

For calendar year 2019, or tax year beginning 09-01-2019, and ending 08-31-2020

Name of foundation WALTER HENRY FREYGANG FOUNDATION		A Employer identification number 22-6027952	
Number and street (or P.O. box number if mail is not delivered to street address) 2794 FORESTVIEW DRIVE		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code AKRON, OH 44333		B Telephone number (see instructions) (330) 867-7406	
G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change		D 1. Foreign organizations, check here..... 2. Foreign organizations meeting the 85% test, check here and attach computation ...	
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 12,234,641		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
J Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check ☒ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	25,830	25,830		
	4 Dividends and interest from securities	183,981	183,981		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 _____	185,144			
	b Gross sales price for all assets on line 6a _____				
		1,286,489			
	7 Capital gain net income (from Part IV, line 2)		185,144		
	8 Net short-term capital gain				
	9 Income modifications				
Operating and Administrative Expenses	10a Gross sales less returns and allowances _____				
	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	394,955	394,955	0	
	13 Compensation of officers, directors, trustees, etc.	600	0	0	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	7,790	1,948	0	0
	c Other professional fees (attach schedule)	57,395	57,395	0	0
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	883	0	0	0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	17,104	17,104	0	0
	22 Printing and publications				
	23 Other expenses (attach schedule)				
	24 Total operating and administrative expenses. Add lines 13 through 23	83,772	76,447	0	0
	25 Contributions, gifts, grants paid	586,680			586,680
	26 Total expenses and disbursements. Add lines 24 and 25	670,452	76,447	0	586,680
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	-275,497			
	b Net investment income (if negative, enter -0-)		318,508		
				0	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	161		
	2 Savings and temporary cash investments	495,798	500,571	500,571
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	4,424,776	4,142,744	10,565,945
	c Investments—corporate bonds (attach schedule)	1,149,400	1,149,400	1,168,125
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	6,070,135	5,792,715	12,234,641	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ ☐ and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ ☒ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	0	0	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	6,070,135	5,792,715	
	29 Total net assets or fund balances (see instructions)	6,070,135	5,792,715	
30 Total liabilities and net assets/fund balances (see instructions) .	6,070,135	5,792,715		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	6,070,135
2 Enter amount from Part I, line 27a	2	-275,497
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	5,794,638
5 Decreases not included in line 2 (itemize) ▶ _____	5	1,923
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	5,792,715

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a PUBLICLY TRADED SECURITIES			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 1,286,489		1,101,345	185,144
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			185,144
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	185,144
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	521,917	10,889,445	0.047929
2017	494,669	10,526,346	0.046993
2016	463,779	9,764,215	0.047498
2015	462,999	9,376,689	0.049378
2014	473,329	9,710,515	0.048744

2 Total of line 1, column (d)	2	0.240542
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.048108
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	11,222,282
5 Multiply line 4 by line 3	5	539,882
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	3,185
7 Add lines 5 and 6	7	543,067
8 Enter qualifying distributions from Part XII, line 4	8	586,680

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 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 here ☒ and enter 1% of Part I, line 27b	1	3,185
c	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.	3	3,185
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	3,185
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	3,200
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	3,200
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	15
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 15 Refunded ▶	11	0

Part VII-A Statements Regarding Activities

	Yes	No
1a 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?		No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>		No
c Did the foundation file Form 1120-POL for this year?		No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0 (2) On foundation managers. ▶ \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		No
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? <i>If "Yes," attach a conformed copy of the changes</i>		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		No
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? <i>If "Yes," attach the statement required by General Instruction T.</i>		No
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 conflict with the state law remain in the governing instrument?	Yes	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	Yes	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ OH		
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? <i>If "No," attach explanation .</i>	Yes	
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 taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>		No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>		No

Part VII-A 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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	13	Yes	
14	The books are in care of ► <u>APPLE GROWTH PARTNERS</u> Telephone no. ► <u>(330) 867-7350</u>			

Located at ► 1540 WEST MARKET ST AKRON OHZIP+4 ► 44313

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	► 15		
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
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

		Yes	No
1a	During the year did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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 ☒ 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 ☒ No		
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	
	Organizations relying on a current notice regarding disaster assistance check here. ► ☐		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c	No
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)):		
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? ☐ Yes ☒ No If "Yes," list the years ► 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No		
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to:		Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No		
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	☐ Yes ☒ No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	☐		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d).	☐ Yes ☐ No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No	7b	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	☐ Yes ☒ No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(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) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
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		
Total number of others receiving over \$50,000 for professional services. ►		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

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.	1a	10,746,264
b	Average of monthly cash balances.	1b	646,916
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	11,393,180
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	11,393,180
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	170,898
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	11,222,282
6	Minimum investment return. Enter 5% of line 5.	6	561,114

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	561,114
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	3,185
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	3,185
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	557,929
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	557,929
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	557,929

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	586,680
b	Program-related investments—total from Part IX-B.	1b	0
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:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	586,680
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	3,185
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	583,495

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				557,929
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			139,084	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.				
c From 2016.				
d From 2017.				
e From 2018.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ <u>586,680</u>				
a Applied to 2018, but not more than line 2a			139,084	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				447,596
e Remaining amount distributed out of corpus	0			
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:	0			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
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		
d Subtract line 6c from line 6b. Taxable amount—see instructions.		0		
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.				110,333
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
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.	0			
10 Analysis of line 9:				
a Excess from 2015.				
b Excess from 2016.				
c Excess from 2017.				
d Excess from 2018.				
e Excess from 2019.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
b 85% of line 2a					
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					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
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 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)					
(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					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

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

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	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
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	586,680
b <i>Approved for future payment</i>				
Total			▶ 3b	0

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments. . . .						
3 Interest on savings and temporary cash investments				14	25,830	
4 Dividends and interest from securities. . . .				14	183,981	
5 Net rental income or (loss) from real estate:						
a Debt-financed property.						
b Not debt-financed property.						
6 Net rental income or (loss) from personal property						
7 Other investment income.						
8 Gain or (loss) from sales of assets other than inventory				18	185,144	
9 Net income or (loss) from special events:						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue: a _____						
b _____						
c _____						
d _____						
e _____						
12 Subtotal. Add columns (b), (d), and (e). . .			0		394,955	0
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)				13		394,955

[illegible]

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- | | | | | |
|---|--|--------------|------------|-----------|
| 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | | Yes | No |
| a Transfers from the reporting foundation to a noncharitable exempt organization of: | | | | |
| (1) Cash. | | 1a(1) | | No |
| (2) Other assets. | | 1a(2) | | No |
| b Other transactions: | | | | |
| (1) Sales of assets to a noncharitable exempt organization. | | 1b(1) | | No |
| (2) Purchases of assets from a noncharitable exempt organization. | | 1b(2) | | No |
| (3) Rental of facilities, equipment, or other assets. | | 1b(3) | | No |
| (4) Reimbursement arrangements. | | 1b(4) | | No |
| (5) Loans or loan guarantees. | | 1b(5) | | No |
| (6) Performance of services or membership or fundraising solicitations. | | 1b(6) | | No |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. | | 1c | | No |
| d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | | | |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

* * * * *

2020-12-15

Signature of officer or trustee

Date _____

Title

May the IRS discuss this return with the preparer shown below

(see instr.) ☒ Yes ☐ No

**Paid
Preparer
Use Only**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ☐	PTIN
	ROBERT W FISHER CPA		2020-12-15		P00358676
	Firm's name ▶ APPLE GROWTH PARTNERS				Firm's EIN ▶ 34-1082617
	Firm's address ▶ 1540 WEST MARKET ST AKRON, OH 44313				Phone no. (330) 867-7350

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
DALE G FREYGANG 2794 FOREST VIEW DR AKRON, OH 44333	PRES/TREAS 3.00	150	0	0
JAMES DRENNAN 5 BONA COURT PARK RIDGE, NJ 07656				
ANTJE FREYGANG 36727 LEITH LANE MIDDLEBURG, VA 20117	TRUSTEE 1.00	0	0	0
W NICHOLAS F FREYGANG PO BOX 1229 CEDAR CREST, NM 87008				
STEVEN FREYGANG 15 146TH AVE SE BELLEVUE, WA 98007	SECRETARY 1.00	150	0	0
EDWARD DRENNAN 62 CAMPBELL AVE WOODCLIFF LAKE, NJ 07677				
KATHERINE A FREYGANG 10 PINE ST CORNWALL, CT 067530036	VICE PRESIDENT 1.00	0	0	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
Name and address (home or business)				
a <i>Paid during the year</i>				
AKRON CHILDREN'S HOSPITAL MEDICAL CENTER 1 PERKINS SQUARE AKRON, OH 443081062	NONE	PC	GENERAL SUPPORT	24,560
AKRON CIVIC THEATER182 S MAIN ST AKRON, OH 44308	NONE	PC	GENERAL SUPPORT	1,500
ALZHEIMERS ASSOC 225 N MICHIGAN AVE CHICAGO, IL 606017633	NONE	PC	MEDICAL RESEARCH	6,830
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN PRINTING HOUSE FOR THE BLIND PO BOX 6085 LOUISVILLE, KY 402060085	NONE	PC	GENERAL SUPPORT	10,390
BONNIE BRAE3415 VALLEY ROAD LIBERTY CORNER, NJ 079380825	NONE	PC	TROUBLED YOUTH FACILITY	7,580
CAMP ACORN INCPO BOX 1389 PARAMUS, NJ 07653	NONE	PC	GENERAL SUPPORT	5,930
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
CANINE COMPANIONS FOR INDEPENDENCE PO BOX 446 SANTA ROSA, CA 954020446	NONE	PC	GENERAL SUPPORT	7,680
CITYLINK CENTER800 BANK ST CINCINNATI, OH 45214	NONE	PC	GENERAL SUPPORT	1,500
CLEVELAND ORCHESTRA 11001 EUCLID AVE CLEVELAND, OH 44106	NONE	PC	GENERAL SUPPORT	3,990
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
CONNECTICUT COLLEGE 270 MOHEGAN AVENUE NEW LONDON, CT 063204196	NONE	PC	HIGHER EDUCATION	7,320
COPLEY-FAIRLAWN SCHOOLS FOUNDATION 3797 RIDGEWOOD ROAD COPLEY, OH 44321	NONE	PC	GENERTAL SUPPORT	1,110
DISABLED AMERICAN VETERAN PO BOX 14301 CINCINNATI, OH 452500301	NONE	PC	GENERAL SUPPORT	1,270
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
EAST MOUNTAIN HIGH SCHOOL PO BOX 1852 SANDIA PARK, NM 87047	NONE	PC	SUPPORT EDUCATION	7,310
FOX CHASE CANCER CENTER 333 COTTMAN AVE PHILADELPHIA, PA 19111	NONE	PC	GENERAL SUPPORT	11,520
FRED HUTCHINSON CANCER RESEARCH CENTER 1100 FAIRVIEW AVE N SEATTLE, WA 981091024	NONE	PC	CANCER RESEARCH	2,550
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
FRIENDS OF HERMITAGE 335 NORTH FRANKLIN TURNPIKE HOHOKUS, NJ 07423	NONE	PC	GENERAL SUPPORT	1,000
GENNESARET INCPO BOX 1253 CUYAHOGA FALLS, OH 44223	NONE	PC	GENERAL SUPPORT	1,990
GUIDE DOG FND FOR THE BLIND 371 EAST JERICO TU SMITHTOWN, NY 11787	NONE	PC	GUIDE DOGS FOR VISUALLY IMPAIRED	12,250
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
HABITAT FOR HUMANITY - SUMMIT COUNTY 2301 ROMIG ROAD AKRON, OH 44320	NONE	PC	GENERAL SUPPORT	3,230
HABITAT FOR HUMANITY INTERNATIONAL 121 HABITAT STREET AMERICUS, GA 317093498	NONE	PC	GENERAL SUPPORT	6,090
HATHAWAY BROWN SCHOOL 19600 NORTH PARK BL SHAKER HEIGHTS, OH 44122	NONE	PC	EDUCATION	8,410
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
Name and address (home or business)				
a <i>Paid during the year</i>				
HEARING HEALTH FOUNDATION 363 7TH AVE 10TH FLOOR NEW YORK, NY 100013904	NONE	PC	GENERAL SUPPORT	6,640
HENRY H KESSLER FOUNDATION 1199 PLEASANT VALLE WEST ORANGE, NJ 07052	NONE	PC	REHAB HOSP/RESEARCH	12,620
HENRY STREET SETTLEMENT 301 HENRY ST 1ST FLOOR NEW YORK, NY 10002	NONE	PC	GENERAL SUPPORT	1,000
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
HILLSDALE HELPING HILLSDALE 101 WASHINGTON AVE WESTWOOD, NJ 07675	NONE	PC	GENERAL SUPPORT	3,460
INT'L CENTER FOR THE DISABLED 340 EAST 24TH STREET NEW YORK, NY 10010	NONE	PC	GENERAL SUPPORT	15,580
IVY HILL THERAPEUTIC EQUESTRIAN CENTER 1811 MILL RD PERKASIE, PA 18944	NONE	PC	GENERAL SUPPORT	3,000
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
JUSTIN T ROGERS HOSPICE 3358 RIDGEWOOD ROAD AKRON, OH 44333	NONE	PC	GENERAL SUPPORT	8,600
KENT STATE UNIVERSITY FOUNDATION 1935 E MAIN STREET KENT, OH 44224	NONE	PC	PUBLIC BROADCASTING	7,530
LEARNING ALLY20 ROSZEL RD PRINCETON, NJ 08540	NONE	PC	VISUALLY IMPAIRED	8,180
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
Name and address (home or business)				
a <i>Paid during the year</i>				
MANZANO DAY SCHOOL 1801 CENTRAL AVE NW ALBUQUERQUE, NM 87104	NONE	PC	EDUCATION	4,380
MAYO CLINIC13400 EAST SHEA BLVD SCOTTSDALE, AZ 85259	NONE	PC	GENERAL SUPPORT	11,290
MCDONOGH SCHOOL 8600 MCDONOGH ROAD OWINGS MILLS, MD 21117	NONE	PC	SUPPORT PRIVATE SCHOOL	7,680
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
Name and address (home or business)				
a <i>Paid during the year</i>				
MEALS WITH A MISSION 63 HARRISON AVE GARFIELD, NJ 07026	NONE	PC	GENERAL SUPPORT	3,190
MOBILE MEALS INC 1357 HOME AVE STE 1 AKRON, OH 44310	NONE	PC	MEAL SV FOR NEEDY	20,470
MOUNT HOLYOKE COLLEGE 50 COLLEGE STREET SOUTH HADLEY, MA 010751496	NONE	PC	GENERAL FUND	12,710
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
Name and address (home or business)				
a <i>Paid during the year</i>				
NATIONAL PUBLIC RADIO 635 MASSACHUSETTS AVE NW WASHINGTON, DC 20001	NONE	PC	GENERAL SUPPORT	9,070
NAT'L INST FOR PEOPLE W DISABILITIES 460 WEST 34TH STREE NEW YORK, NY 100012382	NONE	PC	GENERAL SUPPORT	2,210
NEW HOPE PRC149 THIRD AVE WESTWOOD, NJ 07675	NONE	PC	GENERAL SUPPORT	3,990
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
NJSAR NJ SEARCH & RESCUE RAMAPO VALLEY RD MAHWAH, NJ 07430	NONE	PC	GENERAL SUPPORT	1,000
NJTVPO BOX 5776 ENGLEWOOD, NJ 07631	NONE	PC	GENERAL SUPPORT	6,800
NY-NJ TRAIL CONFERENCE 600 RAMAPO VALLEY RD MAHWAH, NJ 07430	NONE	PC	GENERAL SUPPORT	500
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
OASIS HAVEN FOR WOMEN & CHILDREN 59 MILL ST PATERSON, NJ 07501	NONE	PC	GENERAL SUPPORT	1,500
OPEN M941 PRINCETON STREET AKRON, OH 44333	NONE	PC	GENERAL SUPPORT	1,990
OUR LADY OF MERCY CATHOLIC CHURCH SCHOOL 2 FREMONT AVENUE PARK RIDGE, NJ 07656	NONE	PC	GENERAL SUPPORT	6,410
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
OUTDOOR FOR ALL FOUNDATION 6344 NE 74TH ST SUITE 102 SEATTLE, WA 98115	NONE	PC	GENERAL SUPPORT	3,000
PASCACK MENTAL HEALTH CENTER PO BOX 126 PARK RIDGE, NJ 07656	NONE	PC	GENERAL SUPPORT	6,500
PASCACK VALLEY MEALS ON WHEELS OLD HOOK ROAD WESTWOOD, NJ 07675	NONE	PC	GENERAL SUPPORT	20,470
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
Name and address (home or business)				
a <i>Paid during the year</i>				
PAWS FOR PURPLE HEARTS 5860 LABATH AVE STE A ROHNERT PARK, CA 94928	NONE	PC	GENERAL SUPPORT	7,130
PERKINS SCHOOL FOR BLIND 175 NORTH BEACON ST WATERTOWN, MA 021722790	NONE	PC	ASSISTANCE TO BLIND STUDENTS	6,440
PHILADEPHIA FUTURES 215 SOUTH BROAD STREET PHILADELPHIA, PA 19107	NONE	PC	GENERAL SUPPORT	5,490
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
PHILLIPS ACADEMY180 MAIN STREET ANDOVER, MA 018104161	NONE	PC	EDUCATION	4,860
PREVENT BLINDNESS AMERICA 211 WEST WACKER DRIVE CHICAGO, IL 60606	NONE	PC	GENERAL SUPPORT	10,620
QUINNIPIAC UNIVERSITY MOUNT CARMEL AVE HAMDEN, CT 065180569	NONE	PC	EDUCATION	4,850
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
REED COLLEGE3203 SE WOODCOCK PORTLAND, OR 97202	NONE	PC	GENERAL SUPPORT	8,570
RHODE ISLAND SCHOOL OF DESIGN 2 COLLEGE STREET PROVIDENCE, RI 029032786	NONE	PC	EDUCATION	15,580
RUTGERS UNIVERSITY 604 ALLISON ROAD PISCATAWAY, NJ 088548082	NONE	PC	GENERAL SUPPORT	8,170
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a Paid during the year				
SANDIA PREPARATORY SCHOOL 532 OSUNA ROAD NE ALBUQUERQUE, NM 87113	NONE	PC	GENERAL SUPPORT	3,460
SHRINERS HOSPITALS FOR CHILDREN PO BOX 31356 TAMPA, FL 336313356	NONE	PC	GENERAL SUPPORT	20,470
SPENCE-CHAPIN SV TO FAMILIES & CHILDREN 6 EAST 94TH STREET NEW YORK, NY 10128	NONE	PC	GENERAL SUPPORT	11,070
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
SPROUT THERAPUTIC RIDINGPO BOX 8 ALDIE, VA 20105	NONE	PC	GENERAL SUPPORT	3,650
STEVENS INSTITUTE OF TECHNOLOGY CASTLE POINT HOBOKEN, NJ 07030	NONE	PC	SUPPORT HIGHER EDUCATION	38,850
THE CHORE SERVICEPO BOX 522 LAKEVILLE, CT 06039	NONE	PC	GENERAL SUPPORT	1,000
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
THE MOUNTAINEERS 7700 SAND POINT WAY SEATTLE, WA 98115	NONE	PC	GENERAL SUPPORT	2,550
TOMORROWS CHILDREN'S FUND 30 PROSPECT AVE HACKENSACK, NJ 07601	NONE	PC	GENERAL SUPPORT	1,000
TRI-BORO VOLUNTEER AMBULANCE 10 MILL LANE PARK RIDGE, NJ 07656	NONE	PC	GENERAL SUPPORT	2,880
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
UNITED WAY OF BERGEN COUNTY 690 KINDERKAMACK RO ORADEL, NJ 076499972	NONE	PC	GENERAL SUPPORT	3,410
UNITED WAY OF SUMMIT COUNTY 37 NORTH HIGH STREET AKRON, OH 44308	NONE	PC	GENERAL SUPPORT	6,060
UNIVERSITY OF MARYLAND 2101 TURNER BUILDIN COLLEGE PARK, MD 20742	NONE	PC	EDUCATION	8,170
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
UNIVERSITY OF NEW MEXICO FOUNDATION 700 LOMAS NE ALBUQUERQUE, NM 87102	NONE	PC	GENERAL SUPPORT	17,040
UNIVERSITY OF WASHINGTON 1410 NE CAMPUS PARKWAY SEATTLE, WA 98195	NONE	PC	PUBLIC EDUCATION	2,550
USC INSTITUTE OF UROLOGY 1441 EASTLAKE AVENUE SUITE 7416 LOS ANGELES, CA 90089	NONE	PC	MEDICAL RESEARCH	3,650
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
VALLEY HOME HEALTH CARE INC 15 ESSEX ROAD PARAMUS, NJ 07652	NONE	PC	GENERAL SUPPORT	9,760
WESTERN RESERVE PUBLIC MEDIA PO BOX 5191 KENT, OH 442405191	NONE	PC	GENERAL SUPPORT	8,400
WGBH EDUCATIONAL FND ONE GUEST ST BOSTON, MA 02135	NONE	PC	PUBLIC BROADCASTING	7,420
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
WIDE RAINBOW279 E 3RD STREET NEW YORK, NY 10003	NONE	PC	GENERAL SUPPORT	1,000
WNET THIRTEEN WNET 450 WEST 33RD STREE NEW YORK, NY 10001	NONE	PC	SUPPORT PUBLIC BROADCASTING	14,750
WOODLAND PARK ZOO 5500 PHINNEY AVE N SEATTLE, WA 98103	NONE	PC	GENERAL SUPPORT	6,200
Total ▶ 3a				586,680

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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
Name and address (home or business)				
a <i>Paid during the year</i>				
WORCESTER POLYTECHNIC INSTITUTE 100 INSTITUTE ROAD WORCESTER, MA 016092280	NONE	PC	EDUCATION	15,580
WORLD VISIONPO BOX 9716 FEDERAL WAY, WA 980639716	NONE	PC	GENERAL SUPPORT	1,270
WILDLIFE CONSERVATION SOCIETY 2300 SOUTHERN BOULEVARD BRONX, NY 10460	NONE	PC	GENERAL SUPPORT	1,000
Total ▶ 3a				586,680

TY 2019 Accounting Fees Schedule**Name:** WALTER HENRY FREYGANG FOUNDATION**EIN:** 22-6027952

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	7,790	1,948	0	0

TY 2019 Investments Corporate Bonds Schedule**Name:** WALTER HENRY FREYGANG FOUNDATION**EIN:** 22-6027952**Investments Corporate Bonds Schedule**

Name of Bond	End of Year Book Value	End of Year Fair Market Value
DISCOVER BANK 1.5% 11/2/20	100,000	100,242
DISCOVER BANK 3.0% 07/19/21	100,000	102,502
FIRST SOURCE BANK 3.05% 5/16/22	100,000	104,650
GOLDMAN SACHS 0% 9/29/21	100,000	99,330
JP MORGAN 1% 6/17/20	200,000	200,097
SYCHRONY BANK 1.7% 10/21/21	99,400	101,676
TIAA FSB	100,000	104,893
ALLY BANK 1.950% 09/26/22	150,000	154,982
GOLDMAN SACHS 1.950% 01/23/23	100,000	100,092
MUTUALONE BANK 0.350% 08/07/23	100,000	99,661

TY 2019 Investments Corporate Stock Schedule

Name: WALTER HENRY FREYGANG FOUNDATION
 EIN: 22-6027952

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ABBOTT LABS 5000SHS	163,142	547,350
ADOBE SYSTEMS INC 2200SHS	53,410	1,026,780
ALPHABET INC CL A 250 SHS	85,073	407,383
ALPHABET INC CL C 250 SHS	84,569	408,545
AMERICAN EXPRESS 3500SHS	36,288	355,565
AMGEN INC 1500SHS	78,563	379,980
AUTODESK INC 2000 SHS	219,607	491,400
BANK NEW YORK MELLON 1000 SHS	24,356	25,760
CISCO SYSTEMS INC 8,000 SHS	154,273	337,760
CVS HEALTH CORP 3000SHS	111,886	186,360
EXXON MOBIL CORP 3000SHS	16,480	119,820
HCA HOLDINGS INC 3000SHS	205,346	407,160
HONEYWELL INTL 2000SHS	239,885	331,100
ILLINOIS TOOL WORKS 1800SHS	94,592	355,590
INTL BUSINESS MACH 1400SHS	170,300	172,634
INTL FLAVOR & FRAGRANCES 2500 SHS	208,253	309,475
ISHARES TR MSCI	403,001	445,400
JOHNSON & JOHNSON 2500SHS	146,848	383,525
LOWES COMPANIES 3500SHS	82,494	576,415
ORACLE CORP 7000 SHS	148,608	400,540
PEPSICO 2500SHS	164,649	350,150
PFIZER INC 7000 SHS	61,946	158,718
PROCTOR & GAMBLE 3000SHS	208,100	414,990
STRYKER CORP 2000SHS	92,026	396,320
VISA INC CLASS A 2500 SHS	198,382	529,975
WALMART STORES INC 2600 SHS	122,691	361,010
RAYTHEON COMPANY NEW	199,741	305,000
BLACKSTONE GROUP INC. CL A 7200 SHS	368,235	381,240

TY 2019 Other Decreases Schedule

Name: WALTER HENRY FREYGANG FOUNDATION

EIN: 22-6027952

Description	Amount
COST ADJUSTMENT	1,923

TY 2019 Other Professional Fees Schedule**Name:** WALTER HENRY FREYGANG FOUNDATION**EIN:** 22-6027952

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	57,395	57,395	0	0

TY 2019 Taxes Schedule**Name:** WALTER HENRY FREYGANG FOUNDATION**EIN:** 22-6027952

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE FILING FEES	200	0	0	0
FEDERAL EXCISE TAX	683	0	0	0