

Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

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

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 ▶ **Go to www.irs.gov/Form990PF for instructions and the latest information.**

OMB No. 1545-0052
2019
Open to Public Inspection

For calendar year 2019, or tax year beginning 01-01-2019 , and ending 12-31-2019

Name of foundation CLARA ABBOTT FOUNDATION		A Employer identification number 36-6069632	
Number and street (or P.O. box number if mail is not delivered to street address) 1175 TRI-STATE PARKWAY SUITE 200	Room/suite	B Telephone number (see instructions) (800) 972-3859	
City or town, state or province, country, and ZIP or foreign postal code GURNEE, IL 60031		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here..... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <u>320,597,021</u>		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule)	8,453			
2	Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
3	Interest on savings and temporary cash investments				
4	Dividends and interest from securities	6,812,660	6,812,660		
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	4,821,317			
b	Gross sales price for all assets on line 6a 62,066,650				
7	Capital gain net income (from Part IV, line 2)		4,821,317		
8	Net short-term capital gain				
9	Income modifications				
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)	26,823	0		
12	Total. Add lines 1 through 11	11,669,253	11,633,977		
13	Compensation of officers, directors, trustees, etc.	738,431	73,843		664,588
14	Other employee salaries and wages				
15	Pension plans, employee benefits	195,102	19,510		175,592
16a	Legal fees (attach schedule)				
b	Accounting fees (attach schedule)	38,965	0		38,965
c	Other professional fees (attach schedule)	450,319	450,319		0
17	Interest				
18	Taxes (attach schedule) (see instructions)	113,000	0		0
19	Depreciation (attach schedule) and depletion	52,186	0		
20	Occupancy				
21	Travel, conferences, and meetings	329	0		329
22	Printing and publications				
23	Other expenses (attach schedule)	2,196,077	40,228		2,155,849
24	Total operating and administrative expenses. Add lines 13 through 23	3,784,409	583,900		3,035,323
25	Contributions, gifts, grants paid	8,729,108			8,729,108
26	Total expenses and disbursements. Add lines 24 and 25	12,513,517	583,900		11,764,431
27	Subtract line 26 from line 12:				
a	Excess of revenue over expenses and disbursements	-844,264			
b	Net investment income (if negative, enter -0-)		11,050,077		
c	Adjusted net income (if negative, enter -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			
	2 Savings and temporary cash investments	612,822	1,009,397	1,009,397
	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)	234,971,684	233,783,032	319,438,200
	c Investments—corporate bonds (attach schedule)			
	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 ▶ _____ 289,883 Less: accumulated depreciation (attach schedule) ▶ 140,459	201,611	149,424	149,424
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	235,786,117	234,941,853	320,597,021	
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 ▶ <input type="checkbox"/> 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 ▶ <input checked="" type="checkbox"/> 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	235,786,117	234,941,853	
29 Total net assets or fund balances (see instructions)	235,786,117	234,941,853		
30 Total liabilities and net assets/fund balances (see instructions) .	235,786,117	234,941,853		

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	235,786,117
2 Enter amount from Part I, line 27a	2	-844,264
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	234,941,853
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	234,941,853

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 HIRTLE CALLAGHAN MARKETABLE INVESTMENTS	P	2017-11-30	2019-12-31
b CAPITAL GAINS DIVIDENDS	P		
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 53,662,768		57,245,333	-3,582,565
b 8,403,882			8,403,882
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			-3,582,565
b			8,403,882
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	4,821,317
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	11,642,489	275,465,982	0.042265
2017	11,275,539	255,469,354	0.044137
2016	9,425,184	230,344,402	0.040918
2015	9,100,481	248,429,699	0.036632
2014	6,988,383	250,123,333	0.027940
2 Total of line 1, column (d)			0.191892
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			0.038378
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5			293,847,667
5 Multiply line 4 by line 3			11,277,286
6 Enter 1% of net investment income (1% of Part I, line 27b)			110,501
7 Add lines 5 and 6			11,387,787
8 Enter qualifying distributions from Part XII, line 4			11,764,431

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)

Table with 11 rows for excise tax calculations. Includes sub-rows 6a-6d for credits and payments. Total amount owed is 10,133, with 10,133 refunded.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, 'Yes', and 'No' responses. Includes questions about political activities, Form 1120-POL, and state reporting.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question number, Question text, and Yes/No columns. Rows 11-14.

Located at 1175 TRI-STATE PARKWAY SUITE 200 GURNEE IL ZIP+4 60031

Table with 3 columns: Question number, Question text, and Yes/No columns. Rows 15-16.

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.

Main table for Part VII-B with 3 columns: Question number, Question text, and Yes/No columns. Rows 1a-4b.

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))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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	No
Organizations relying on a current notice regarding disaster assistance check here.		▶ <input type="checkbox"/>			
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? <i>If "Yes," attach the statement required by Regulations section 53.4945-5(d).</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870.</i>				6b	No
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
b If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?				7b	
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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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
LUIS HERNANDEZ 28383 KEATON DRIVE RANCHO BELAGO, CA 92555	FINANCIAL CONSULTING	69,103
R&M CONSULTING SERVICES ANILLO VIAL FRAY JUNIPERO SERRA 1550 COLONIA PRIVADA ARBOLEDAS, QUARETARO CP 76140 MX	FINANCIAL CONSULTING	68,739
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 EDUCATIONAL GRANTS AND RELATED EXPENSES:THE FOUNDATION PROVIDES NEED-BASED EDUCATIONAL GRANTS TO HELP THE DEPENDENT CHILDREN OF ELIGIBLE ABBOTT EMPLOYEES AND RETIREES ATTEND ACCREDITED COLLEGES OR UNIVERSITIES, COMMUNITY COLLEGES, VOCATIONAL AND TRADE SCHOOLS. DURING THE YEAR, 1,871 GRANTS WERE AWARDED WORLDWIDE.	3,686,802
2 FINANCIAL AID AND RELATED EXPENSES:THE FOUNDATION PROVIDES NEED-BASED FINANCIAL GRANTS TO ASSIST ELIGIBLE ABBOTT EMPLOYEES AND RETIREES WHO ARE EXPERIENCING SEVERE FINANCIAL HARDSHIP. DURING THE YEAR, 1,618 AWARDS WERE ISSUED WORLDWIDE.	6,225,986
3	0
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 304,543,590
b	Average of monthly cash balances.	1b 1,068,508
c	Fair market value of all other assets (see instructions).	1c 0
d	Total (add lines 1a, b, and c).	1d 305,612,098
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.	3 305,612,098
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 11,764,431
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 293,847,667
6	Minimum investment return. Enter 5% of line 5.	6 14,692,383

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 14,692,383
2a	Tax on investment income for 2019 from Part VI, line 5.	2a 110,501
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b
c	Add lines 2a and 2b.	2c 110,501
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3 14,581,882
4	Recoveries of amounts treated as qualifying distributions.	4 0
5	Add lines 3 and 4.	5 14,581,882
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 14,581,882

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 11,764,431
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 11,764,431
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.	5 110,501
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6 11,653,930

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				14,581,882
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			2,901,826	
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>11,764,431</u>				
a Applied to 2018, but not more than line 2a			2,901,826	
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.				8,862,605
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:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
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				5,719,277
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:

See Additional Data Table

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

See Additional Data Table

c Any submission deadlines:

See Additional Data Table

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

See Additional Data Table

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> FINANCIAL AID AND EDUCATIONAL SEMINARS SEE STATEMENT 14 1175 TRI-STATE PARKWAY SUITE 200 GURNEE, IL 60031	NONE	N/A	GENERAL ASSISTANCE	5,373,702
SCHOLARSHIP GRANTS SEE STATEMENT 14 1175 TRI-STATE PARKWAY SUITE 200 GURNEE, IL 60031	NONE	N/A	EDUCATIONAL ASSISTANCE	3,355,406
Total ▶ 3a				8,729,108
b <i>Approved for future payment</i>				
Total ▶ 3b				0

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

Part XVII

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?

a Transfers from the reporting foundation to a noncharitable exempt organization of:

- (1) Cash.
- (2) Other assets.

b Other transactions:

- (1) Sales of assets to a noncharitable exempt organization.
- (2) Purchases of assets from a noncharitable exempt organization.
- (3) Rental of facilities, equipment, or other assets.
- (4) Reimbursement arrangements.
- (5) Loans or loan guarantees.
- (6) Performance of services or membership or fundraising solicitations.

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

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.

	Yes	No
1a(1)		No
1a(2)		No
1b(1)		No
1b(2)		No
1b(3)		No
1b(4)		No
1b(5)		No
1b(6)		No
1c		No

(a) Line No.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

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

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.

Sign Here

***** 2020-11-12 *****

Signature of officer or trustee Date Title

May the IRS discuss this return with the preparer shown below (see instr.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
--

Paid Preparer Use Only	Print/Type preparer's name DORI J EGGETT	Preparer's Signature	Date 2020-11-12	Check if self-employed <input type="checkbox"/>	PTIN P00645252
	Firm's name ▶ PLANTE & MORAN PLLC				Firm's EIN ▶ 38-1357951
	Firm's address ▶ 10 S RIVERSIDE PLAZA 9TH FLOOR CHICAGO, IL 60606				Phone no. (312) 207-1040

Form 990FP 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
ALLEN HUBERT	DIRECTOR (JAN-JULY), SECRETARY (AUG) 1.00	0	0	0
1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031				
BERRY JOHN	DIRECTOR (APR - DEC) 1.00	0	0	0
1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031				
BROCK CHARLES	DIRECTOR (JAN - APR) 1.00	0	0	0
1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031				
FUNCK ROBERT	DIRECTOR 1.00	0	0	0
1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031				
FUSSELL STEPHEN	PRESIDENT (JAN - JULY) 1.00	0	0	0
1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031				
HUANG GENE	DIRECTOR 1.00	0	0	0
1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031				
HURWICH THOMAS	DIRECTOR 1.00	0	0	0
1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031				
LINDER GREG	DIRECTOR 1.00	0	0	0
1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031				
MORELAND MARY	SECRETARY (JAN-JULY), PRESIDENT (AUG) 1.00	0	0	0
1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031				
MURRAY CORLIS	DIRECTOR 1.00	0	0	0
1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031				
SALVADORI DANIEL	DIRECTOR 1.00	0	0	0
1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031				
SHOULTZ AJ	DIRECTOR 1.00	0	0	0
1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031				
TREACY SEAN	DIRECTOR (AUG - DEC) 1.00	0	0	0
1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031				
WAINER ANDREA	DIRECTOR 1.00	0	0	0
1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031				
WENTWORTH BRIAN	DIRECTOR 1.00	0	0	0
1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031				

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
YIEN VALENTINE 1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031	DIRECTOR 1.00	0	0	0
YOOR BRIAN 1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031	DIRECTOR 1.00	0	0	0
CLAYTON MAUREEN 1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031	VICE PRESIDENT 40.00	0	0	0
KEITH SHERI 1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031	TREASURER 40.00	0	0	0
ABBOTT LABORATORIES - PURSUANT TO 1175 TRI-STATE PARKWAY STE 200 GURNEE, IL 60031	IRS ANNOUNCEMENT 2001-33 1.00	738,431	0	0

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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

THE CLARA ABBOTT FOUNDATION DOMESTI
SCHOLARSHIP AMERICA ONE SCHOLARSHIP
WAY
SAINT PETER, MN 56082
(847) 937-1090

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

ONLINE APPLICATION IS ACCESSED AND COMPLETED THROUGH THE CLARA ABBOTT FOUNDATION WEBSITE AT [HTTPS://CLARA.ABBOTT.COM/SAMPLE-PAGE-2/SCHOLARSHIP-2/](https://clara.abbott.com/sample-page-2/scholarship-2/). INFORMATION REQUESTED INCLUDES BUT IS NOT LIMITED TO APPLICANT AND PARENT(S) NAMES, ADDRESS, TOTAL NUMBER OF DEPENDENTS, TOTAL FAMILY INCOME, OTHER FINANCIAL INFORMATION AS APPLICABLE, AND SCHOOL INFORMATION. THE FOLLOWING DOCUMENTS MUST BE ATTACHED OR UPLOADED TO THE APPLICATION: PARENT (S) INCOME DOCUMENTS, THE FIRST TWO PAGES OF THE PARENT(S) FEDERAL US 1040 TAX RETURN (FOR U.S. ONLY), AND MOST RECENT SCHOOL GRADE REPORT. APPLICATIONS ARE AVAILABLE IN ENGLISH, SPANISH, PORTUGUESE AND RUSSIAN.

c Any submission deadlines:

APRIL 15TH

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

ONE PARENT MUST BE A CURRENT ABBOTT EMPLOYEE WITH AT LEAST TWO YEARS OF SERVICE AS OF THE APPLICATION DEADLINE OR A RETIREE OF ABBOTT WHO IS AT LEAST 50 YEARS OF AGE WITH A MINIMUM OF 10 YEARS OF CONTINUOUS SERVICE. STUDENT MUST BE A LEGAL DEPENDENT, UNMARRIED, AGE 17-24 AS OF THE APPLICATION DEADLINE, AND CURRENTLY IN COLLEGE, OR EQUIVALENT OR EXPECTS TO ATTEND COLLEGE, OR EQUIVALENT. NO STUDENTS OF HIGH EARNERS RECEIVE A SCHOLARSHIP.

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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

THE CLARA ABBOTT INTERNATIONAL SCHO
1175 TRI-STATE PARKWAY SUITE 200
GURNEE, IL 60031
(847) 937-1090

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

ONLINE APPLICATION IS ACCESSED AND COMPLETED THROUGH THE CLARA ABBOTT FOUNDATION WEBSITE AT [HTTPS://CLARA.ABBOTT.COM/SAMPLE-PAGE-2/SCHOLARSHIP-2/](https://clara.abbott.com/sample-page-2/scholarship-2/). INFORMATION REQUESTED INCLUDES BUT IS NOT LIMITED TO APPLICANT AND PARENT(S) NAMES, ADDRESS, TOTAL NUMBER OF DEPENDENTS, TOTAL FAMILY INCOME, OTHER FINANCIAL INFORMATION AS APPLICABLE, AND SCHOOL INFORMATION. THE FOLLOWING DOCUMENTS MUST BE ATTACHED OR UPLOADED TO THE APPLICATION: PARENT (S) INCOME DOCUMENTS, THE FIRST TWO PAGES OF THE PARENT(S) FEDERAL US 1040 TAX RETURN (FOR U.S. ONLY), AND MOST RECENT SCHOOL GRADE REPORT. APPLICATIONS ARE AVAILABLE IN ENGLISH, SPANISH, PORTUGUESE AND RUSSIAN.

c Any submission deadlines:

CYCLE 1 DEADLINE: FEB 15TH, CYCLE 2 DEADLINE: MAY 15TH, CYCLE 3 DEADLINE: OCT 15TH. SEE STMT 15

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

ONE PARENT MUST BE A CURRENT ABBOTT EMPLOYEE WITH AT LEAST TWO YEARS OF SERVICE AS OF THE APPLICATION DEADLINE OR A RETIREE OF ABBOTT WHO IS AT LEAST 50 YEARS OF AGE WITH A MINIMUM OF 10 YEARS OF CONTINUOUS SERVICE. STUDENT MUST BE A LEGAL DEPENDENT, UNMARRIED, AGE 17-24 AS OF THE APPLICATION DEADLINE, AND CURRENTLY IN COLLEGE, OR EQUIVALENT OR EXPECTS TO ATTEND COLLEGE, OR EQUIVALENT. NO STUDENTS OF HIGH EARNERS RECEIVE A SCHOLARSHIP.

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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

THE CLARA ABBOTT FOUNDATION
1175 TRI-STATE PARKWAY SUITE 200
GURNEE, IL 60031
(847) 937-1090

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

ONLINE APPLICATION IS ACCESSED AND COMPLETED THROUGH THE CLARA ABBOTT FOUNDATION WEBSITE AT [HTTPS://CLARA.ABBOTT.COM/FINANCIAL-ASSISTANCE/APPLICATIONS/](https://clara.abbott.com/financial-assistance/applications/). INFORMATION REQUESTED INCLUDES BUT IS NOT LIMITED TO APPLICANT NAME, ADDRESS, TOTAL NUMBER OF DEPENDENTS, THE REASON THE GRANT IS NEEDED, THE INTENDED USE OF THE GRANT, THE AMOUNT NEEDED, AND SUBSTANTIAL FINANCIAL INFORMATION CONCERNING THE APPLICANT'S FINANCIAL STATUS (E.G., TOTAL FAMILY INCOME, TOTAL CASH, SAVINGS, MONTHLY EXPENSES, ETC.). THE FOLLOWING DOCUMENTS MUST BE ATTACHED OR UPLOADED TO THE APPLICATION: INCOME DOCUMENTS AND BILLS/QUOTES ASSOCIATED WITH REQUEST. APPLICATIONS ARE AVAILABLE IN ENGLISH, SPANISH, PORTUGUESE AND RUSSIAN.

c Any submission deadlines:

NONE

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

MUST BE A CURRENT ABBOTT EMPLOYEE WITH AT LEAST TWO YEARS OF SERVICE, OR A RETIREE OF ABBOTT WHO IS AT LEAST 50 YEARS OF AGE WITH A MINIMUM OF 10 YEARS OF CONTINUOUS SERVICE. PROVABLE FINANCIAL HARDSHIP IS A PRE-REQUISITE FOR ALL GRANTS.

TY 2019 Accounting Fees Schedule**Name:** CLARA ABBOTT FOUNDATION**EIN:** 36-6069632

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	38,965	0		38,965

TY 2019 Cash Deemed Charitable Explanation Statement

Name: CLARA ABBOTT FOUNDATION

EIN: 36-6069632

Explanation: PART X - LINE 4 MINIMUM INVESTMENT RETURN THE CLARA ABBOTT FOUNDATION CHOOSES TO USE THE AMOUNT OF ADMINISTRATIVE EXPENSES AND DISBURSEMENTS, AS SHOWN IN PART I LINE 26D OF THE RETURN, AS THE EXCLUDED CASH BALANCE AMOUNT OF THE MINIMUM INVESTMENT RETURN DUE TO THE HIGH EXPENSES AND DISTRIBUTIONS.

TY 2019 General Explanation Attachment

Name: CLARA ABBOTT FOUNDATION

EIN: 36-6069632

General Explanation Attachment

Identifier	Return Reference	Explanation	
1	DEADLINE SUBMISSIONS FOR INTERNATIONAL PROGRAMS	990-PF PART XV LINE 2C	INTERNATIONAL PROGRAM CYCLE DEADLINE DETAIL: CYCLE 1 DEADLINE: FEB 15TH (CHINA, INDIA, INDONESIA, JAPAN, MALAYSIA, NORWAY, PHILIPPINES, RUSSIA, SINGAPORE AND THAILAND) CYCLE 2 DEADLINE: MAY 15TH (ARUBA, AUSTRIA, BAHAMAS, BELARUS, BELGIUM, BOSNIA, CANADA, CROATIA, CURACAO, CZECH REPUBLIC, DENMARK, DOM. REPUBLIC, DUBAI, ECUADOR, EGYPT, ESTONIA, FINLAND, FRANCE, GERMANY, GREECE, HONG KONG, HUNGARY, IRELAND, ISRAEL, ITALY, JORDAN, KAZAKHSTAN, KUWAIT, LATVIA, LEBANON, LITHUANIA, MEXICO, NETHERLANDS, NIGERIA, POLAND, PORTUGAL, ROMANIA, SAUDI ARABIA, SERBIA, SLOVAKIA, SLOVENIA, SPAIN, SWEDEN, SWITZERLAND, TAIWAN, TRINIDAD, TURKEY, UNITED KINGDOM, UZBEKISTAN, VENEZUELA, VIETNAM, AND YEMEN) CYCLE 3 DEADLINE: OCT 15TH (ARGENTINA, AUSTRALIA, BRAZIL, CHILE, COLUMBIA, COSTA RICA, EL SALVADOR, GUATEMALA, HONDURAS, JAMAICA, NEW ZEALAND, NICARAGUA, PAKISTAN, PANAMA, PERU, SOUTH AFRICA, SOUTH KOREA, AND URUGUAY)

General Explanation Attachment

Identifier	Return Reference	Explanation	
2	GRANTS AND CONTRIBUTIONS	990-PF PART XV LINE 3	*INFORMATION RELATING TO THE FINANCIAL AID AND EDUCATIONAL SEMINARS IS CONFIDENTIAL INFORMATION AND IS NOT INCLUDED WITH THIS TAX RETURN. *INFORMATION RELATING TO THE SCHOLARSHIP GRANTS, IS AVAILABLE AT THE TAXPAYER'S OFFICE 1175 TRI-STATE PARKWAY, STE 200, GURNEE, IL 60031

TY 2019 Investments Corporate Stock Schedule**Name:** CLARA ABBOTT FOUNDATION**EIN:** 36-6069632**Investments Corporation Stock Schedule**

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ABBOTT STOCK	18,776,147	105,008,702
CAPITAL PRESERVATION FUND-PRINCIPLE	294,928	294,928
HIRTLE CALLAGHAN	214,711,957	214,134,570

TY 2019 Other Expenses Schedule**Name:** CLARA ABBOTT FOUNDATION**EIN:** 36-6069632**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADMINISTRATIVE EXPENSE	768,392	7,684		760,708
BANK CHARGES	32,544	32,544		0
FINANCIAL ASSISTANCE PROGRAM	852,284	0		852,284
INSURANCE EXPENSE	14,113	0		14,113
MARKETING EXPENSE	197,349	0		197,349
SCHOLARSHIP PROGRAM	331,395	0		331,395

TY 2019 Other Income Schedule**Name:** CLARA ABBOTT FOUNDATION**EIN:** 36-6069632**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER INCOME	26,823		26,823

TY 2019 Other Professional Fees Schedule**Name:** CLARA ABBOTT FOUNDATION**EIN:** 36-6069632

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PORTFOLIO MANAGERS FEE	450,319	450,319		0

TY 2019 Taxes Schedule**Name:** CLARA ABBOTT FOUNDATION**EIN:** 36-6069632

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL INCOME TAXES	113,000	0		0

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors
▶ Attach to Form 990, 990-EZ, or 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047
2019

Name of the organization
CLARA ABBOTT FOUNDATION

Employer identification number
36-6069632

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other 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 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
CLARA ABBOTT FOUNDATION

Employer identification number
36-6069632

Part I

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SHARON A RUSHBROOK 2551 HADDOW AVE DOWNERS GROVE, IL 60515	\$ 5,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization CLARA ABBOTT FOUNDATION	Employer identification number 36-6069632
---	--

Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions). Use duplicate copies of Part II if additional space is needed.</small>	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____

Name of organization
CLARA ABBOTT FOUNDATION

Employer identification number
36-6069632

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 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 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 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 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	
_____ _____		_____ _____	