990-PF

OMB No 1545-0047

Department of the Treasury

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

<u>Ir</u>	itemai	Revenue Service Go to www irs	gov/Form990PF for instru			ation 0000	
_		alendar year 2019 or tax year beginning	07	//01 , 2019 ,	and ending	T & 6	06/30,2020
N		of foundation				A Employer identif	
_		HEIM FOUNDATION		т.		74-237820	
N	lumbei	r and street (or P O box number if mail is not delivered	lo street address)		Room/suite	B Telephone numb	er (see instructions)
_). BOX 84558				(603) 8	70 - 5248
C	ity or t	lown, state or province, country, and ZIP or foreign post	ai code			C If exemption applic pending, check here	
_	PHO	ENIX, AZ 85071-4558				,	
G	Che	eck all that apply Initial return Final return	Amended ret		iblic charity	D 1 Foreign organiza 2 Foreign organiza 85% test check	itions meeting the
-		Address change	Name change				▶□
H	_	eck type of organization X Section 501 Section 4947(a)(1) nonexempt charitable trust	· —		on M	E If private foundation	n status was terminated
ī			ounting method X Ca	ash Accr	ual		in a 60-month termination
	end		Other (specify)				e)(1)(B), check here . ►
	16)	▶ \$ 6,735,925. (Part I	, column (d), must be on ca	sh basis)			
	Part	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	(a) Revenue and expenses per books	(b) Net inves		c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
"2/	T .	column (a) (see instructions))	6,040,000.				(OGO) OGGG ONLY)
11	1 2	Contributions, gifts, grants, etc., received (attach schedule). Check fithe foundation is not required to	5,310,000.			 -	
	2	attach Sch B	67		67.		
	3	Interest on savings and temporary cash investments. Dividends and interest from securities	-				
	50	Gross rents	-				
	ł	Net rental income or (loss)					
2.≠ iue	6.2	Net gain or (loss) from sale of assets not on line 10					
2 6 2021 Revenu	il _	assets on line 6a	 	<u> </u>			
, 69 R	1	Capital gain net income (from Part IV, line 2).					
8	8	Net short-term capital gain					
OCT	10 a	Income modifications					
		Less Cost of goods sold .	 				
0	1	Gross profit or (loss) (attach schedule)					
SCANNED Penses	11	Other income (attach schedule)	6,040,067.		67.	-	
/	12	Total. Add lines 1 through 11					
₹ 8	13	Compensation of officers, directors, trustees, etc	ļ				
လို ဦ	14 15	Other employee salaries and wages	ļ <u> </u>				
S P	15 16 a	Pension plants employee benefits					
Ш	Ь	Accounting fees (attach schedule)					
<u></u>	C	O her professional tees (attach schedule)					
ira.	17	Interest					
Administrative Exp	18	Taxes (attach schedule) (see lostructions)				<u> </u>	
Ē	19	Depreciation (attach schedule) and depletion.					
βq	20	Occupancy	 			·	<u> </u>
and	21	Travel, conferences, and meetings					
<u> </u>	22	Printing and publications	377			<u>-</u>	377
inc	23	Other expenses (attach schedule) ATCH .1	\ 				377
rat	24	Total operating and administrative expenses	377.				377
ad	23 24 25	Add lines 13 through 23	413,000.				413,000
0		Contributions, gifts, grants paid	413,377.				413,000
_	26	Total expenses and disbursements. Add lines 24 and 25					
	27	Subtract line 26 from line 12	5,626,690.				
	1	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	3,323,030.		67		
	J	Adjusted net income (if negative, enter -0-).	 				
=		perwork Reduction Act Notice, see instructions					Form 990-PF (2019)

JSA For Paperwork Reduction Act Notice, see instructions. 9E1410 1 000

e	art II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	Er	nd of year
_			amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing			
	2		cash investments	1,109,235.	6,735,92	5. 6,735,925
	3	Accounts receivable ▶				<u> </u>
		Less allowance for dou	btful accounts ►			<u> </u>
	4	Pledges receivable ▶				
		Less allowance for dou	btful accounts ▶			
	5	Grants receivable				
	6		officers, directors, trustees, and other			
	l		tach schedule) (see instructions)			
	7		receivable (attach schedule)			
		Less allowance for dou	btful accounts ►			
ssets	8	Inventories for sale or us	e			<u> </u>
SS	9	Prepaid expenses and d	eferred charges			
⋖	10 a	Investments - US and state	e government obligations (attach schedule)			
		•	stock (attach schedule)			
	11 C	Investments - corporate Investments - land, buildings	bonds (attach schedule)			
		and equipment basis	<u> </u>			
		Less accumulated deprecia (attach schedule)	ntion >			
	12		loans			
	13 14	Investments - other (atta Land, buildings, and	ach schedule)			
				·-·		
		(attach schedule)	tion			
	15		·)	· _ _		
	16	•	completed by all filers - see the		6 705 00	
_		instructions Also, see p	age 1, item I)	1,109,235.	6,735,92	5. 6,735,925
	17		ccrued expenses			· .
	18	Grants payable				
ies	19	Deferred revenue			<u> </u>	
Liabilities	20	•	rs, trustees, and other disqualified persons			
ia;	21	• •	tes payable (attach schedule)			
_	22	Other liabilities (describe	· -)		_ —.	
	••	Tital Labilities (and has	- 47 thanks 22)	0.		o.
_	_		s 17 through 22)			0.
es	24 25	and complete lines 24,	v FASB ASC 958, check here ►X	ز		
ĭ	٠, ,	•	·	1,109,235.	6,735,92	7
ä	24		or restrictions	1,100,200.	0,733,72	<u>'</u>
73	25		estrictions · · · · · · · · · · · · · · · · · · ·			
Fun		and complete lines 26 thro				
ī	20	•	-			
0	20	•	cipal, or current funds			
ě	28	•	stated income, endowment, or other funds			- <i>'</i> i
Ş	29	• .	balances (see instructions)	1,109,235.	6,735,92	7.
it/	30		net assets/fund balances (see	·	<u> </u>	ì
ž				1,109,235.	6,735,92	7.
_			nges in Net Assets or Fund Balan			
			alances at beginning of year - Part I		nust agree with	
•			d on prior year's return)			1,109,235
2			line 27a			
						
						2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
		reases not included in			5	5
6	Tota	I net assets or fund b	alances at end of year (line 4 minus	line 5) - Part II, column (t		

Pa	rt IV Capital Gains	and Losses for Tax on Inv	estment Income		· _	
	• •	scribe the kind(s) of property sold (for erick warehouse, or common stock, 200	•	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	\					
t)					
	:					
<u>e</u>	· · · · · · · · · · · · · · · · · · ·	(f) Depreciation allowed	(g) Cost or other basis		<u> </u>	<u> </u>
	(e) Gross sales price		(h) Gain or (lo ((e) plus (f) mini			
a	·			ļ		
<u>t</u>						
				 		
e		howing gain in column (h) and owned	by the foundation on 12/31/69	 	0	
	Complete only for added 5	(j) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) ga (k), but not less t	
	(i) FMV as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	
a						
b						
c						
d						
e						
2	Capital gain net income	or (not capital loss)	ain, also enter in Part I, line 7 oss), enter -0- in Part I, line 7	2		
3	Net short-term capital g	ain or (loss) as defined in sections	,			
		art I, line 8, column (c) See ins				
	Part I, line 8		<u> </u>	3		
Pa	rt V Qualification L	<u> Inder Section 4940(e) for Rec</u>	duced Tax on Net Investment li	ncome		
Was			outable amount of any year in the back Oo not complete this part	ase period	g?	Yes X No
1	Enter the appropriate ar	mount in each column for each yea	ar, see the instructions before maki	ng any en	tries	
Cal	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by	
	2018	1,115,286.	1,235,681.			0.902568
	2017	350,262	115,891			3.022340
	2016	335,240.	228,111.			1.469635
	2015	125,232.	69,971.			1.789770
	2014	365,224.	347,412.			1.051271
2		d)		2		8.235584
3	~	o for the 5-year base period - divid				1 (47117
	the number of years the	foundation has been in existence i	If less than 5 years	3	<u>-</u>	1.647117
4	Enter the net value of no	oncharitable-use assets for 2019 fi	rom Part X, line 5	4	3,	174,779.
5	Multiply line 4 by line 3.			5	5,	229,232.
6				6		1.
7				7	5,	229,233.
			•	8	<u> </u>	413,377.
8	If line 8 is equal to or g Part VI instructions	ions from Part XII, line 4 reater than line 7, check the box	in Part VI, line 1b, and complete			

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Ŗaı	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	instr	uction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1		1	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.
	here ▶ ☐ and enter 1% of Part I, line 27b	•		· [
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
3	Add lines 1 and 2			1.
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			1.
6	Credits/Payments			Ì
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 171.			
b	Exempt foreign organizations - tax withheld at source			1
c	Tax paid with application for extension of time to file (Form 8868) 6c			ì
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			171.
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			L70.
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ 170 . Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No_
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	1		J
	instructions for the definition	1b	<u> </u>	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	1		
	published or distributed by the foundation in connection with the activities	 		- -
	Did the foundation file Form 1120-POL for this year?	1c		
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 \$			
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			
_	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b	}	
D	b If "Yes," has it filed a tax return on Form 990-T for this year?			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
_	•			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that 	•		
		6	X	
7	conflict with the state law remain in the governing instrument?	7	Х	
7 8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	AZ,	.		
b	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 General Instruction G ² If "No," attach explanation	8b	X	
9	is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or			~ لـنـ
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes,"			/
	complete Part XIV	9		X Z
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	'		v
	names and addresses ATCH 2	10		X

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Pa	rt VII-A Statements Regarding Activities (continued)			
- 1		Ī	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	<u> </u>		
	person had advisory privileges? If "Yes," attach statement See instructions ATCH 3 ATCH 4	12	х	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address N/A		4.0	
14	The books are in care of ► SOLHEIM FOUNDATION Telephone no ► (602)87	J - 524	48	
	Located at ▶2201 W. DESERT COVE AVE PHOENIX, AZ ZIP+4 ▶ 85029			1 1
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year		▶	Ш
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
10	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of	_		
	the foreign country			
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
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	1		1
	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)?			
	(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)			
b	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	1b	_ <u>x</u>	
	Organizations relying on a current notice regarding disaster assistance, check here	1 1	1	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	<u> </u>		
_	were not corrected before the first day of the tax year beginning in 2019?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			1
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines		ŀ	
_	6d and 6e) for tax year(s) beginning before 2019?		ļ	
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		1	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			Ī
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			ļ
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or		1	- !
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			1
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			1
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			<u> </u>
	foundation had excess business holdings in 2019)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	<u> </u>		ل
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X

- ₽ai	rt VII-B	Statements Regarding Activities	for Which Form	4720 May Be Rec	uired (conti	nued)_			
5a	During t	he year, did the foundation pay or incur any am	ount to					Yes	No
	(1) Carr	y on propaganda, or otherwise attempt to influ	ence legislation (sectio	n 4945(e))?	. Yes	X No			Ī
	(2) Influ	ence the outcome of any specific public el-	ection (see section 4	1955), or to carry or	ո,			•	ļ
	dire	ctly or indirectly, any voter registration drive?			. Yes	X No		-	
	(3) Prov	ride a grant to an individual for travel, study, or o	other similar purposes?	,	. Yes	X No	- }		
	(4) Prov	nde a grant to an organization other than a	charitable, etc., org	anization described i	n				- 1
	sect	ion 4945(d)(4)(A)? See instructions			Yes	X No			
	(5) Prov	ide for any purpose other than religious, c	haritable, scientific, l	iterary, or education	al		ļ		
	purp	oses, or for the prevention of cruelty to children	or animals?		. Yes	X No			
b	If any a	inswer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions des	cribed in			
	Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions								
	Organiza	ations relying on a current notice regarding disa	ster assistance, check	here		▶∟			1
С	If the a	nswer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the t	ax				.
	because	it maintained expenditure responsibility for the	grant?		Yes	∐ No			·
	If "Yes,"	attach the statement required by Regulations s	ection 53 4945-5(d)		•		ļ.		
6a	Did the	foundation, during the year, receive any fur	nds, directly or indire	ectly, to pay premiur	ns	_			- 1
	on a per	sonal benefit contract?			. Yes	X No			
b	Did the f	oundation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contra	act?		6b		X
		to 6b, file Form 8870			□ .				l
7 a		me during the tax year, was the foundation a p		-		X No	<u> </u>		
b	•	did the foundation receive any proceeds or ha	•		on?		7b		
8		undation subject to the section 4960 tax on pa						1	
		ation or excess parachute payment(s) during the Information About Officers, Directo	year?	ndation Managan	. Yes	X No			
Pai	t VIII	and Contractors	rs, Trustees, Fou	nuation Managers	s, nigniy Pa	ia Empio	yees,		
1	List all o	fficers, directors, trustees, and foundat							
		(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contribution employee benef	īt plans	(e) Expens		
			devoted to position	enter -0-)	and deferred com	pensation	Other an		
ATCI	1 5		!	0.		0.	•		Ο.
	-		 						- • •
									
									
					<u> </u>				
									
	Compen	sation of five highest-paid employees	(other than thos	e included on line	e 1 - see ir	struction	s) If no	ne. e	enter
_	"NONE."							,,	
		,	(b) Title, and average	(-) ()	(d) Contributi employee be		(e) Expens	e accou	ınt.
(a)	Name and	address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and de compensa	ferred	other all	owance	s ·
									
	NONE					}			
			 						
			[,				
									
	_								
						1			
Total	number	of other employees paid over \$50,000.				•	-		
							Form 990	DE /	2010)

3 Five highest-paid independent contractors for professional services. See	instructions. If none, enter "NONE	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	_	
		0
	- _	
		·
	-	
		
	-	
	-	
Total 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 chantable activities during the tax year include relevant stati organizations and other beneficianes served, conferences convened, research papers produced, etc	stical information such as the number of	Expenses
1 N/A		
2		
_ 		
3		
·		
Part IX-B Summary of Program-Related Investments (see instructions	3)	
Describe the two largest program-related investments made by the foundation during the tax year on line	es 1 and 2	Amount
1 NONE		-
		
2		
All other program-related investments. See instructions		1
3		
NONE		
Total. Add lines 1 through 3		

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ıgn four	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	
b	Average of monthly cash balances	1b	3,223,126.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	3,223,126.
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,223,126.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	48,347
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	3,174,779.
6	Minimum investment return. Enter 5% of line 5	6	158,739.
Pa	Tt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part)	ndations	
1	Minimum investment return from Part X, line 6	1	158,739.
2a	Tax on investment income for 2019 from Part VI, line 5 2a 1.		
b			
С	•	2c	1.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	158,738.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	5	158,738.
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	158,738.
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		412 222
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	413,377.
b	. Togram Total of Michigan Control of the Control o	1b	
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		
а		3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	413,377.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	413,377.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years	lculating	whether the foundation

Form **990-PF** (2019)

1 Distributable amount for 2019 from Part XI, (a) (b) (c) (d) (2019 (d) (
158/1016/1016/1016/1016/1016/1016/1016/101	
2 Undistributed income, if any, as of the end of 2019 a Enter amount for 2018 only	730
a Enter amount for 2018 only,	30.
b Total for pnor years 20 17 ,20 16 ,20 15 3 Excess distributions carryover, if any, to 2019 a From 2014	
3 Excess distributions carryover, if any, to 2019 a From 2014	
a From 2014	
b From 2015	
c From 2016	j
d From 2017	ľ
e From 2018	
f Total of lines 3a through e	
4 Qualifying distributions for 2019 from Part XII, line 4 ▶ \$ 413,377. a Applied to 2018, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2019 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract	
line 4 ▶ \$ 413,377. a Applied to 2018, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2019 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract	
a Applied to 2018, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions)	ŀ
(Election required - see instructions)	[
(Election required - see instructions)	Ī
required - see instructions)	
required - see instructions)	Ī
e Remaining amount distributed out of corpus	
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract	38.
(If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract	
6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract	 1
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract	- 1
·	t
line 4h from line 3h	1
line 4b from line 2b	
c Enter the amount of prior years' undistributed income for which a notice of deficiency has	1
been issued, or on which the section 4942(a)	
tax has been previously assessed	¦
d Subtract line 6c from line 6b Taxable	-
amount - see instructions	
4a from line 2a Taxable amount - see instructions	
f Undistributed income for 2019 Subtract lines	
4d and 5 from line 1. This amount must be	
distributed in 2020	
7 Amounts treated as distributions out of corpus	1
to satisfy requirements imposed by section	j
170(b)(1)(F) or 4942(g)(3) (Election may be	
required - see instructions)	
8 Excess distributions carryover from 2014 not	- 1
applied on line 5 or line 7 (see instructions) 347,842.	!
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line for 1,998,178.	l
Subtract lines 7 and 8 from line 6a	-
a Excess from 2015 21,733.	
b Excess from 2016 323,834.	- 1
c Excess from 2017 344,467.	}
d Excess from 2018 1,053,505.	- 1
e Excess from 2019 254,639.	1

art XIV Private O	noratina Eaundation	/coo instructions	and Part VIII A gues	tion (I)	Page 10 NOT APPLICABLE
a If the foundation has	perating Foundation				OT APPLICABLE
	ng is effective for 2019, e		-	▶	
b Check box to indicate	whether the foundation	is a private operating	foundation described	in section 4942(j))(3) or 4942(j)(5)
a Enter the lesser of the ad			Prior 3 years		(e) Total
justed net income from Part I or the minimum investmen	(0)2013	(b) 2018	(c) 2017	(d) 2016	(-,
return from Part X for each	1				
year listed			-	 	
b 85% of line 2a			<u> </u>	+/	
C Qualifying distributions from Par XII, line 4, for each year listed .					
d Amounts included in line 2c no used directly for active conduction of exempt activities	at .				
e Qualifying distributions made					
directly for active conduct or exempt activities Subtract line					
2d from line 2c				<u> </u>	
Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets (2) Value of assets qualifying			 	 	
under section 4942(j)(3)(B)(i)					
b "Endowment alternative test	-				
enter 2/3 of minimum invest ment return shown in Part X	1				
line 6 for each year listed					
C "Support" alternative test - enter					
(1) Total support other than gross investment income	· /				
(interest, dividends, rents payments on securities					
loans (section 512(a)(5)) or royalties)					
(2) Support from genera					
public and 5 of more exempt organizations as	3				
provided in Section 4942 (j)(3)(B)(iii)	!				
(3) Largest amount of sup-					•
organization	·			 	
(4) Gross investment income .	Internation //	Complete this par	only if the found	lation had \$5,000 or	r more in assets at
	during the year - see		comy if the found	ation nau \$5,000 of	more massers at
Information Regardir	ng Foundation Manage	rs:		_ 	
a List any managers of					ed by the foundation
	y tax year (but only if th	ey have contributed	more than \$5,000) (S	See section 507(d)(2))	
N/A					
b List any managers of ownership of a partne	r the foundation who ership or other entity) of				large portion of the
NONE	- Contribution Cont	Cift I say Cabalage	nin ata Duamana		
	ng Contribution, Grant			etoblo osestos	
unsolicited requests		ation makes gifts, gr		ritable organizations a als or organizations un	
a The name, address, a	and telephone number	or email address of t	he person to whom ap	plications should be add	ressed
b The form in which app	olications should be sul	omitted and informati	on and materials they	should include	
•					
c Any submission dead	lines				

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

Part XV Supplementary Information (continueu)		F 4 D	
3 Grants and Contributions Paid Dur	Ing the Year or App	roved for	Future Payment	
3 Grants and Contributions Paid Dur Recipient Name and address (home or business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Poid during the year	or substantial contributor	recipient		
a Paid during the year	j]	'
ATCH 6				
•		_		
				}
				,
			(
				'
	\			
	1			
			•	
·				
Total				413,000
b Approved for future payment		· · · · · · · · · · · · · · · · · · ·		1137000
b Approved for fature payment				
			•	
•				
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				-
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2200	1	2
~aoe		4

Part XVI	-A Analysis of Income-Prod	ucing Act	ivities			
	amounts unless otherwise indicated	Unrel	ated business income	Excluded b	y section 512, 513, or 514	(e)
4 December		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
•	n service revenue					(See instructions)
						·
		<u> </u>	<u> </u>			
_		:		 -		
e				+		
f				+		
-	and contracts from government agencies			 - -		
	ship dues and assessments			14	67.	
	on savings and temporary cash investments -			 -		
	ds and interest from securities	 -				1
	al income or (loss) from real estate					
	-financed property			 		
	debt-financed property			 ;		
	al income or (loss) from personal property			 		
	vestment income			 -		
	loss) from sales of assets other than inventory			 		
	ome or (loss) from special events · · · rofit or (loss) from sales of inventory					
	venue a				 ,	
	venue a					
e						
	Add columns (b), (d), and (e)	-			67.	
	dd line 12, columns (b), (d), and (e)				13	67.
	neet in line 13 instructions to verify calcu					
Part XVI-	B Relationship of Activities	s to the A	ccomplishment of E	xempt Pur	ooses	
Line No	Explain below how each activity	v for which	n income is reported	ın column (e	e) of Part XVI-A contribi	uted importantly to the
▼	accomplishment of the foundation	-				
			· · · · · · · · · · · · · · · · · · ·			
N/A	N/A					<u> </u>
						<u></u>
				 -		
						
						
	 					
						
					 	
						
						
						
						
					_	
						
			<u></u>			
					_	

Part	XVII	Information Organization		Transfers to and	Transactions	and Relationshi	ps With Noncha	ritable	е Ех	empt
	ın sed	ction 501(c) (ot		ectly engage in any of tion 501(c)(3) organ				-	Yes	No
	-	zations? fors from the rend	ortina foundatio	on to a noncharitable	evemnt organiza	tion of			. '	
			-					12(1)		
										X
		transactions						, - (-)		
	(1) Sa	les of assets to a	noncharitable	exempt organization.				1b(1)		X
	(2) Pu	rchases of assets	s from a nonch	arıtable exempt organ	ızatıon			1b(2)		Х
	(3) Rental of facilities, equipment, or other assets							1b(3)		X
	(4) Re	ımbursement arra	angements					1b(4)		X
	•	_								X
				ership or fundraising						X
				g lists, other assets, o						X
				"Yes," complete the services given by the	_		•			
				rrangement, show in						
(a) Lir		(b) Amount involved		e of nonchantable exempt of			fers, transactions, and sha			
1-7	1	N/A	10,7.2	<u> </u>		N/A			3	
								_		
									-	
	T									
				<u> </u>						
								_	-	
							_			
	-+					·		_		
-	describ		1(c) (other than	y affiliated with, or ren section 501(c)(3)) or	•	•		Ye	s X] No
	11_103	(a) Name of organiz			f organization		(c) Description of relations	hip	_	
										
				examined this return, including than taxpayer) is based on all inf			to the best of my knowledg	e and b	elief, it	is true,
Sign				1	1 20 .		May the IRS	discuss	this	return
Here	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	NDREW SOLHE	/			PRINCIPAL TRU	STEE with the pre	parer si	nown 🕒	
	′ Sigr	nature of Micer of trus	tee	Date	Title	9	See instructions	5 <u>X</u>	Yes	No
	 -,	Print/Type preparer	s name	Preparer's signatu	Ire o to	Date	Chast F	TIN		
Paid		JAMES F BRE		. Toparer o signatu	" Jad Been	5/10/20	Cireck "	20053	3694	8
Prep	arer			I RHOUSECOOPERS L			Firm's EIN 13-40			- -
Use (ENTRAL AVE., SU			THE PERSON NAMED IN		-	
	- ··· ,	5 0001633	PHOENIX,	AZ		85004-4563	Phone no 602-36	4-80	00	
		<u> </u>	· _				1 110110 110	m 990		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

SOLHEIM FOUNDATION 74-2378207 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (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 Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Employer identification number 74-2378207

Part I	Contributors (see instructions) Use duplicate copi	es of Part I if additional space is n	eeded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KARSTEN MANUFACTURING CORP 2201 WEST DESERT COVE AVE PHOENIX, AZ 85029	\$\$.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) . Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	·	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

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

Name of organization SOLHEIM FOUNDATION

Employer identification number

74-2378207

Part II	Noncash Property (see instructions) Use duplicate copies	of Part II if additional space is ne	eded
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
,——			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		 \$	
(a) No. from Part !	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncásh property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	,		
			1

Name of organization SOLHEIM FOUNDATION

Employer identification number

74-2378207 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc. contributions of \$1,000 or less for the year (Enter this information once See instructions) ▶\$ Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (b) Purpose of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

ATTACHMENT 1

FORM 990PF, PART I - OTHER EXPENSES

REVENUE	AND	EXPENSES	PER BOOKS	310.	, 65.	2.
			DESCRIPTION	P.O. BOX RENT	SERVICE FEE	MISCELLANEOUS EXPENSE

TOTALS

CHAKITABLE PURPOSES	377
_	

FORM 990PF, PART VII-A, LINE 10 - SUBSTANTIAL CONTRIBUTORS

ATTACHMENT 2

NAME AND ADDRESS

KARSTEN MANUFACTURING CORP 2201 WEST DESERT COVE AVE PHOENIX, AZ 85029

2019 FORM 990-PF

ATTACHMENT 3

FORM 990PF, PART VII-A -DISTRIBUTION TO A DONOR ADVISED FUND FOR QUALIFYING DISTRIBUTION

NATIONAL CHRISTIAN FUNDATION

ON FEBRUARY 7, 2020, THE SOLHEIM FOUNDATION MADE A CONTRIBUTION TO THE NATIONAL CHRISTIAN FOUNDATION SOLHEIM FOUNDATION FUND, AN ADVISORY FUND. THE SOLHEIM FOUNDATION HAS ADVISORY PRIVILEGES OVER THE SOLHEIM FOUNDATION FUND AND INTENDS TO DISTRIBUTE ALL SUCH FUNDS TO QUALIFYING CHARITABLE ORGANIZATIONS THAT FURTHER THE PURPOSES OF THE SOLHEIM FOUNDATION.

ATTACHMENT 4

FORM 990PF, PART VII-A -DISTRIBUTION TO A DONOR ADVISED FUND FOR SECTION 170 C 2B

NATIONAL CHRISTIAN FUNDATION

N/A

ATTACHMENT 5

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

EXPENSE ACCT AND OTHER ALLOWANCES	0	O	Ö	O	O	ö	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0		Ö	.0	Ö	Ö	0
COMPENSATION	. 0		.0	.0	.0	0	
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE 1.00	TRUSTEE 1.00	TRUSTEE 1.00	TRUSTEE 1.00	TRUSTEE 1.00	TRUSTEE 1.00	GRAND TOTALS
NAME AND ADDRESS	ALLAN SOLHEIM P.O. BOX 84558 PHOENIX, AZ 85071	JOY SOLHEIM P.O. BOX 84558 PHOENIX, AZ 85071	DAVID SOLHEIM P.O. BOX 84558 PHOENIX, AZ 85071	ALLAN SOLHEIM JR. P.O. BOX 84558 PHOENIX, AZ 85071	ANDREW SOLHEIM P.O. BOX 84558 PHOENIX, AZ 85071	CANDY SOLHEIM P.O. BOX 84558 PHOENIX, AZ 85071	

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 6

AMOUNT	373,000	40,000
PURPOSE OF GRANT OR CONTRIBUTION	CELEBRATION OF LIFE DONATION	GENERAL SUPPORT
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT		2
RECIPIENT NAME AND ADDRESS	NATIONAL CHRISTIAN FOUNDATION 11625 RAINWATER DR SUITE 500 ALPHARETTA, GA 30009	AZ REACH 10427 W TRUMBULL ROAD TOLLESON, AZ 85353

413,000

TOTAL CONTRIBUTIONS PAID

Solheim Foundation EIN 74-2378207 YE 06/30/2020 Form 990-PF - Part I - Line 6a and Schedule D Supporting Statement

١

Gain or Loss	NONE
Cost or Basis	3,000 00
Depreclation	NONE
Sale Price	3,000 00
To Whom Sold	Karsten Manufacturing Corporation
Date Sold	11/27/2019 Ke
Date Acquired	11/12/2019
Manner of Acquisition	Donation
Property Description	Putter