# SCHIMMED NOV 0 2 2021

Form **990-PF** 

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

2019

OMB No 1545-0047

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

Open to Public Inspection

For	calendar year 2019 or tax year beginning	<u>3/01</u> , <b>2019</b> ,	and ending 2,	<u>/29</u>	, 2020	
Hiir	manity First Corp			Α	Employer identification num 82-4335641	mber
	06 Crimson Lane		Ī	B	Telephone number (see inst	
Blo	oomington, IL 61704		-		(309) 750-524	11
				С	If exemption application is	pending, check here . >
G	Check all that apply Initial return	Initial return of a form	ner public charity	<b>D</b> 1	Foreign organizations, chec	k here
	Final return	Amended return	ļ!			Ц
<del></del>	Address change	Name change		4	2 Foreign organizations meet here and attach computation	
н	Check type of organization. X Section 501 Section 4947(a)(1) nonexempt charitable tr	(c)(3) exempt private for	1 1 1	E	If private foundation status	ســا was terminated :
		ounting method X C		_	under section 507(b)(1)(A)	
(	(from Part II, column (c), line 16)	Other (specify)		F	If the foundation is in a 60	
		column (d), must be on c	ash basis )		under section 507(b)(1)(B)	, check here.
Pai		(a) Revenue and	(b) Net investmen	t	(c) Adjusted net	(d) Disbursements for charitable
	Expenses (The total of amounts in columns (b), (c), and (d) may not	expenses per books	income		income	purposes
	necessarily equal the amounts in column (a) (see instructions).)					(cash basis only)
\ <u>\</u>	1 Contributions, gifts, grants, etc., received (attach schedule)	28,175.				
人人	2 Check ► I If the foundation is not required to attach Sch B			$\dashv$		
	3 Interest on savings and temporary cash investments.	135,582.	135,58	2.	135,582.	·
	4 Dividends and interest from securities 5 a Gross rents	256.	25	6.	256.	
	b Net rental income or (loss)			$\dashv$		
	6 a Net gain or (loss) from sale of assets not on line 10.	573,688.		1	···	
Revenue	b Gross sales price for all 4,321,255.					
Į.	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain		573,68	8.	117 100	
Ę	9 Income modifications			-	117,180.	
	10 a Gross sales less returns and					
	allowances h Less Cost of			-		
	goods sold.  C Gross profit or (loss) (attach schedule)			$\dashv$		
	11 Other income (attach schedule)			$\dashv$		
	12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc	737,701.	709,520	5.	253,018.	
8		20,000.			RECEIVED	
Sestionx	15 Pension plans, employee benefits				REVEIVED	70
Ę	16a Legal fees (attach schedule) See St 1 b Accounting fees (attach sch) See St 2	11,294.		3	DEC 6 0 2020	σ 11,294.
Ù	1	2,620.		è	DEC 2 8 2020	2,620.
<u> </u>	17 Interest			-		<u> </u>
Ţ	18 Taxes (attach schedule)(see instrs) See Stm 3	2,299.	2,29	۶.	OGDEN, UT	
ַקַ.	19 Depreciation (attach schedule) and depletion See Stmt 4	2,690.				
Ė	20 Occupancy	2,050.		$\dashv$		
Δď	21 Travel, conferences, and meetings	590.		Ц.		590.
ָּרַ <u>'</u>	22 Printing and publications 23 Other expenses (attach schedule)	3,822.	·	-		3,822.
<u> </u>	See Statement 5	10,447.				10,142.
2	24 Total operating and administrative		0.00	$\Box$		
Operating and Administrative	expenses. Add lines 13 through 23 25 Contributions, grifts, grants paid Part XV	61,762. 183,412.	2,299	<del>"</del> +		28,468. 183,412.
ğ	26 Total expenses and disbursements.			$\dashv$		
	Add liftes 24 alto 25	245,174.	2,299	}.	0.	211,880.
	27 Subtract line 26 from line 12:  a Excess of revenue over expenses				-	,
	and disbursements	492,527.			٠.	
	b Net investment income (if negative, enter -0 )		707,22	<u>/ .  </u>	353 019	
=	C Adjusted net income (if negative, enter 0-)		TEE 403011 08/		253,018.	Form <b>990-PF</b> (2019)

		Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only		Beginning of year		End of year			
			(See instructions)	(a) Book Value	(b) Book Valu		(c) Fair Market Value		
	1	Cash - non-interest	-bearing	2,150.	2,0	)50.	2,050.		
	2	Savings and tempora	ary cash investments	78,720.	349,3	390.	349,390.		
	3	Accounts receivable	<b>&gt;</b>		<u> </u>				
		Less allowance for o	doubtful accounts ►						
	4	Pledges receivable	·						
	İ	Less allowance for o	doubtful accounts >		•		†		
	5	Grants receivable	<b></b> -			_	<u> </u>		
	6	Receivables due from offic disqualified persons (attac	ers, directors, trustees, and other h schedule) (see instructions)		-				
	7	Other notes and loans rece	eivable (attach sch).				<del>                                     </del>		
	i	Less allowance for o	doubtful accounts				· · · · · · · · · · · · · · · · · · ·		
	8	Inventories for sale of	or use			_			
	9	Prepaid expenses ar	nd deferred charges						
Assets	10	a Investments – U.S a obligations (attach so	and state government chedule) Statement 6	3,266,426.	3,550,0	000	3,556,999.		
SS		b Investments — corporate s	·	48,732.	0,000,0		3,000,333.		
4	١,	c Investments — corporate t	oonds (attach schedule)	107.02.			-		
	11	Investments - land, equipment basis	buildings, and		·		· · · · · · · · · · · · · · · · · · ·		
		Less accumulated depreciation (attach schedule)	ation				-		
	12	Investments - mortg	age loans						
	13	Investments - other	(attach schedule)	885.					
	14	Land, buildings, and	· ·			-			
		Less. accumulated deprecy (attach schedule)	ee Stmt 7 > 2,690.		24,2	:09.	24,209.		
	15 16	Other assets (describe Total assets)							
		see the instructions	Also, see page 1, item I)	3,396,913.	3,925,6	49.	3,932,648.		
	17	Accounts payable an	d accrued expenses						
	18	Grants payable							
8	19	Deferred revenue							
歪	20	Loans from officers, directo	ors, trustees, & other disqualified persons						
iabilities.	21	Mortgages and other notes	payable (attach schedule)						
<u>::</u>	22	Other liabilities (desc	ribe • )[						
	23	Total liabilities (add	<u> </u>	0.		0.			
<b>3</b> 5		Foundations that foll and complete lines 2	low FASB ASC 958, check here ► 4, 25, 29, and 30.						
3alar	24	Net assets without do	onor restrictions						
Ŧ	25	Net assets with donor	r restrictions						
Net Assets or Fund Balances		Foundations that do nand complete lines 2	ot follow FASB ASC 958, check here ►X						
ō	26	•	incipal, or current funds						
왊	27		or land, bldg., and equipment fund						
28	28		ated income, endowment, or other funds	3,396,913.	3,925,6	10			
Ř	29		ind balances (see instructions)	3,396,913.	3,925,6				
Ž	30		et assets/fund balances	3,396,913.	3,925,6				
Par	t III ].	Analysis of Chang	es in Net Assets or Fund Balance		., / -		'		
	Total	net assets or fund bal	lances at beginning of year - Part II, colur on prior year's return)		ree with	1	3,396,913.		
2		r amount from Part I, I		•	}	2	492,527.		
							36,209.		
		lines 1, 2, and 3	Sec prarement o		<del>-  </del>	4	3,925,649.		
		ases not included in line 2 (it	emize) ►		}	5	3,343,043.		
			ances at end of year (line 4 minus line 5)	- Part II column (b) lin	<u></u>	6	3,925,649.		
<u> </u>		uccosto or rama bar	at one of your (mio i initial mio o)	, column (b), iiii		~	5, 745, 043.		

(a) List and descr	be the kind(s) of property sold (for example warehouse; or common stock, 200 sl		(b) How acquire P — Purchase D — Donation	d (C) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a TD Ameritrade			P	Various	Various
<u>b TD Ameritrade</u>			P	Various	<u>Various</u>
<u>c</u>		<del></del>		<del> </del>	· · · · · · · · · · · · · · · · · · ·
		<del></del>		<del>-</del>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain or ((e) plus (f) m	
a 1,391,56	8.	1,27	4,388.		117,180.
b 2,929,68	7.	2,47	3,179.		456,508.
<u> </u>					
e					
	wing gain in column (h) and owned by the	foundation on 12/31/69.		(I) Gains (Col	(h)
(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		gain minus col (k), b than -0-) or Losses (fi	out not less
a					117,180.
b					456,508.
<u> </u>					
<u>d</u>					
				<del></del>	
2 Capital gain net income or	If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7	2		573,688.
	or (loss) as defined in sections 1222(5	· ` ` ` ¬			
If gain, also enter in Part I, in Part I, line 8	line 8, column (c). See instructions. If	(loss), enter -0-	-   3		117,180.
	der Section 4940(e) for Reduce	ed Tax on Net Investm	ent Incom	e	111/1001
If section 4940(d)(2) applies, lea Was the foundation liable for the	To time part starm				
	section 4942 tax on the distributable a ualify under section 4940(e) Do not co	mplete this part.	· 	Yes	X No
1 Enter the appropriate amount		emplete this part. structions before making any	· 		X No
	ualify under section 4940(e) Do not co	mplete this part.	entries.	(d) Distribution (col (b) divided	ı ratıo
Enter the appropriate amount     (a)     Base period years     Calendar year (or tax year)	ualify under section 4940(e) Do not co in each column for each year, see the in (b)	omplete this part. structions before making any (c) Net value of noncharitable-use ass	entries.	(d) Distribution	ratio by col. (c))
1 Enter the appropriate amount  (a)  Base period years Calendar year (or tax year beginning in)  2018 2017	ualify under section 4940(e) Do not come each column for each year, see the in (b)  Adjusted qualifying distributions	omplete this part. structions before making any (c) Net value of noncharitable-use ass	entries.	(d) Distribution	ratio by col. (c))
1 Enter the appropriate amount  (a) Base period years Calendar year (or tax year beginning in)  2018 2017 2016	ualify under section 4940(e) Do not come each column for each year, see the in (b)  Adjusted qualifying distributions	omplete this part. structions before making any (c) Net value of noncharitable-use ass	entries.	(d) Distribution	ratio by col. (c))
1 Enter the appropriate amount  (a) Base period years Calendar year (or tax year beginning in)  2018 2017 2016 2015	ualify under section 4940(e) Do not come each column for each year, see the in (b)  Adjusted qualifying distributions	omplete this part. structions before making any (c) Net value of noncharitable-use ass	entries.	(d) Distribution	ratio by col. (c))
1 Enter the appropriate amount  (a) Base period years Calendar year (or tax year beginning in)  2018 2017 2016	ualify under section 4940(e) Do not come each column for each year, see the in (b)  Adjusted qualifying distributions	omplete this part. structions before making any (c) Net value of noncharitable-use ass	entries.	(d) Distribution	ratio by col. (c))
1 Enter the appropriate amount  (a) Base period years Calendar year (or tax year beginning in)  2018 2017 2016 2015	ualify under section 4940(e) Do not come each column for each year, see the in (b)  Adjusted qualifying distributions	omplete this part. structions before making any (c) Net value of noncharitable-use ass	entries.	(d) Distribution	n ratio by col. (c)) 0.037683
1 Enter the appropriate amount  (a) Base period years Calendar year (or tax year beginning in)  2018 2017 2016 2015 2014  2 Total of line 1, column (d) 3 Average distribution ratio for	ualify under section 4940(e) Do not come each column for each year, see the in (b)  Adjusted qualifying distributions	omplete this part. structions before making any (c) Net value of noncharitable-use as: 3,67	entries.	(d) Distribution	0.037683
Base period years Calendar year (or tax year beginning in)  2018 2017 2016 2015 2014  Total of line 1, column (d)  Average distribution ratio for number of years the foundare	ualify under section 4940(e) Do not come an each column for each year, see the in (b) Adjusted qualifying distributions  138,520.	mplete this part. structions before making any (c) Net value of noncharitable-use as: 3,67	entries. sets 5,884.	(d) Distribution	0.037683 0.037683
Base period years Calendar year (or tax year beginning in)  2018 2017 2016 2015 2014  Total of line 1, column (d)  Average distribution ratio for number of years the foundare	the 5-year base period — divide the total attion has been in existence if less than	mplete this part. structions before making any (c) Net value of noncharitable-use as: 3,67	entries.  5, 884.	(d) Distribution	0.037683 0.037683 0.037683 309,131.
1 Enter the appropriate amount  (a)  Base period years Calendar year (or tax year beginning in)  2018  2017  2016  2015  2014  2 Total of line 1, column (d) 3 Average distribution ratio for number of years the foundary 4 Enter the net value of nonces 5 Multiply line 4 by line 3	the 5-year base period — divide the total attion has been in existence if less than	mplete this part. structions before making any (c) Net value of noncharitable-use as: 3,67	entries.  5,884.  2 3	(d) Distribution	0.037683 0.037683 0.037683 309,131.
1 Enter the appropriate amount  (a)  Base period years Calendar year (or tax year beginning in)  2018  2017  2016  2015  2014  2 Total of line 1, column (d) 3 Average distribution ratio for number of years the foundar  4 Enter the net value of nonce  5 Multiply line 4 by line 3	the 5-year base period — divide the total attorn has been in existence if less than than table-use assets for 2019 from Par	mplete this part. structions before making any (c) Net value of noncharitable-use as: 3,67	entries.  5,884.  2 3 4 5	(d) Distribution	ı ratıo
Base period years Calendar year (or tax year beginning in)  2018 2017 2016 2015 2014  2 Total of line 1, column (d) 3 Average distribution ratio for number of years the foundary 4 Enter the net value of noncess 5 Multiply line 4 by line 3 6 Enter 1% of net investment 7 Add lines 5 and 6 8 Enter qualifying distribution	the 5-year base period — divide the total attorn has been in existence if less than than table-use assets for 2019 from Partincome (1% of Part I, line 27b)	omplete this part.  structions before making any  (c)  Net value of noncharitable-use as:  3,67!  on line 2 by 5.0, or by the 5 years  t X, line 5	entries.  5,884.  2  3  4  5  6  7  8	Distribution (col (b) divided	0.037683 0.037683 0.037683 0.037683 309,131. 11,649. 7,072.

Page 4

Par		ns)		
٦a	Exempt operating foundations described in section 4940(d)(2), check here			
	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,		7,0	072.
	check here. ► X and enter 1% of Part I, line 27b			
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-)  2			0.
3	Add lines 1 and 2		7,0	072.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		7,0	072.
6	Credits/Payments		<del></del>	
а	2019 estimated tax pymts and 2018 overpayment credited to 2019 6 a			- }
b	Exempt foreign organizations — tax withheld at source 6b			- [
C	Tax paid with application for extension of time to file (Form 8868).			ļ
d	Backup withholding erroneously withheld 6 d			Ì
7	Total credits and payments. Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached.			259.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			331.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2020 estimated tax P Refunded P 11			
Parl	t VII-A   Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1 a	Yes	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1 b		Х
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , 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?	1 c	_	Χ,
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	1	<del></del>	<u> </u>
	(1) On the foundation >\$ 0. (2) On foundation managers >\$ 0	<u>.</u>		
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers	7 !		
	foundation managers   S  O  Has the foundation engaged in any activities that have not previously been reported to the IRS?	<u> </u>	<b> </b> -	<del>  []</del>
		_2	<b> </b> -	X
	If 'Yes,' attach a detailed description of the activities	} !		, , }
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes			
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3 4 a	<b> </b>	<u>X</u>
	If 'Yes,' has it filed a tax return on Form 990-T for this year?	<del></del>	<del>                                     </del>	X
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	4 b	IN I	/A X
	If 'Yes,' attach the statement required by General Instruction T.	<del> </del>	<del></del>	<del>^</del>
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			- }
	<ul> <li>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?</li> </ul>	6	Х	
	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	Χ	<del></del> ,
8 a	Enter the states to which the foundation reports or with which it is registered. See instructions	_		1
	IL			
	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If 'No,' attach explanation	8 b	_X	 
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,' complete Part XIV	9		<u> </u>
	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10		X
BAA		orm 990	DE (2	010)

ı aı	t VIFA   Statements Regarding Activities (continued)			
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	Yes	No X
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address			
14	The books are in care of Amanda Bozek  Telephone no. (309)	750	 - 5 2 4	1 -
	Located at ▶ 905 N Allin Rd Bloomington IL ZIP + 4 ▶ 61701			±
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> – check here	_N_Ā		
1.5	and enter the amount of tax-exempt interest received or accrued during the year	417 41		
	and enter the amount of tax-exempt interest received of accrued during the year		V	N/A
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country		-	
Pai	t 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
1 :	During the year, did the foundation (either directly or indirectly)			1
•	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No		ĺ	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X No			
	(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.)  Yes X No			
ł	If any answer is 'Yes' to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1 b	- N	/A
	Organizations relying on a current notice regarding disaster assistance, check here			
	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?	1 c		X
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
ā	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? X No			
	If 'Yes,' list the years ► 20 _ , 20 _ , 20 , 20			
k	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)		i	}
	(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.)	2 b	N	<u>_</u>
_		20	10 /	<u> </u>
(	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	► 20 , 20 , 20 , 20		;	ļ
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No			1
t	olf '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			
	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	<u> </u>		
	(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.)	3 Ь	N	 ⁄A
		35	- 14)	<u></u>
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its	4a	ļ	v
	charitable purposes?	-+ 4		<u> X</u> -
Ł	Did the foundation make any investment in a prior year (but after December 31, 1969) that could	'		
	leopardize its charitable purpose that had not been removed from leopardy before the first day of			
	the tax year beginning in 2019?	4 b		X
RΔΔ		000		and the

Part VII-B   Statements Regarding Activit		n 4720 May Be Req	uired (contin		33011		
5 a During the year, did the foundation pay or incur a	any amount to					Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes							
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?							
(3) Provide a grant to an individual for travel, study, or other similar purposes?							
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	n a charitable, etc., organ s	ization described	Ye	s X	No		
(5) Provide for any purpose other than religion educational purposes, or for the prevention	ous, charitable, scientific on of cruelty to children	c, literary, or or animals?		s X	No .		
<b>b</b> If any answer is 'Yes' to 5a(1)—(5), did <b>any</b> o described in Regulations section 53.4945 or in a	f the transactions fail to current notice regarding o	qualify under the exce disaster assistance?	eptions		' <u> </u>		
See instructions Organizations relying on a current notice rega	ardının disaster assistanı	ce check here		▶ [	, <u>                                    </u>	5 b N	I/A
c If the answer is 'Yes' to question 5a(4), does	•	•		L	,		
tax because it maintained expenditure respon	isibility for the grant?	·	N/A Y	s	] No		
6 a Did the foundation, during the year, receive a on a personal benefit contract?	ny funds, directly or ind	lirectly, to pay premium	ns Ye	s X	No		
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870.	nums, directly or indirec	ctly, on a personal bene	efit contract?	_	, ,	5 b	Х
7 a At any time during the tax year, was the found	dation a party to a proh	nibited tax shelter transa	action? <b>Ye</b>	s X	No		
<b>b</b> If 'Yes,' did the foundation receive any proceed	eds or have any net inco	ome attributable to the	transaction?	_	· —	7 b	
8 Is the foundation subject to the section 4960 tax		ian \$1,000,000 in remune	$\overline{}$	. 19	1		
or excess parachute payment(s) during the ye			Ye		No	<u> </u>	<u>+                                    </u>
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly F	aid E	Employe	es,	
1 List all officers, directors, trustees, and foun	dation managers and th	heir compensation. See	e instructions.				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contribution employee be plans and de compensati	enefit ferred	(e) Expe	ense ace r allowa	
Nicholas Nayak 1906 Crimson Lane	President 0	0.		0.			0.
Bloomington, IL 61704							
Vanessa Price	Treasurer	14,000.		0.	i		0.
2216 North 2450 East Rd LeRoy, IL 61752	0						
Amanda Bozek	Secretary	14,000.		0.			0.
905 N Allin Rd Bloomington, IL 61701	0						
	{						
2 Compensation of five highest-paid employees (o	ther than those included	on line 1 – see instruction	ns). If none, enter	NONE	<del>'</del> 1		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contribution employee be plans and def compensation	nefit erred	(e) Expe	ense aco r allowa	count,
None	·		Companisation	··			
	}						
	- "						
			}				
Total number of other employees paid over \$50,000	)			•			0

Form 990-PF (2019)

Deat IV B   Common of Discours Deleted Investments (see instructions)	<del></del>
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	Amount
1 N/A	
2	_
All other program-related investments See instructions	ļ
3	_
Total. Add lines 1 through 3	▶ 0.
BAA	Form 990-PF (2019)

Forr	990-PF (2019) Humanity First Corp	82-4335641	Page 8
Pa	Minimum Investment Return (All domestic foundations must complete this part. see instructions.)	Foreign found	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.  A Average monthly fair market value of securities		005 000
	Average monthly rain market value of securities  Average of monthly cash balances	1 a	295,833.
		1 b	18,006.
	Fair market value of all other assets (see instructions)	1 c	212 020
	d Total (add lines 1a, b, and c)  Reduction claimed for blockage or other factors reported on lines 1a and	1 d	313,839.
2	1c (attach detailed explanation)  Acquisition indebtedness applicable to line 1 assets	0.	•
3	Subtract line 2 from line 1d	2	0.
3	Subtract line 2 from line 10	3	313,839.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	4,708.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	309,131.
6	Minimum investment return. Enter 5% of line 5	6	15,457.
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations, check here ☐ and do not complete this part.		
1	Minimum investment return from Part X, line 6	1	15,457.
2 8	Tax on investment income for 2019 from Part VI, line 5 2a 7, 07	2.	
١	Income tax for 2019 (This does not include the tax from Part VI.)		
•	Add lines 2a and 2b	2 c	7,072.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	8,385.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	8,385.
6	Deduction from distributable amount (see instructions)	6	
_ 7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	8,385.
Pai	t XII Qualifying Distributions (see instructions)	· · · · · ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
	Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1 a	211,880.
	Program-related investments – total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3 a	
t	Cash distribution test (attach the required schedule).	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	211,880.
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	7,072.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	204,808.
	<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the qualifies for the section 4940(e) reduction of tax in those years	foundation	

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# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	<b>(c)</b> 2018	<b>(d)</b> 2019
1 Distributable amount for 2019 from Part XI, line 7				8,385.
2 Undistributed income, if any, as of the end of 2019.				8,303.
a Enter amount for 2018 only			0.	
<b>b</b> Total for prior years: 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2019		· · · · · · · · · · · · · · · · · · ·		
a From 2014				
<b>b</b> From 2015	<u>'</u>	·	'	
<b>c</b> From 2016	<b>-</b>			
d From 2017	-			
e From 2018	-	i	1	1
f Total of lines 3a through e.	0.			
4 Qualifying distributions for 2019 from Part	<u> </u>			
· · · · · · · · · · · · · · · · · · ·				
XII, line 4: \$ 211,880.  a Applied to 2018, but not more than line 2a				•
a Applied to 2018, but not more than line 2a	<u> </u>		0.	
<ul> <li>Applied to undistributed income of prior years (Election required — see instructions)</li> </ul>	S	0.		
c Treated as distributions out of corpus				
(Election required – see instructions)	0.			
d Applied to 2019 distributable amount				8, <u>38</u> 5.
e Remaining amount distributed out of corpus	203,495.	·		
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as				
indicated below:	<u>'</u>	I		الروا ما افاسر ورا و
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	203,495		·	
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed				
income for which a notice of deficiency has been issued, or on which the section 4942(a)				
tax has been previously assessed		0.1		į
			·	<del>i</del>
d Subtract line 6c from line 6b. Taxable amount – see instructions		٥. ا		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount — see instructions.			0.	
f Undistributed income for 2019. Subtract lines	,			
4d and 5 from line 1. This amount must be distributed in 2020				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Electión may be required – see instructions)	0.			
•	- 0.		<del></del>	
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	203,495.			
10 Analysis of line 9				
a Excess from 2015	]			
<b>b</b> Excess from 2016	]			
c Excess from 2017				
d Excess from 2018.	]			
e Excess from 2019 203, 495.				

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Form **990-PF** (2019)

Form 990-PF (2019) Humanity First C	orp			82-433564	1 Page 10
Part XIV Private Operating Founda		uctions and Par	t VII-A, question		N/A
1 a If the foundation has received a ruling or determined is effective for 2019, enter the date of the	ermination letter that ruling	it is a private operat	ing foundation, and the	ruling -	
<b>b</b> Check box to indicate whether the foundar	tion is a private ope	erating foundation d	lescribed in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
investment return from Part X for	(a) 2019	<b>(b)</b> 2018	(c) 2017	(d) 2016	
each year listed			ļ	_/	
b 85% of line 2a			<del> </del>		
c Qualifying distributions from Part XII, line 4, for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon			, ,		
a 'Assets' alternative test — enter.	ŀ				
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment 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)	ş				
(2) Support from general public and 5 or					
more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
PartiXVI Supplementary Information assets at any time during the	(Complete this e year – see in	part only if the structions.)	foundation had	\$5,000 or more	in
1 Information Regarding Foundation Management					
a List any managers of the foundation who have close of any tax year (but only if they have	e contributed more the	nan 2% of the total co	ontributions received by	y the foundation bef	ore the
None	s contributed more	(GCC	30011011 307 (4)(2).)		
<b>b</b> List any managers of the foundation who own	10% or more of the	stock of a corporatio	n (or an equally large	portion of the owner	ship of
a partnership or other entity) of which the None	foundation has a 1	0% or greater intere	est		·
		<del></del>			
2 Information Regarding Contribution, Grant, Check here ☐ If the foundation only marequests for funds. If the foundation make	ikes contributions to	preselected charitabl			
2a, b, c, and d. See instructions.  a The name, address, and telephone number of	r email address of th	e person to whom an	polications should be as	ddressed	
a me name, address, and telephone nameer of	cinal address of the	o person to union up	prications should be at	3010350 <b>1</b> .	
Con Chatamant C					
<ul><li>See Statement 9</li><li>b The form in which applications should be stated.</li></ul>	submitted and infor	mation and materia	ils they should include	e	
See Statement for Line 2a					
c Any submission deadlines	<u> </u>		<del></del>		
See Statement for Line 2a		<u> </u>	<u> </u>		f1-1-
d Any restrictions or limitations on awards, s	such as by geograp	nicai areas, charital	bie tielas, kinds of in:	sulutions, or other	ractors
See Statement for Line 2a					<u>-</u>
BAA	TE	FA0310L 08/22/19		· - F	orm 990-PF (2019)

3 Grants and Contributions Paid During the Y	ear or Approved for Fut	ure Paymen	nt	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		ļ
Name and address (home or business) a Paid during the year See Statement 10	or substantial contributor	recipient	Contribution	
Total			► 3a	183,412
b Approved for future payment	<del></del>			105,412.
Total			► 3b	

Enter gros	s amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)
` _		(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	Related or exempt function income (See instructions.)
	ram service revenue		<del></del> _	code		
a		-		<del></del>		
b		<del> </del>		<del> </del>		
<u> </u>		+	<del></del>	<del>-  </del>		<del></del>
d		<del> </del>		<del> </del>		
e	<del>-</del>	<del>  -   -   -   -   -   -   -   -   -   -</del>	<del></del>	<del></del>		_ <del> </del>
a Fees	and contracts from government agencies				<del></del> -	
-	bership dues and assessments	<del> </del>	<del>-</del>	<del>  </del>		
	st on savings and temporary cash investments	<del></del>	<del></del>	<del>  -</del> f	<del>-</del> .	125 502
	lends and interest from securities	<del> </del>	<u> </u>	<del> </del>		135,582 256
=	rental income or (loss) from real estate	<del> </del>	· · · · · · ·	<del>  </del>		
	-financed property					
	debt-financed property	-		<del>                                     </del>		
	ental income or (loss) from personal property			+		
	r investment income	1-		1		
•	or (loss) from sales of assets other than inventory			3	117,180.	456,508
	ncome or (loss) from special events			<del>                                     </del>	117,100.	430,300
	s profit or (loss) from sales of inventory					
-	r revenue			<del>- </del>	,	
а			<del></del>		,	<del>-</del>
b		1				
c			<del>, ,,,</del>			
d				1 - 1		
e			<del></del>			
12 Subt	otal Add columns (b), (d), and (e)				117,180.	592,346
13 Tota	I. Add line 12, columns (b), (d), and (e)				13	709,526
(See works	sheet in line 13 instructions to verify calculati	ons )			~	
Part XV	I-B Relationship of Activities to the	e Accomplisi	nment of Exem	pt Purpose	es	-
Line No.	Explain below how each activity for which i accomplishment of the foundation's exemp	ncome is reporte	ed in column (e) of	Part XVI-A co	ontributed importantly	y to the
	accomplishment of the foundation's exemp	t purposes (othe	r than by providing	funds for suc	n purposes). (See in	structions)
<u>N/A</u>					·	
		<del> </del>			·	
		<del>_</del>		<del></del>		
			<del></del>			
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		<del></del>			<u> </u>	<u></u>
		<del></del>	<del></del>			

# Form 990-PF (2019) Humanity First Corp 82-4335641 RartixVIII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

<u>_</u>						
described in section 501 (crelating to political organical Transfers from the reportion).  a Transfers from the reportion (1) Cash (2) Other assets b Other transactions (1) Sales of assets to a nice of assets for assets	c) (other than sect zations?  Ing foundation to a moncharitable exented a noncharitable uipment, or other gements tees ar membership oment, mailing list	ole exempt organization	or in section 527, ization of oyvees		1 a (1) 1 a (2) 1 b (1) 1 b (2) 1 b (3) 1 b (4) 1 b (5) 1 b (6) 1 c  market value of	X X X X X X X X
any transaction or sharing	arrangement, sh	ow in column (d) the value of	the goods, other assets	s. or services receive	d.	
(a) Line no (b) Amount involved		noncharitable exempt organization	<del>-, </del>	ansfers, transactions, and		ents
(-)	(C) Haine of	nonchartable exempt organization	(a) pescription or th	unarera, transactiona, and	anaring arrangeme	,,,,,,
N/A				<del></del>		
			į			
	_					
			<del> </del>	· · · · · · · · · · · · · · · · · · ·		
			<del>-</del>			
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					· · · · · · · · · · · · · · · · · · ·	
described in section 501(c	c) (other than sect	with, or related to, one or more ion 501(c)(3)) or in section 52	tax-exempt organizations		Yes	No
<b>b</b> If 'Yes,' complete the follo						
(a) Name of organize	ation	(b) Type of organization	n (	c) Description of rela	ationship	
N/A						
	-	···-	<del></del>	-· · · · · · · · · · · · · · · · · · ·		
	-	<del></del>				
		<u> </u>				
	i					
Sign Here  Under penalties of perjury, I decorrect, and complete Declaration  Signature of officer or trustee	clare that I have examinion of preparer (other the	ed this return, including accompanying than taxpayer) is based on all information that the state of the state	schedules and statements, and statements and statements and which preparer has any known of the statement of the statements and statements an	to the best of my knowledge wledge	May the IRS dithis return with preparer shown See instruction	scuss the below?
Print/Type preparer's	name	Preparer's signature	Date		PTIN	1 1,40
Frint Type preparer's	name	Preparer's signature M.Z	. אמעני	Checkif		
Paid Shannon Ste	<u>ewart EA (</u>	Shannon Stewar	EA 12-11-200	self-employed	P00117260	<u>)                                    </u>
Preparer Firm's name	American Ta	ax & Accounting	·· <del>·</del>	Firm's EIN ► 47-29	997655	
ichaio.	2206 E Oak			1		
Jse Only Firm's address					007 2066	
	Bloomington	n, IL 61701-5761		Phone no 309-8	<u>827-3266</u>	
BAA					Form 990-PF	(2019)

### Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2019

Employer identification number

Humanity First Corp 82-4335641 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF. Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of or	ganization ity First Corp	1 ' '	rer identification number
1	Contributors (see instructions). Use duplicate copies of Part I if addition		1333041
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Nicholas Nayak  1906 Crimson Lane  Bloomington, IL 61704	 \$25,276.	Person X Payroll X Noncash X  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 <sup>\$</sup>	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	<sup>-</sup> (d) Type of contribution
		 \$	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		   	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<b></b>		\$ =	Person Payroll Noncash  (Complete Part II for noncash contributions.)

Humanity First Corp

Employer identification number

82-4335641

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

	(c) FMV (or estimate) (See instructions.)	(d) Date received
enicle		
	\$ 17,977.	8/20/19
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	- - - - - - -	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	] 	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
	Description of noncash property given   \$ 17,977.  Description of noncash property given FMV (or estimate) (See instructions.)  \$ Description of noncash property given FMV (or estimate) (See instructions.)  \$ Description of noncash property given FMV (or estimate) (See instructions.)  \$ Description of noncash property given FMV (or estimate) (See instructions.)  \$ Description of noncash property given FMV (or estimate) (See instructions.)	

	(Form 990, 990-EZ, or 990-PF) (2019)		<u>1</u> Page 4
Name of organ			Employer Identification number
	Ty First Corp	to contribution to consult	82-4335641
[Fart III]	or (10) that total more than \$1,000 for the	tc., contributions to organiz	zations described in section 501(c)(7), (8),
	the following line entry For organizations of	ompleting Part III, enter the total o	of exclusively religious, charitable, etc.
	contributions of \$1,000 or less for the year	(Enter this information once. See	instructions.) • \$N/Z
	Use duplicate copies of Part III if additional	space is needed	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
	F'		· <del>-</del> <del> </del>
		<b></b>	·- <b></b> -
		<u> </u>	· <del>-</del> <del>  -</del> <del></del>
		(e) Transfer of gift	
	Transferee's name, addres	ss, and ZIP + 4	Relationship of transferor to transferee
-	<b></b>	·	· ~ <b></b>
	<del></del>	· <b></b>	,
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I	Tulpose of gilt	Use of gift	bescription of now gift is field
		<b></b>	
		(0)	
		(e) Transfer of gift	
	Transferee's name, addres	ss, and ZIP + 4	Relationship of transferor to transferee
		<b></b>	
	(6)		
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
	<b> </b>		
	<b> </b>	<b>-</b>	·
		- <b>-</b>	·
		(e)	
		(e) Transfer of gift	
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee
		<b></b>	
	' 	<del></del>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
	' 		
:	L	- <b></b>	
		(e) Transfer of gift	
	Transferee's name, addres	s, and ZIP + 4	Relationship of transferor to transferee
		· <del>-</del>	
		: <u></u>	
BAA			Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

2019	Federal Statements	Page 1
	Humanity First Corp	82-4335641
Statement 1 Form 990-PF, Part I, Line 16 Legal Fees	ia	
	(a)       (b)       Net       (c)         Expenses       Investment       Adjusted         Per Books       Income       Net Income         \$ 11,294.       \$ 0.       \$ 0.	(d) Charitable Purposes \$ 11,294. \$ 11,294.
Statement 2 Form 990-PF, Part I, Line 16 Accounting Fees	b	-
	(a)       (b)       Net       (c)         Expenses       Investment       Adjusted         per Books       Income       Net Income         \$ 2,620.       \$ 0.       \$ 0.	(d) Charitable Purposes \$ 2,620. \$ 2,620.
Statement 3 Form 990-PF, Part I, Line 18 Taxes		
US Treasury	(a) (b) Net (c)  Expenses Investment Adjusted  per Books Income Net Income  \$ 2,299. \$ 2,299.  Total \$ 2,299. \$ 2,299. \$ 0.	(d) Charitable Purposes \$ 0.
Statement 4 Form 990-PF, Part I, Line 19 Allocated Depreciation		
Date Cost Acquired Basis	Prior Yr Current Net Inventor Net Inventor Net Inventor Net Income	est Adjusted Net Income
Vehicle 8/20/19 26,899	S/L 0.1 2,690	0 0

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# **Federal Statements**

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**Humanity First Corp** 

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Statement 5 Form 990-PF, Part I, Line 23 Other Expenses

	(a) Expenses <u>per Books</u>	(b) Net Investment Income	(c) Adjusted <u>Net Income</u>	(d) Charitable <u>Purposes</u>
Bank Charges Business Fees Computer	\$ 1,247. 130. 175.		;	\$ 1,247.
Dues and Subscriptions MIsc Reimbursed Expense Supplies	1,285. 232. 3,104. 4,274.			1,285. 232. 3,104. 4,274.
Supplies	Total $\frac{4,274}{5}$ .	\$ 0.	\$ 0.	\$ 10,142.

Statement 6
Form 990-PF, Part II, Line 10a
Investments - U.S. and State Government Obligations

U.S. Government Obligations	Valuation	Book	Fair Market
	<u>Method</u>	<u>Value</u>	<u>Value</u>
	Cost Total	\$ 3,550,000. \$ 3,550,000.	

Statement 7 Form 990-PF, Part II, Line 14 Land, Buildings, and Equipment

Category	Basis	 Accum. Deprec.	 Book Value	Fa	air Market Value
Auto./Transportation Equip.	\$ 26,899.	\$ 2,690.	\$ 24,209.	\$	24,209.
Total	\$ 26,899.	\$ 2,690.	\$ 24,209.	\$	24,209.

Statement 8 Form 990-PF, Part III, Line 3 Other Increases

Non-Taxable Interest

 \$ 36,209.

 Total \$ 36,209.

Statement 9 Form 990-PF, Part XV, Line 2a-d Application Submission Information

Name of Grant Program:

Name:

Humanity First

Care Of:

Street Address:

1906 Crimson Lane

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# **Federal Statements**

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## **Humanity First Corp**

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# Statement 9 (continued) Form 990-PF, Part XV, Line 2a-d Application Submission Information

City, State, Zip Code: Telephone: E-Mail Address:

Bloomington, IL 61704 (309) 750-5241

Form and Content:

Contact Humanity First For Further Information

Submission Deadlines: Restrictions on Awards:

None None

### Statement 10 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
Kristine Sexton Wiley Dr Bloomington IL 61701	None		Wellness	\$ 956.
Wayne Boitnott 6 Strawflower Lane Bloomington IL 61701	None		Medical	2,000.
Mary Crismon Davis 404 S Broadway Atlanta IL 61723	None		Medical	20,400.
Peter Wiedman 2959 Wolf Creek Lane Normal IL 61761	None		Financial	18,660.
Nikko Stivers 2106 Foxtail Rd Bloomington IL 61704	None		Education	2,000.
Nathan Sigler 10 Basil Way Bloomington IL 61704	None		Medical	3,000.
Geeta Shukla PO Box 17425 Al Alain, UAE Al Alain, UAE N/A India	None		Medical	30,000.
Christian Hernandez 3606 Wine Way Bloomington IL 61704	None		Education	20,000.
Elizabeth Wilbert 1714 Indiana St Bloomington IL 61701	None		Medical	8,000.

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Statement 10 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
Gene LeGrand 503 Maple Place Normal IL 61761	None		Medical	\$ 6,500.
Sklyer Vaughn 9 Currency Dr Apt 712 Bloomington IL 61701	None		Financial	500.
Jan Den Ouden West Sidelinge 270 Rotterdam Rotterdam N/A Netherlands	None		Missionary Housing	5,000.
Roopatie Harris 3604 Silverado Trl Normal IL 61761	None		Financial	1,500.
Clarence Harris 3604 Silverado Trl Normal IL 61761	None		Covid 19 Financial	4,000.
Rotary Club of Ichalkaranji Textile City Gayatri Bhawan Rd Kagwade Mala Maharashtra 416115 India	None	PC	Education Grant Miraj High School Renovation Sunderland	15,000.
TellAsia Ministries 12650 W 64th Ave Arvada CO 80004	None	PC	Charitable: Education Computer Lab with Blue Haven English Medium School	25,000.
Homeless Incentive Program 1906 Crimson Lane Bloomington IL 61704	None		Humanity First Corp program designed to specifically aid random homeless adults in Bloomington IL	18,824.
Small Donations 1906 Crimson Lane Bloomington IL 61704	None		Small additional amounts to aid medical needs of individuals	2,072.
	,		Total	\$ 183,412.