CO-TRUSTEE 1 (other than thos	(c) Compensation (If not paid, enter -0-) 48,173. 9,000. 9,000. se included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - 0 - - 0 - - 0 - (d) Contributions to employee benefit plans and deferred compensation	ions). If n	one, (-0- -0- -0-
WELLS 100 N GERAR 4970 NANCY 1 LON	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096 ROBINSON G TIMBERS LANE, HOUSTON, TX 77024 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1 CO-TRUSTEE 1 (other than thos	(c) Compensation (If not paid, enter -0-) 48,173. 9,000. 9,000. se included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - 0 - - 0 - - 0 - (d) Contributions to employee benefit plans and deferred compensation	ions). If n	one, (-0- -0- -0-
WELLS 100 N GERAR 4970 NANCY 1 LON	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096 ROBINSON G TIMBERS LANE, HOUSTON, TX 77024 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1 CO-TRUSTEE 1 (other than thos	(c) Compensation (If not paid, enter -0-) 48,173. 9,000. 9,000. se included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - 0 - - 0 - - 0 - (d) Contributions to employee benefit plans and deferred compensation	ions). If n	one, (-0- -0- -0-
WELLS 100 N GERAR 4970 NANCY 1 LON	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096 ROBINSON G TIMBERS LANE, HOUSTON, TX 77024 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1 CO-TRUSTEE 1 (other than thos	(c) Compensation (If not paid, enter -0-) 48,173. 9,000. 9,000. se included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - 0 - - 0 - - 0 - (d) Contributions to employee benefit plans and deferred compensation	ions). If n	one, (-0- -0- -0-
WELLS 100 N GERAR 4970 NANCY 1 LON	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096 ROBINSON G TIMBERS LANE, HOUSTON, TX 77024 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1 CO-TRUSTEE 1 (other than thos	(c) Compensation (If not paid, enter -0-) 48,173. 9,000. 9,000. se included on line (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation - 0 - - 0 - - 0 - (d) Contributions to employee benefit plans and deferred compensation	ions). If n	one, (-0- -0- -0-
WELLS 100 N GERAR 4970 NANCY 1 LON 2 (a)	List all officers, directors, trustees, and foundatio (a) Name and address FARGO BANK, N.A. MAIN ST MAC D4001-117, WINSTON SALEM, NC 27101 D H STAFFORD III YARWELL DR, HOUSTON, TX 77096 ROBINSON G TIMBERS LANE, HOUSTON, TX 77024 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 1 CO-TRUSTEE 1 CO-TRUSTEE 1 (other than those hours per week devoted to position	(c) Compensation (If not paid, enter -0-) 48,173. 9,000. 9,000. (c) Compensation NONE	(d) Contributions to employee benefit plans and deferred compensation - 0 0 0 0 - 0 - 0 - 0 - 0	ions). If n (e) Expenother al	one, (-0- -0- -0-

(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Composition (d) Type of service (e) Composition (e) Composition (e) Composition (f) Type of service (e) Composition (f) Type of service (e) Composition (f) Type of service (f) Composition (f) Type of se	ons. If none, enter "NONE."	Five highest-paid independent contractors for professional services. See inst
otal number of others receiving over \$50,000 for professional services. Part 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 organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1NONE 2 2 3 4 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 Am 1NONE		
otal number of others receiving over \$50,000 for professional services	NON	
art 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 Am Am Am Am Am Am Am Am Am A	NON	<u> </u>
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. NONE 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 Amage of the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amage of the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		
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. NONE 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 Amage of the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amage of the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		
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. NONE 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 Amaging Texas and the number of Experiments (see instructions) Amaging Texas and the number of Experiments (see instructions) Amaging Texas and the number of Experiments (see instructions)		
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. NONE 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 Amage of the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amage of the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		
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. NONE 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 Amage of the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amage of the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		
art 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 organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 NONE 2		
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 1NONE 2 3 4 art 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 Am 1NONE	▶ NON	
art 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 Am Am NONE		
2 art 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 Am 1NONE 2	Expenses	
art 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 Am Am 1 NONE		ONE
art 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 Am Am 1 NONE		
art 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 Am Am Am 2		
art 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 Am NONE 2		
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 Am NONE 2		
art 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 Am Am 2		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Am NONE 2		·
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Am NONE 2		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Am NONE 2		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Am NONE 2		
1 NONE	Amount	
2		
All other program-related investments See instructions		
All other program-related investments See instructions		
		other program-related investments. See instructions
3NONE		ONE

Par	X. Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign foui	ndations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	4,829,348.
	Average of monthly cash balances	1b	163,456.
	Fair market value of all other assets (see instructions)	1c	NONE
d		1d	4,992,804.
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	4,992,804.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	74,892.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	4,917,912.
6	Minimum investment return. Enter 5% of line 5	6	245,896.
Par	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part)	ndations	
1	Minimum investment return from Part X, line 6	1	245,896.
	Tax on investment income for 2019 from Part VI, line 5 2a 1,878		
b		1	
c		2c	1,878.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	244,018.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	244,018.
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	244,018.
			<u> </u>
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	242,818.
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.		
а	Suitability test (prior IRS approval required)	3a	NONE
b	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	242,818.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	1,878.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	240,940.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	lculating	whether the foundation
	qualifies for the section 4940(e) reduction of tax in those years	•	

Form **990-PF** (2019)

Pai	t XIII Undistributed Income (see instru	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2019 from Part XI,	Corpus	Years prior to 2018	2018	2019
	line 7				244,018.
2	Undistributed income, if any, as of the end of 2019				
	Enter amount for 2018 only			212,601.	
	Total for prior years 20,20,20		NONE		<u> </u>
	Excess distributions carryover, if any, to 2019	[
	From 2014		•		ļ
	From 2015 NONE				
	From 2016 NONE From 2017 NONE				
	NONE				
	From 2018	NONE			
	Qualifying distributions for 2019 from Part XII,	110112			
7	line 4 ► \$ 242,818.				
а	Applied to 2018, but not more than line 2a		j	212,601.	
	Applied to undistributed income of prior years				
D	(Election required - see instructions)		NONE		}
С	Treated as distributions out of corpus (Election				
	required - see instructions)	NONB			
d	Applied to 2019 distributable amount				30,217.
	Remaining amount distributed out of corpus Excess distributions carryover applied to 2019	NONB			
5	(If an amount appears in column (d), the same	NONE			MONTE
	amount must be shown in column (a))	NONB			NONE
6	Enter the net total of each column as indicated below:				
2	Corpus Add lines 3f, 4c, and 4e Subtract line 5	NONB			
	Prior years' undistributed income Subtract				1
U	line 4b from line 2b		NONE		
С	Enter the amount of prior years' undistributed				
	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		NONE		
	amount - see instructions	- -	NONE		
е	Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount - see				
	instructions				<u> </u>
f	Undistributed income for 2019 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2020				213,801.
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)	NONE			
8	Excess distributions carryover from 2014 not				
	applied on line 5 or line 7 (see instructions)	NONE			<u></u>
9	Excess distributions carryover to 2020.	NICATE			
	Subtract lines 7 and 8 from line 6a	NONE			
	Analysis of line 9 Excess from 2015 NONE				1
	NONE			}	}
	Excess from 2016 NONE Excess from 2017 NONE)
	Excess from 2018 NONE				Į.
	Excess from 2019 · · · NONE				

Form **990-PF** (2019)

Par	t XIV* Private Ope	erating Foundations	(see instructions ar	nd Part VII-A, question	on 9)	NOT APPLICABL
	If the foundation has					
ıa	foundation, and the ruling				I	
	_					1/0) 1000/1/5
b	Check box to indicate v	whether the foundation	is a private operating t	foundation described in	section 4942(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(0, 1012)
	I or the minimum investment					
	return from Part X for each					
	year listed					
ь	85% of line 2a					
С	Qualifying distributions from Part					
	XII, line 4, for each year listed .					
d	Amounts included in line 2c not					
	used directly for active conduct					
	of exempt activities					
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					
	alternative test relied upon					
а	"Assets" alternative test - enter	!				
	(1) Value of all assets					
	(2) Value of assets qualifying under section	}				
	4942(i)(3)(B)(i)					
b	"Endowment" alternative test-	İ				
	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	1				
	loans (section 512(a)(5)),					
	or royalties) (2) Support from general	·		-	-	
	public and 5 or more					
	exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt organization					
	(4) Gross investment income -					
Da	· · · · · · · · · · · · · · · · · · ·	tary Information (Complete this part	only if the founda	tion had \$5 000 (or more in assets at
Га		uring the year - see		only if the loaned	ition naa 40,000 t	or more in assets at
					- "	
	Information Regarding			00/ 5.1	1	
а	List any managers of	the foundation who I	have contributed mor	e than 2% of the tota	i contributions recei	ived by the foundation
	before the close of any	/ tax year (but only if th	ney have contributed r	nore than \$5,000). (So	ee section 507(a)(2).)	1
	NONE					
	List any managers of	the foundation who	own 10% or more of	f the stock of a corp	oration (or an equal	ly large portion of the
~	ownership of a partner					, , , , , , , , , , , , , , , , , , , ,
	, ,	5p 5. 55. 5,, 5				
	NONE					
		<u></u>				
2	Information Regarding	J Contribution, Grant,	Gift, Loan, Scholarshi	ip, etc., Programs:		
	Check here ► X If 1	the foundation only	makes contributions	to preselected chari	table organizations	and does not accept
	unsolicited requests f	or funds. If the found	ation makes gifts, gra	ents, etc., to individua	ils or organizations u	under other conditions,
	complete items 2a, b,			, . ,	Ü	·
	The name, address, an			norsen te whom appl	ications should be as	Idraccad:
а	The name, address, an	a telephone number o	or email address of the	person to whom appi	ications should be ac	iuresseu.
				·		
b	The form in which app	lications should be sul	bmitted and information	on and materials they :	should include:	
	Any submission deadli	nes:				
·	, my submission ucaun	1100.				
					 , ,	
d	_ `	imitations on awards	, such as by geogra	aphical areas, charita	ible fields, kinds of	f institutions, or other
	factors:					

Supplementary Information (continued) -Part XV-3 Grants and Contributions Paid During the Year or Approved for Future Payment
Recipient
Recipient
Name and address (home or business)

Recipient
Show any relationship to any foundation manager or substantial contributor
Status of recipient
Purpose of grace contribution Purpose of grant or contribution Amount a Paid during the year National Society to Prevent Blindness 225 W WACKER DR #400 CHICAGO IL 60606 NONE PC GENERAL OPERATING 10,000. RETINA RESEARCH FOUNDATION NONE PC GENERAL OPERATING 100,000. 1977 BUTLER BOULEVARD HOUSTON TX 77030 BRIARWOOD-BROOKWOOD, INC. NONE PC GENERAL OPERATING 100,000. 1752 FM 1489 BROOKSHIRE TX 77423 UNIVERSITY OF TEXAS FOUNDATION PC GENERAL OPERATING 6,000. 1601 RIO GRANDE ST AUSTIN TX 78701 NONE 216,000. b Approved for future payment ▶ 3b Total

	Analysis of Income-Produ	cing Acti	vities			
-	mounts unless otherwise indicated		ited business income	Excluded by	section 512, 513, or 514	(e)
4 Dansan	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
						(Occ mandenona)
_					_	
			-			
.1						
					-	
f						
g Fees a	and contracts from government agencies					
2 Members	hip dues and assessments					
	eavings and temporary cash investments •					
	s and interest from securities			14	92,102.	
5 Net renta	I income or (loss) from real estate					
a Deht-f	inanced property					
b Not d	ebt-financed property		······	16	55,978.	
6 Net rental	income or (loss) from personal property					
7 Other inv	estment income			10	02.404	
8 Gain or (lo	ss) from sales of assets other than inventory			18	83,484.	
	ne or (loss) from special events · · ·					-
	ofit or (loss) from sales of inventory					
	renue: a					
				-		-
e	Add columns (b), (d), and (e)			 	231,564.	-
Part XVI- Line No.						
▼	accomplishment of the foundation					
▼						
V						
V						
V						
V				by providing		
			t purposes (other than	by providing		
			t purposes (other than	by providing		
			t purposes (other than	by providing		
			t purposes (other than	by providing		
			t purposes (other than	by providing		
			t purposes (other than	by providing		
			t purposes (other than	by providing		
			t purposes (other than	by providing		
			t purposes (other than	by providing		
			t purposes (other than	by providing		uted importantly to the sign of the sign o

Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt

Part XVII

,		Organizations								
1	Did the	organization directl	y or indirectly	engage in any of the f	ollowing wit	h any othe	r organization described	1	Yes	No
							7, relating to politica			
	organiz	ations?								
а			foundation to	a noncharitable exemp	t organizatio	n of:				
								. 1a(1)		X
										Х
h	• •	ransactions:								
_			charitable exen	nnt organization				. 1b(1		X
										X
										X
										X
										X
										X
									\	X
							n (b) should always sho		four p	
a							foundation received le			
							goods, other assets, or			
	1						of transfers, transactions, and s			
(a) L	ine no	(b) Amount involved	(c) Name of	noncharitable exempt organiza	tion (c) Description	or transfers, transactions, and s	lainiy air	angeme	7111.5
						••••				
										
										_
		 						_		
							<u> </u>		_	
				·						
_										
				·-·						
2a	Is the	foundation directly	or indirectly at	filiated with, or related	l to, one or	more tax-e	exempt organizations			_
	describ	ped in section 501(c)	(other than se	ction 501(c)(3)) or in se	ection 527?.			Y	′es 🔝	X No
b	If "Yes,	," complete the follow	ving schedule.						_	
		(a) Name of organizatio	n	(b) Type of organ	nization		(c) Description of relati	onship	_	
			•							
							•			
	Unglei	r penalties of perjury, I decla	ire that I have exam	ined this return, including accon	npanying schedule	es and statemer	nts, and to the best of my know	edge and	belief, if	t is true
c:_			DepaS.V.P. than	taxpayer) is based on all information	on or which prepare	er nas any know	eage	.00 1		
Sig	" ▶\	Nells Fargo Ban		01/06/202		RUSTEE	May the	preparer		return below?
Her	e Tag	nature of officer or trustee	N,-14./\tau	Date	Title		See instruc		Yes	No
	_						<u> </u>			
		Print/Type preparer's na	me	Preparer's signature		Date	Check X r	PTIN		
Paid	d	JOSEPH J. CA			le-	_ 01	/06/2021 self-employed	P011	2516	03
Pre	parer			OUSECOOPERS LLP				3-4008	_	
	Only		O GRANT S'				Tames Env P Is		<u> </u>	
J 30	. Ciliy				15219		Phone no 412	-355-6	5000	
		<u> </u>	TTSBURGH,	PA	12713		Phone no 412	Form 99		(2010
										12013

SECURITIES	
FROM	
INTEREST	
AND	
DIVIDENDS	
PART I	
990PF,	
FORM	

NET INVESTMENT INCOME	92,102.
REVENUE AND EXPENSES PER BOOKS	92,102.
DESCRIPTION	DIVIDENDS AND INTEREST FROM SECURITIES TOTAL

FORM 990PF, PART I - ACCOUNTING FEES	o II		
DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME
TAX PREPARATION FEES	983.	HON	NON

983.

CHARITABLE PURPOSES

983.

NONE

TAXES
I
Н
PART
990PF,
FORM

NET INVESTMENT INCOME	1 1 1 1	3,369.	3,369.
REVENUE AND EXPENSES PER BOOKS	 	3,369. 1,059.	4,428.
DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	FOREIGN TAX PAID ESTIMATED EXCISE TAX PAID	TOTALS

~

5:25:08
٦
/2021
/90/
01/
V17U
HNE165

	NET INVESTMENT INCOME	4. 18,67
	REVENUE AND EXPENSES PER BOOKS	45. 18,673.
FORM 990PF, PART I - OTHER EXPENSES	DESCRIPTION	ADR FEES ROYALTY EXPENSES

18,718.

TOTALS

- OTHER INVESTMENTS PART II FORM 990PF,

DESCRIPTION	COST/ FMV C OR F	ENDING BOOK VALUE	ENDING FMV
06 MANULIFE FIN	υt	25,765.	31,775.
*IQ/63 FIDELIIY NEW MKKIS	ۍ ر	000	ر ر
56H437 COLUMBIA SEL	; ر∵	α, υ4 	42,311
JGR102 AT & T INC	ပ (5,44 7	0,554
57410	ນ ເ	16,535. 17,546	17,440. 28.215
26/108 WALL DISKEL 457108 ELT LITLIY &) ບ	6,50	5,833
75P101 EOG RESOURCES,	U	1,760	5,821
25H100 JPMORGAN CHASE	U	8,66	3,209
570702 BERSHIRE HATHAWAY I	U		
30N101 COMCAST CORP CLAS	_U		
88Y508 INV BALANCE RISK	ָט	1	(
53X863 SPDR DJ WIL	ט ו	160	131
076102 HOME DEPOT INC	C) i	7,46	5,091
556102 THERMO FISHER SCI	v i	2,440	3,80
907818108 UNION PACIFIC CORP	υ c	, 36	2,834
09/10/ 00/103	ی ر		
20103 DODGE CON INT D 974604 OPPENHEIMER DEVELO) U		
207105 MONDELEZ IN	Ü	1,20	0,855
14H758	บ	117,298.	141,120.
78V103	D	3,07	9,729
75R102 CISCO	U	3,04	4,340
195104 ROCHE H	ָט	 	(
12E106 TARGET CORP	r v	3,554	2,923
79K107 ALPHABET I	IJ.	4,850	8,843
870103	<u> </u>	16,402.	26,496.
96/424 CITIGROUP IN	·) (ע, 44ע	מעת ה
/3FIU)	7010	777

Ŋ

MANNING FOUNDATION TRUST

NVESTMENTS	
- OTHER I	
RT II	
PAF	

DESCRIPTION	COST/ FMV C OR F	ENDING BOOK VALUE	ENDING FMV
7833100 APPLE C 5558103 GILEAD 4918104 MICROSO 324P102 UNITEDH 7224107 SUNCOR 956H435 T ROWE 919307 T ROWE	0000000	12,834. 17,475. 37,196. 19,843. 28,592. 292,540. 33,951.	8,144,176
7023105 BOEING COM 243Q205 DIAGEO PLC 5512109 ELECTRONIC 151E109 TOTAL FINA 5217100 HAIN CELES	טטטטטט	0,60 9,44 9,79 3,11 8,74 1,72	7,05 0,48 2,66 0,07 0,58
04314H600 ARTISAN MID CAP FUND 58933Y105 MERCK & CO INC NEW H84989104 TE CONNECTIVITY LTD 654106103 NIKE INC CL B 872540109 TJX COS INC NEW MI0147592 TX COL 5136 AC 151/3 592905764 METROPOLITAN WEST T/ 46434G103 ISHARES CORE MSCI EM 89155H389 TOUCHSTONE MID CAP V 126650100 CVS/CAREMARK CORPORA 911312106 UNITED PARCEL SERVIC 87234N765 TCW EMRG MKTS INCM-I MI0147527 "TX WHART 5312.694 A MI0147584 TX BRAZ 20AZ HOOPER 517834107 LAS VEGAS SANDS CORP	, , , , , , , , , , , , , , , , , , ,	2,888 2,888 3,028 3,02 3,02 3,02 4,13 4,23 4,23 4,77	153,205. 26,059. 21,754. 33,416. 17,181. 377,397. 660,657. 156,273. 165,645. 42,048. 22,567. 120,137.

- OTHER INVESTMENTS PART II FORM 990PF,

DESCRIPTION	COST/ FMV C OR F	ENDING BOOK VALUE	ENDING FMV
4812C0803 JPMORGAN HIGH YIELD	Ū.	,	•
	D	8,00	9,32
192446102 COGNIZANT TECH SOLUT	U	7,82	
LAM	U	11,980.	
693475105 PNC FINANCIAL SERVIC	U	4,45	ı,
88019R385 TMPLTN EM MRKT SM CA	U		
31620M106 FIDELITY NATL INFORM	U	7,60	0,54
G5960L103 MEDTRONIC PLC	υ	1,32	4,24
891160509 TORONTO DOMINION BK	υ	1,68	,44
PIMCO TOTAL RET	υ	299,516.	309,516.
VANGUARD MIDCAP	υ	8,69	,82
00143W859 INV OPP DEVELOP MRKT	U	6,85	8,97
11135F101 BROADCOM INC	U	, 34	
755111507 RAYTHEON CO	U	17,234.	20,989.
	TOTALS	3,307,109.	4,361,804.

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