SCANNED JAN 0 7 2020

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

2018

OMB No 1545-0052

Form 990-PF

| Department of the Treasury Internal Revenue Service So to www.irs.gov/Form990PF for instructions and the latest information Open to Public Ins | | | | | | | | pen to Public Inspection | | | | |
|--|--|---|--|-------------------|--------------------|---------------------|--------------------------|--|----------------------------------|--|--|--|
| For calendar year 2018 or tax year beginning | | | | | , 2018, and ending | | | | ing | ng, 20 | | |
| N | ame o | f foundation GUS | TAVUS AND LOU | JISE | PFEIFFER RESEARCH | | | | A Employer identification number | | | |
| _ | FOU | NDATION | | | | | | | 13-608629 | 19 | | |
| N | umber | and street (or P O box | x number if mail is not del | vered to | street ac | ldress) | | Room/suit | e | B Telephone numb | per (see instructions) | |
| | FOU | NDATION SOUR | CE 501 SILVER | SIDE | RD | | | | , | (800) 839-1754 | | |
| City or town, state or province, country, and ZIP or foreign post | | | n postal | code | | | l . | | (000) | | | |
| | MTT | MINGTON, DE | 10000 1277 | | | | | | | C If exemption applic pending, check here | ation is | |
| _ | | eck all that apply | Initial return | | $\overline{}$ | Initial satura | of a former p | uhlic cho | F183.4 | | | |
| G | Che | ck all triat apply | Final return | | | Amended re | • | Jublic Clia | ן אייי | 1 Foreign organiza 2 Foreign organiza | | |
| | | | Address cha | nae | - | Name chang | | | ľ | 85% test, check | here and attach | |
| Н | Che | ck type of organiz | ation X Section | |)(3) ex | | <u></u> | \sim | $\overline{}$ | computation . | | |
| Ϊ | _ | | onexempt charitable to | r | | ther taxable p | | tion U C | 1 | | n status was terminated | |
| i | | market value of | · · · · · · · · · · · · · · · · · · · | | | | ash X Acc | | | | b)(1)(A), check here . | |
| | | of year (from Pa | l F | \neg | ner (sp | | | | | | o)(1)(8), check here | |
| | | | _ | | | (d) must be on c | ash basis) | | | | | |
| | art | | enue and Expenses | | (a) F | Revenue and | | | | | (d) Disbursements | |
| | | may not necessar | n columns (b), (c), and ily equal the amounts i | | | penses per books | (b) Net inve | | (C |) Adjusted net income | for charitable purposes (cash basis only) | |
| - | | column (a) (see ins | * | + | | 4 | | | A PARTIE T | And September 1 | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | 1 2 | Check X if the | s, etc., received (attach conod foundation is not require | uio) . | HEAR! | | | を記録を登録 | The sales | なに、大学には、大学には、 | 是一种的一种的一种的一种的一种的一种的一种的一种的一种的一种的一种的一种的一种的一 | |
| | 3 | attac | h Sch B | · · · F | "红田香红花 | 3,794 | a range and property of | 3,794. | or was the | eg. Teturishkim Ilinoklish | · · · · · · · · · · · · · · · · · · · | |
| | 3 4 | _ | d temporary cash investmest from securities. | | | 551,286 | | 1,286. | | | The state of the s | |
| | - | Gross rents | | · · · · | | | | | | | | |
| | 1 | Net rental income or (I | | 7.3 | THE WAY | | | | 1 | | SANTEN PROPERTY | |
| <u>o</u> | 1 | Net gain or (loss) from | sale of assets not on line | : 10 | | 1,402,849 | | STATE OF THE STATE | 語記 | SETTING THE | 的大學是他是記述法述。 | |
| Revenue | b | Gross sales price for a assets on line 6a | 2,475,3 | | 遊戲 | 達型製作體質 | 對於整點的 | 質問題と | 野野野 | AND THE PROPERTY OF THE PARTY O | 经验证证证证证 | |
| Š | 7 | Capital gain net inc | come (from Part IV, line | 2) . 🤅 | 和難論 | では、 | | 2,849. | 認能 | 認的組織的機能的 | 的複雜數是維持的概念 | |
| œ | 8 | Net short-term cap | ital gain | | 11 | 新生物學 | "是是你是是 | | | | STATE STATES | |
| | 9 | Income modification | | | | | | | Other Secretaria Secretaria | and if there is a Serie and a series of the standard | | |
| | 10 a | Gross sales less returns and allowances | | 17 | | | | NEW PER | | | 管理機能は指揮性の 時では、これの本語を表現である。 である。 | |
| | | Less, Cost of goods so | | | 18.58.0E | 指置的語言 | LEAST VILLE COLL SHEET | | ALE PARTY OF | | STANTON CONTRACTOR OF THE STANTON | |
| | 1 | |) (attach schedule) | | | 26,000. | ABART SIL | | | | THE PROPERTY OF THE PROPERTY O | |
| | 11 12 | | ch schedule) ATCH hrough 11 | | - | 1,983,929. | | 7,929. | | - | ····································· | |
| - | | | | | • | 42,200. | | 4,220. | | | 37,980 | |
| S | 13 | Other employee sal | ers, directors, trustees, et laries and wages | · · · | | _,_,, | | , == - • | | | 1 | |
| Expenses | 15 | Pension plans, emp | | 3 2 | | | | | | - | | |
| ā | 16 a | Legal fees (attach s | | <u> </u> | - | 1,150. | | | | | 1,380 | |
| ũ | ь | • | tach schedule) ATCA | BU | | 11,205. | | | | | 11,205 | |
| <u>Š</u> | 17 18 19 20 21 22 23 24 | | fees (attach schedule) | - | 78 | | | | | | | |
| rat | 17 | Interest | 60 | 2010 | 181 | | | | | | | |
| iist | 18 | Taxes (attach sched | (see) (see) (sudloss) | [4]\i | 10 | 19,510. | | | | | | |
| Ē | 19 | Depreciation (attac | schedule)-and-deple | Hon == | _]≝ | | | | | | | |
| ᅙ | 20 | Occupancy | OGDEN | I, U∏ | _ | 21 005 | <u></u> | 2 102 | | | 57 | |
| ਰੂ | 21 | Travel, conferences | and meetings | | | 21,925. | | 2,193. | | | 26,988 | |
| ā | 22 | Printing and publica | | · <u>·</u> · · - | _ | 72,799. | | 525. | | | 69,070 | |
| ij. | 23 | • • | tach schedule) ATCH | | | 12,133. | | 323. | | | 03,070. | |
| Ĭ | 24 | | d administrative expe | nses | | 168,789. | | 6,938. | | | 146,680. | |
| þe | 25 | _ | jh 23 | ···⊦ | | 100,700. | THE THE SERVE | 和正式线键 线 | 學為 | Delay Reine Ass | 2,050,000 | |
| U | 25 26 | | , grants paid ursements Add lines 24 a | | | L,968,789. | とかれ、湯の水の水が大きなかってる | 6,938. | was the | 0 | 2,196,680. | |
| _ | 27 | Subtract line 26 fro | | u 23 | - | | Manage and | 第129900000000000000000000000000000000000 | 海湖长 | | | |
| | | | r expenses and disburser | nents | | 15,140. | | | | | | |
| | | | ome (if negative, enter | <u> </u> | | | 1,95 | 0,991. | No. of the | | | |
| | | | ne (if negative, enter -0 | 23 | | | THE REAL PROPERTY. | | y- 00 He | The state of the s | | |
| F | _ | | Act Notice, see instru | | - 445.1 | | | | | | Form 990-PF (2018) | |

JSA For Paperwork Reduction Act Notice, see instructions. 8E1410 1 000

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| "Part II | | Dalamas Chasta | Attached schedules and amounts in the description column should be for end-of-year | | Er | d of year |
|----------------------|-------------|--|--|--|--|--|
| | art II | Balance Sneets | amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-beari | ng | | | |
| | 2 | Savings and temporary | cash investments | 279,363. | | |
| | | | | sind distantantal property | The state of the s | to the sales and the sales as the sales as the |
| | | Less allowance for doul | otful accounts ► | | | |
| | 4 | Pledges receivable ▶ | <u> </u> | | 42 36 | |
| | | Less allowance for doul | btful accounts ► | | | _ |
| - | 5 | Grants receivable | | | ···· | |
| - | 6 | Receivables due from o | officers, directors, trustees, and other | | | |
| | | disqualified persons (att | ach schedule) (see instructions) | | | |
| | 7 | Other notes and loans re | eceivable (attach schedule) 🕨 | | A GAN TON HER AN | |
| | | Less allowance for doub | otful accounts > | | | |
| ध | 8 | Inventories for sale or us | e | | | |
| Assets | 9 | Prepaid expenses and de | eferred charges | 3,010. | 26,70 | 6. 26,706 |
| ۲ | | | e government obligations (attach schedule). | | | |
| | b | Investments - corporate | stock (attach schedule) ATCH 6 | 23,201,067. | 20,270,90 | 20,270,901 |
| | c | Investments - corporate | bonds (attach schedule) | | | |
| | 11 | Investments - land, buildings and equipment basis | • | Man and the water of the grade was | The state of the s | and the second second second second |
| | | Less accumulated deprecia (attach schedule) | tion > | | | |
| | | • | loans | | | · |
| | 13 | Investments - other (atta | ch schedule) | | | |
| | | Land buildings, and equipment hasis | > | Commercial description of the Commercial Com | The Board was about the | المنسئة لمسلمك المتعادلة ا |
| ı | | Less accumulated deprecial (attach schedule) | tion > | | | |
| - 1 | | Other assets (describe > | • | | | |
| ı | 16 | Total assets (to be | completed by all filers - see the | | | |
| | | | age 1, item I) | 23,483,440. | 20,614,62 | 20,614,620. |
| \neg | | | ccrued expenses | 109,738. | 74,25 | O. ' |
| | | • • | | 250,000. | | • |
| ဖွ | | | | | | ; |
| 劃 | | | rs, trustees, and other disqualified persons | | | |
| -=1 | | | tes payable (attach schedule) | | | - 1 |
| Ϊ | 22 | Other liabilities (describe | · - | | | 1 |
| | | | | | | , , |
| \perp | 23 | Total liabilities (add line | s 17 through 22) | 359,738. | 74,25 | 0. |
| П | | Foundations that follow | SFAS 117, check here X | | | 1 |
| alances | i | and complete lines 24 t | hrough 26, and lines 30 and 31. | | | |
| 일 | 24 | Unrestricted | | 23,123,702. | 20,540,37 |). |
| <u>a</u> | 25 | Temporarily restricted . | | | | - 1 |
| 8 | 26 | | | | | 1 |
| 틸 | | Foundations that do no | t follow SFAS 117, check here | | | - { |
| 띠 | | and complete lines 27 t | | | | - [|
| Net Assets or Fund B | 27 | Capital stock, trust princ | apal, or current funds | | | |
| 윎 | 28 1 | | land, bldg, and equipment fund | | | |
| SS | 29 1 | Retained earnings, accumu | lated income, endowment, or other funds | | | * |
| إ∑ | 30 | Total net assets or fund | balances (see instructions) | 23,123,702. | 20,540,370 |). |
| 2 | 31 | | net assets/fund balances (see | | | |
| - | | nstructions) | | 23,483,440. | 20,614,620 |). |
| Pa | art III | Analysis of Char | nges in Net Assets or Fund Bala | nces | | |
| | | | alances at beginning of year - Part | | must agree with | |
| | | | d on prior year's return) | | - | 23,123,702. |
| 2 | | | line 27a | | | 15,140. |
| | | | | | | |
| | | | | | | 23,138,842. |
| | | eases not included in | | | | 2,598,472. |
| | | | alances at end of year (line 4 minus | line 5) - Part II, column (I | b), line 30 6 | 20,540,370. |

| Рa | rt IV Capital Gains | and Losses for Tax on Inve | estment Income | | | |
|------------|--|--|--|-------------------------------------|---|----------------------------------|
| | ` ' | scribe the kind(s) of property sold (for erick warehouse, or common stock, 200 | • | (b) How acquired P - Purchase | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
| _ | | | | D - Donation | (,,, , | |
| <u>1 a</u> | | JOHE | | | | |
| <u>b</u> | | | | | | |
| <u>u</u> | | | | | | |
| е | | | | | | |
| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | (h) Gain or (los ((e) plus (f) minu | |
| a | | | | | | · |
| b | | | | | | ***** |
| c | | | | | | |
| d | | | | • | | |
| <u>e</u> | | have a sale of calling (b) and award | by the foundation on 12/21/60 | | · · · · · · · · · · · · · · · · · · · | |
| | Complete only for assets s | howing gain in column (h) and owned | T.' | | Gains (Col (h) ga (k), but not less th | |
| | (i) FMV as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (i) over col (j), if any | | Losses (from col | |
| a | , | | | | | |
| <u>b</u> | | | | | | |
| <u>c</u> | | | | | | |
| <u>d</u> | | | | | | |
| <u> </u> | | | Dath bar 7 | | _ | |
| 2 | Capital gain net income | or (not capital loce) | ain, also enter in Part I, line 7 bss), enter -0- in Part I, line 7 | 2 | 1, | 402,849. |
| 3 | Net short-term capital g | ain or (loss) as defined in sections | | | | |
| | If gain, also enter in P | art I, line 8, column (c) See ins | tructions If (loss), enter -0- in | - | | |
| | | | | 3 | | 0 |
| | | | duced Tax on Net Investment In e section 4940(a) tax on net investr | | | |
| Was | | | outable amount of any year in the ba | ase perio | d? |] Yes ∑ No |
| 1 | · · | | ar, see the instructions before maki | ng anv er | ntries | |
| · | (a) | (b) | (c) | , | (d) | |
| Cale | Base period years endar year (or tax year beginning in) | Adjusted qualifying distributions | Net value of noncharitable-use assets | | Distribution ra (col (b) divided by | |
| | 2017 | 4,570,447. | 25,028,307. | | | 0.182611 |
| | 2016 | 1,982,484. | 23,383,984. | | | 0.084780 |
| | 2015 | 3,624,760. | 24,504,573. | | | 0.147922 |
| | 2014 | 950,610. | 27,029,446. | | | 0.035169 |
| | 2013 | 767,270. | 24,586,130. | · · | | 0.031207 |
| _ | Takal of line 4 column (| ٦, | | 2 | | 0.481689 |
| 2 | · · · · · · · · · · · · · · · · · · · | d) | | | | 0.101005 |
| 3 | • | o for the 5-year base period - dividi foundation has been in existence i | | 3 | | 0.096338 |
| | the number of years the | Touridation has been in existence i | il less than 5 years | | | |
| 4 | Enter the net value of no | oncharitable-use assets for 2018 fi | rom Part X, line 5 | 4 | 21, | 837,154. |
| | | | | | | |
| 5 | Multiply line 4 by line 3. | | | 5 | 2, | 103 <u>,</u> 748. |
| | | | | | | 10 510 |
| 6 | Enter 1% of net investm | ent income (1% of Part I, line 27b). | | 6 | | 19,510. |
| 7 | Add lines 5 and 6. | | | 7 | 2, | 123,258. |
| - | | | | | 0 | 106 600 |
| 8 | Enter qualifying distribut If line 8 is equal to or g Part VI instructions | reater than line 7, check the box | ın Part Vî, line 1b, and complete | 8 that part | | 196,680. |



| | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see | instru | uction | s) |
|----------|--|----------|--------|---------------------|
| | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 | -, - | | İ |
| | 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 | | 19,5 | 10. |
| | here X and enter 1% of Part I, line 27b | e en | | . 4 |
| С | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of | · , | | |
| | Part I, line 12, col (b) | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) | | | |
| 3 | Add lines 1 and 2 | | 19,5 | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) | | 10 5 | 0. |
| 5 | Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0 | | 19,5 | <u>,10.</u> |
| 6 | Credits/Payments | | | |
| а | 2018 estimated tax payments and 2017 overpayment credited to 2018 6a 46,103. | | | [|
| ь | Exempt foreign organizations - tax withheld at source | ٠ | - , | |
| С | Tax paid with application for extension of time to file (Form 8868) | | ١., | - { |
| d | Backup withholding erroneously withheld | | 46,1 | 03 |
| 7 | Total credits and payments Add lines 6a through 6d | | 40,1 | .03. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here | | | |
| 9 | Tax data in the total of mice of the most and mice in the most and in the most | | 26,5 | 93. |
| 10 11 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | 993. |
| _ | t VII-A Statements Regarding Activities | | | |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | T | Yes | No |
| 14 | participate or intervene in any political campaign? | 1a | 1,55 | X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the | | | |
| _ | instructions for the definition | 1b | | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | 7 |
| | published or distributed by the foundation in connection with the activities | | _ | |
| С | Did the foundation file Form 1120-POL for this year? | 1c | | X |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | |
| | (1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$ | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | |
| | on foundation managers \$ | | - | <u>,-</u> |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | X |
| | If "Yes," attach a detailed description of the activities | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles | | ~ | Ĭ. |
| | of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | 3 | | $\frac{\lambda}{X}$ |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a 4b | | <u> </u> |
| Ь | If "Yes," has it filed a tax return on Form 990-T for this year? | 5 | | X |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 1 | | |
| | If "Yes," attach the statement required by General Instruction T | | | |
| 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 | | | i |
| | conflict with the state law remain in the governing instrument? | 6 | X | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV | 7 | Х | |
| , 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. | | | I |
| | ME, MA, NJ, NY, | | -,, * | |
| ь | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | <u>.</u> | | |
| - | (or designate) of each state as required by General Instruction G ² If "No," attach explanation | 8b | Х | |
| 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 2018 or the tax year beginning in 2018? See the instructions for Part XIV If "Yes," | 1 | | |
| | complete Part XIV | 9 | | Х |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | |
| | names and addresses | 10 | | X |
| | | om 99 | 0-PF | (2018) |

| Pai | t VII-A Statements Regarding Activities (continued) | | | |
|-----|--|---------|----------|-------------|
| , | | | Yes | No |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | | | |
| | meaning of section 512(b)(13)? If "Yes," attach schedule See instructions | 11 | | Х |
| 12 | | | | |
| | person had advisory privileges? If "Yes," attach statement. See instructions | 12 | | X_ |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х | |
| | Website address N/A | | | |
| 14 | The books are in care of ► FOUNDATION SOURCE Telephone no ► 800-839 | -175 | 4 | |
| | Located at ▶501 SILVERSIDE ROAD, SUITE 123 WILMINGTON, DE ZIP+4 ▶ 19809-1 | 377 | | |
| 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 | | | |
| 16 | At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority | , | Yes | No |
| | over a bank, securities, or other financial account in a foreign country? | 16 | | Х |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of | | | |
| | the foreign country | | | l |
| Par | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a | During the year, did the foundation (either directly or indirectly) | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | 1 | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | - | - | |
| | disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No | 1 | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | 1 | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for | | | |
| | the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the | | | |
| | foundation agreed to make a grant to or to employ the official for a period after | | | |
| | termination of government service, if terminating within 90 days) | | | |
| b | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | ļ |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions | 1b | | Х |
| | Organizations relying on a current notice regarding disaster assistance, check here | • | 1 | |
| С | 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 2018? | 1c | | Х |
| 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)) | | | |
| а | At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and | 1 | | |
| | 6e, Part XIII) for tax year(s) beginning before 2018? Yes X No | | | |
| | If "Yes," list the years ,,, | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to | ļ | | ļ |
| | all years listed, answer "No" and attach statement - see instructions) | 2b | | |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | 1 | | } |
| | > | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise | | | |
| | at any time during the year? | | 1 | · |
| b | If "Yes," did it have excess business holdings in 2018 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 | | | 1 |
| | the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the | | ļ | |
| | foundation had excess business holdings in 2018) | 3b | | |
| | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | - | Х |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | | ļ | |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018? | 4b | <u> </u> | Х |

| Pai | t VII-B Statements Regarding Activities | for Which Form | 4720 May Be Req | uired (con | tinued) | | | |
|----------|--|---|---|---------------------------------|--|------------|--------|-----|
| `5a | During the year, did the foundation pay or incur any am | ount to | | | | | Yes | No |
| | (1) Carry on propaganda, or otherwise attempt to influ | ence legislation (section | n 4945(e))? | . Yes | X No | | | |
| | (2) Influence the outcome of any specific public ele | | | | | | | |
| | directly or indirectly, any voter registration drive? | | | . Yes | X No | | | |
| | (3) Provide a grant to an individual for travel, study, or o | | | 1 1 | X No | | | |
| | (4) Provide a grant to an organization other than a | | | | | | | |
| | section 4945(d)(4)(A)? See instructions | - | | | X No | | | |
| | (5) Provide for any purpose other than religious, cl | | | | | | | |
| | purposes, or for the prevention of cruelty to children | | | | X No | | | |
| b | If any answer is "Yes" to 5a(1)-(5), did any of the | transactions fail to | qualify under the e | xceptions de | scribed in | | | |
| | Regulations section 53 4945 or in a current notice regain | | | | | 5 b | | |
| | Organizations relying on a current notice regarding disa | ster assistance, check | here | | ▶[| | | |
| С | If the answer is "Yes" to question 5a(4), does the | foundation claim e | xemption from the t | ax | | | | |
| | because it maintained expenditure responsibility for the | | | | No | i. | | |
| | If "Yes," attach the statement required by Regulations s | | | | | i: | | |
| 6a | Did the foundation, during the year, receive any ful | | ectly, to pay premiur | ns | | | | |
| | on a personal benefit contract? | | | . Yes | X No | | | |
| b | Did the foundation, during the year, pay premiums, dire | | | ict? | | 6b | | X |
| | If "Yes" to 6b, file Form 8870 | | | | | | | |
| 7a | At any time during the tax year, was the foundation a p | arty to a prohibited ta | x shelter transaction?. | . Yes | X No | | | |
| b | If "Yes," did the foundation receive any proceeds or ha | | | | | 7b | | |
| 8 | Is the foundation subject to the section 4960 tax on pa | yment(s) of more tha | ın \$1,000,000 ın | | | | | |
| | remuneration or excess parachute payment(s) during the | year ⁹ | <u> </u> | . Yes | X No | | | |
| Pai | t VIII Information About Officers, Directo | rs, Trustees, Fou | ındation Manager: | s, Highly P | aid Empl | oyees, | | |
| 1 | and Contractors List all officers, directors, trustees, and foundat | ion managers and | their compensation | . See ınstruc | tions. | | | |
| | | (b) Title, and average | (c) Compensation | (d) Contribu | tions to | – | - acco | ınt |
| | (a) Name and address | | (If not paid. | | | (e) Expens | | |
| | (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | employee ben and deferred co | efit plans | other all | | |
| 7.00 | | hours per week | (If not paid, enter -0-) | employee ben | efit plans mpensation | | | s |
| ATC | | hours per week | (If not paid, | employee ben | efit plans | | | |
| ATCI | | hours per week | (If not paid, enter -0-) | employee ben | efit plans mpensation | | | s |
| ATCI | | hours per week | (If not paid, enter -0-) | employee ben | efit plans mpensation | | | s |
| ATC | | hours per week | (If not paid, enter -0-) | employee ben | efit plans mpensation | | | s |
| ATCI | | hours per week | (If not paid, enter -0-) | employee ben | efit plans mpensation | | | s |
| ATC | | hours per week | (If not paid, enter -0-) | employee ben | efit plans mpensation | | | s |
| | i 8 | hours per week devoted to position | (If not paid, enter -0-) 42,200. | employee ben and deferred co | efit plans mpensation | other all | owance | 0. |
| ATC: | | hours per week devoted to position | (If not paid, enter -0-) 42,200. | employee ben and deferred co | efit plans mpensation | other all | owance | 0. |
| 2 | Compensation of five highest-paid employees "NONE." | hours per week devoted to position | (If not paid, enter-0-) 42,200. | employee ben and deferred co | efit plans mpensation 0 . | ns). If no | owance | 0. |
| 2 | Compensation of five highest-paid employees | (other than those hours per week | (If not paid, enter -0-) 42,200. | e 1 - see (d) Contribuenployee | instruction instruction itions to benefit beferred | other all | one, | O. |
| 2 | Compensation of five highest-paid employees "NONE." | (other than those | (If not paid, enter-0-) 42,200. | e 1 - see (d) Contribu | instruction instruction itions to benefit beferred | ns). If no | one, | O. |
| 2 (a) | Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000 | (other than those hours per week | (If not paid, enter-0-) 42,200. | e 1 - see (d) Contribuenployee | instruction instruction itions to benefit beferred | ns). If no | one, | O. |
| 2 (a) | Compensation of five highest-paid employees "NONE." | (other than those hours per week | (If not paid, enter-0-) 42,200. | e 1 - see (d) Contribuenployee | instruction instruction itions to benefit beferred | ns). If no | one, | O. |
| 2 (a) | Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000 | (other than those hours per week | (If not paid, enter-0-) 42,200. | e 1 - see (d) Contribuenployee | instruction instruction itions to benefit beferred | ns). If no | one, | O. |
| 2 (a) | Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000 | (other than those hours per week | (If not paid, enter-0-) 42,200. | e 1 - see (d) Contribuenployee | instruction instruction itions to benefit beferred | ns). If no | one, | O. |
| 2 (a) | Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000 | (other than those hours per week | (If not paid, enter-0-) 42,200. | e 1 - see (d) Contribuenployee | instruction instruction itions to benefit beferred | ns). If no | one, | O. |
| 2 (a) | Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000 | (other than those hours per week | (If not paid, enter-0-) 42,200. | e 1 - see (d) Contribuenployee | instruction instruction itions to benefit beferred | ns). If no | one, | O. |
| 2 (a) | Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000 | (other than those hours per week | (If not paid, enter-0-) 42,200. | e 1 - see (d) Contribuenployee | instruction instruction itions to benefit beferred | ns). If no | one, | O. |
| 2 (a) | Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000 | (other than those hours per week | (If not paid, enter-0-) 42,200. | e 1 - see (d) Contribuenployee | instruction instruction itions to benefit beferred | ns). If no | one, | O. |
| 2 (a) | Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000 | (other than those hours per week | (If not paid, enter-0-) 42,200. | e 1 - see (d) Contribuenployee | instruction instruction itions to benefit beferred | ns). If no | one, | O. |
| (a) | Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000 | (other than those (b) Title, and average hours per week devoted to position | (If not paid, enter-0-) 42,200. 42,200. | e 1 - see (d) Contribuenployee | instruction ns). If no | one, | O. |

| 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 |
| | |
| ATCH 9 | 65,75 |
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| | <u>.</u> |
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| | |
| Total number of others receiving over \$50,000 for professional services ▶ | |
| Part IX-A Summary of Direct Charitable Activities | |
| List the foundation's four largest direct 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 75TH ANNIVERSARY CONVENING DREW TOGETHER GRANTEES, FUNDING | |
| PARTNERS AND FOUNDATION MEMBERS TO DISCUSS RESEARCH RESULTS, | |
| CURRENT IMPACT, AND OPPORTUNITIES FOR COLLABORATION. | 6,338 |
| 2 | |
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| 3 | |
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| 4 | |
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| | |
| 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 NONE | |
| I . | |
| | |
| | |
| 2 | |
| 2 | |
| 2 | |
| All other program-related investments See instructions | |
| 3 | |
| | |

| Pa | Minimum Investment Return (All domestic foundations must complete this part. For see instructions.) | eign found | ations, |
|-----|--|--------------|------------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes | 194 - | |
| а | Average monthly fair market value of securities | 1a | 21,915,959. |
| | Average of monthly cash balances | 1b | 253,741. |
| | Fair market value of all other assets (see instructions). | | |
| | Total (add lines 1a, b, and c) | | 22,169,700. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | , | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | | |
| 3 | Subtract line 2 from line 1d | | 22,169,700. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see | | |
| | instructions) | 4 | 332,546. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. | 5 | 21,837,154. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 1,091,858. |
| Pa | rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ▶ and do not complete this part) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 1,091,858. |
| 2 a | Tax on investment income for 2018 from Part VI, line 5 2a 19,510 | | |
| b | | | |
| c | | 2c | 19,510. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 1 1 | 1,072,348. |
| 4 | Recoveries of amounts treated as qualifying distributions | | |
| 5 | Add lines 3 and 4 | | 1,072,348. |
| 6 | Deduction from distributable amount (see instructions) | | |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, | | |
| | line 1 | 7 | 1,072,348. |
| | rt XII Qualifying Distributions (see instructions) | | |
| 1_ | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | استد | 2,196,680. |
| a | | | 2,190,000. |
| ь | The gram to account the contract of the contra | 1b | |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the | **** | |
| a | | | |
| b | | \vdash | 2,196,680. |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 2,190,080. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income | | 10 510 |
| _ | Enter 1% of Part I, line 27b See instructions. | | 19,510. 2,177,170. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | \ | |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when converting 4040(c) reduction of tax in these years. | aiculating v | vnetner the foundation |
| | qualifies for the section 4940(e) reduction of tax in those years | | |

| | rt XIII Undistributed Income (see instru | (a) | (b) | (c) | (d) |
|----|---|------------|---------------------------------------|---|--------------------|
| 1 | Distributable amount for 2018 from Part XI, | Corpus | Years prior to 2017 | 2017 | 2018 1,072,348. |
| 2 | Undistributed income, if any, as of the end of 2018 | | | | |
| | Enter amount for 2017 only. | | | | |
| F | Total for pnor years 20 16 ,20 15 ,20 14 | | | | |
| | Excess distributions carryover, if any, to 2018 | | | | |
| | From 2013 | | | | |
| | From 2014 | ** | 1 .4 | `` `v | |
| | From 2015 2,184,646. | | | | |
| | From 2016 | | | | |
| | From 2017 3, 372, 860. | | 4 . 1 . 1 . 2 . | , ,, | |
| | Total of lines 3a through e | 6,382,348, | | for so certification of | 4 4 4 |
| | Qualifying distributions for 2018 from Part XII, | , | 10 1 10 1 V | | |
| 7 | line 4 ▶ \$ 2,196,680. | | | | |
| | Applied to 2017, but not more than line 2a | | | | |
| | | | | | |
| 10 | Applied to undistributed income of prior years (Election required - see instructions) | | | | |
| _ | ΄ Γ | | 1 14 | , | |
| С | Treated as distributions out of corpus (Election required - see instructions) | | | | |
| d | Applied to 2018 distributable amount | | | | 1,072,348. |
| | Remaining amount distributed out of corpus | 1,124,332. | | | |
| | Excess distributions carryover applied to 2018 | | | | |
| | (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | |
| 6 | Enter the net total of each column as | | | | |
| | indicated below: | 7,506,680. | | | |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 7,300,000. | | | |
| þ | Prior years' undistributed income Subtract | | | | |
| | Enter the amount of prior years' undistributed | | | | |
| C | income for which a notice of deficiency has | | | | |
| | been issued, or on which the section 4942(a) | | | | |
| | tax has been previously assessed | | | | |
| d | Subtract line 6c from line 6b Taxable | | | | |
| e | amount - see instructions | | | | |
| · | 4a from line 2a Taxable amount - see instructions | | | | |
| | <u>[</u> | | | | |
| f | Undistributed income for 2018 Subtract lines | | | | |
| | 4d and 5 from line 1 This amount must be distributed in 2019 | | | | |
| _ | | | • • | | |
| ′ | 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) | | - 624 | | |
| Я | Excess distributions carryover from 2013 not | | - | , | -C225 x x |
| Ū | applied on line 5 or line 7 (see instructions) | | , ,, ,, | | |
| 9 | Excess distributions carryover to 2019. | | | 1 | , e - 14 e - 1 s |
| - | Subtract lines 7 and 8 from line 6a | 7,506,680 | | hts - ne | |
| 10 | Analysis of line 9 | | | | |
| | Excess from 2014 | | | | |
| b | Excess from 2015 ?, 184, 646. | * * * | · · · · · · · · · · · · · · · · · · · | | |
| c | Excess from 2016 824,842. | * | | | , |
| | Excess from 2017 3, 372, 860. | | **** | ا يا در دولاني د | 1 *1 *1 |
| | Excess from 2018 1,124,332. | | | 1 | |

Check here ▶ X 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 Duri | ng the Year or App | | Future Payment | |
|--------------------------------------|--|-------------------------|----------------------------------|------------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | contribution | ,,,,,, |
| a Paid during the year | | | | |
| ů , | | | | |
| ATCH 10 | | | | |
| ATCH 10 | | | | |
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| | | | | |
| Total | | | 3a | 2,050,000. |
| b Approved for future payment | | | | |
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| Total | | | ▶ 3b | 1 |

Form 990-PF (2018)

| Part XVI-A Analysis of Income-Prod | ucing Acti | ivities | | | |
|--|----------------------|----------------------|-----------------------|----------------------------|--|
| Enter gross amounts unless otherwise indicated | Unrela | ated business income | Excluded by | y section 512, 513, or 514 | (e) |
| 1 Program service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income (See instructions) |
| <u>-</u> | | | | | (OCC MICHAELICITE) |
| 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 | 3,794. | |
| 4 Dividends and interest from securities | | <u> </u> | 14 | 551,286. | |
| 5 Net rental income or (loss) from real estate | | * 1 ; * ** | | | · · · · |
| a Debt-financed property | | | <u> </u> | | <u> </u> |
| b Not debt-financed property | | | | - | |
| 6 Net rental income or (loss) from personal property | | | | | |
| 7 Other investment income | | | 18 | 1,402,849. | |
| 8 Gain or (loss) from sales of assets other than inventory | • | | | | |
| 9 Net income or (loss) from special events10 Gross profit or (loss) from sales of inventory | | | | - | · |
| 11 Other revenue a | | | | | - |
| b ATCH 11 | | | | 26,000. | |
| С | | | | | |
| d | | | | | |
| e | | | | 1 002 020 | |
| 12 Subtotal Add columns (b), (d), and (e) | | | | 1,983,929. | 1,983,929. |
| 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcu | | | • • • • • • | 13 | 1,903,929. |
| Part XVI-B Relationship of Activities | - | complishment of Ex | remnt Pur | | |
| Explain below how each activity accomplishment of the foundation | | | | | |
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GUSTAVUS AND LOUISE PFEIFFER RESEARCH

| Part | XVII | Information R Exempt Orga | | nsfers to and Transac | tions and | d Relationships With | Nonchari | table | ! |
|-------------|---------|--|--|---|--|---------------------------------------|---------------------------------------|-------------|----------|
| | | e organization direc | tly or indirectly e | engage in any of the follow 501(c)(3) organizations) of | | | | Yes | No |
| c | organi | zations? | | | | , | | | İ |
| a 7 | Transf | ers from the reporting | ng foundation to | a noncharitable exempt orga | anization of | | | | |
| | | | | • | | | | _ | X |
| • | • | | • • • • • • • • | | • • • • • • | | 1a(2) | | Х |
| | | transactions: | | | | | | | v |
| - | | | | npt organization | | | | | X |
| | | | | ole exempt organization | | | | | X |
| • | | • | • | | | | | | X |
| - | | _ | | | | | | T | X |
| - | - | _ | | p or fundraising solicitations | | | | | X |
| | | | | s, other assets, or paid emplo | | | | | X |
| | | | _ | s," complete the following | | | | fair m | arke |
| | | | | es given by the reporting f | | | | | |
| | /alue ı | | | ement, show in column (d) | | | | | |
| (a) Line | e no | (b) Amount involved | (c) Name of no | oncharitable exempt organization | | cription of transfers, transactions, | and sharing arra | angeme | nts |
| | | N/A | ļ | | N/A | | | | |
| | | | | | | | | | |
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| | | | • | liated with, or related to, o | | | | es X | 1 |
| | | , , | • | tion 501(c)(3)) or in section | 52/7 | | · · · [] Y | es <u> </u> |) NO |
| D_II | res. | " complete the follo (a) Name of organization | | (b) Type of organization | <u>-</u> | (c) Description of | relationshin | | |
| | | (a) Name of organization | <u>'</u> | (b) Type of diganization | | (a) Boodingston on | rotottoriip | | |
| | | | | | | | | _ | |
| | | · · · · · · · · · · · · · · · · · · · | | *************************************** | | | | | |
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| | | | | | | | | | |
| | | | | ed this return, including accompanying payer) is based on all information of whice | | | nowledge and t | elief, it | is true |
| Sign | COLLECT | A) A | Preparer (offer than tax | payer) is based on all information of whice | In proparer rias a | · ` ` | the IRS discus | e this | return |
| Here | | ue / C/a | porces pre | school 11/11/19 | P/h | a | the preparer s | | |
| 11616 | Sign | ature of officer or trustee | 21/2 1/- | Date /us/10 | Title | See in | structions X | Yes | No |
| | | annia K | TKIOLA, | reasver 11/4/19 | V | LOUVIEV | - Portion | | |
| Paid | / | Print/Type preparer's na | | Preparer's signature | | Date Check | If PTIN | 1577 | 0 |
| Prepa | arer | JEFFREY D HASI | | JEFFREY D HASKELL | · | 10/28/2019 self-emplo | - | | <u> </u> |
| - | | | UNDATION SO | | | Firm's EIN | 1039834 | <u>'</u> | |
| Use C | JIIIY | | E HOLLOW LN | , STE 212 | 110 | 142 | 10-839-17 | 754 | |

ATTACHMENT 1

FORM 990PF, PART I - OTHER INCOME

REVENUE AND EXPENSES

PER BOOKS

26,000.

DESCRIPTION DECREASE IN DEFERRED EXCISE TAXES

TOTALS

26,000.

| 2 | | CHARITABLE PURPOSES 1,380. |
|--------------|---------------------------------|--|
| ATTACHMENT 2 | | ADJUSTED NET INCOME |
| | | NET INVESTMENT INCOME |
| | | REVENUE AND EXPENSES PER BOOKS 1,150. |
| | FORM 990PF, PART I - LEGAL FEES | DESCRIPTION GENERAL CONSULTATIONS TOTALS |

13-6086299.

2018 FORM 990-PF

GUSTAVUS AND LOUISE PFEIFFER RESEARCH

GUSTAVUS AND LOUISE PFEIFFER RESEARCH

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| CINTEINITION - |
| I |
| TOVO |
| 900pF |
| Macr |

| CHARITABLE PURPOSES | 10,675. | 11,205. |
|---|-------------------------------------|---------|
| ADJUSTED NET INCOME | | |
| NET INVESTMENT INCOME | | |
| REVENUE AND EXPENSES PER BOOKS | 10,675. | 11,205. |
| | | TOTALS |
| DESCRIPTION | AUDIT FEES GENERAL CONSULTATIONS | |

ATTACHMENT 4

FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES PER BOOKS

DESCRIPTION

990-PF TAX FOR 2018

19,510.

TOTALS

19,510.

13-6086299,

ATTACHMENT 5

- OTHER EXPENSES PART I FORM 990PF,

| CHARITABLE PURPOSES 65,758. | 510. 374. 368. 1,063. 840. 150. | 69,070. |
|--|---|---------|
| NET INVESTMENT INCOME | 525. | 525. |
| REVENUE AND EXPENSES PER BOOKS 66,500. | 3,497. 374. 7. 368. 1,063. 840. 150. | 72,799. |
| | | TOTALS |
| DESCRIPTION ADMINISTRATIVE FEES | INSURANCE EXPENSES OFFICE SUPPLIES POSTAGE/DELIVERY SERVICE REGISTERED AGENT FEE STATE OR LOCAL FILING FEES STORAGE FEE WEBSITE HOSTING/SUPPORT | |

PART II - CORPORATE STOCK FORM 990PF,

VANGUARD BALANCED INDEX FUND I VANGUARD WELLINGTON ADMIRAL FU DESCRIPTION

ENDING BOOK VALUE

ENDING FMV

8,111,861. 12,159,040.

20,270,901.

TOTALS

8,111,861. 12,159,040. 20,270,901. ATTACHMENT 6

ATTACHMENT 6

ATTACHMENT 7

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

UNREALIZED LOSSES ON INVESTMENTS

2,598,472.

TOTAL

2,598,472.

990-PF GUSTAVUS AND LOUISE PFEIFFER RESEARCH 13-6086299
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| Kind of Property | | Description | | | | P Date Date sold | | Date sold |
|--------------------------------|-----------------------|-------------------------|-------------------|-------------------|--------------------|------------------|--------------|-----------|
| Gross sale | Depreciation | Cost or | FMV | Adı basıs | Excess of | Н | Gain | |
| price less expenses of sale | allowed/ allowable | other basis | as of 12/31/69 | as of 12/31/69 | FMV over adj basis | | or (loss) | |
| 2,475,359. | | PUBLICLY-TR. 1,072,510. | | | | | 1,402,849. | |
| TOTAL GAIN(L | oss) | | | | •••• | | 1,402,849. | |
| | | | | | | | | |
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| FORM 990PF, PART VIII - LIST OF OFFICERS, | ERS, DIRECTORS, AND TRUSTEES | | ATTACH | ATTACHMENT 8 |
|--|---|--------------|---|-----------------------------------|
| NAME AND ADDRESS | TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION | COMPENSATION | CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS | EXPENSE ACCT AND OTHER ALLOWANCES |
| KIMBERLY HEROLD ALVAREZ FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377 *RESIGNED FROM POSITION IN 2018 | DIR, VP*, PRES 1.00 | 5,800. | .0 | .0 |
| LISE P CHAPMAN FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377 | DIR, VP 1.00 | 6,200. | · | .0 |
| PATRICIA R HEROLD FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377 | DIR, SEC, TREAS 1.00 | 6,200. | · | .0 |
| H ROBERT HEROLD II FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377 | DIR 1.00 | 5,800. | Ċ | .0 |
| MATTHEW G HEROLD JR FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377 | DIR, HONORARY CHAIR 1.00 | 5,800. | Ċ | .0 |

| RESEARCH |
|----------|
| PFEIFFER |
| LOUISE |
| AND |
| GUSTAVUS |

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

2018 FORM 990-PF

13-6086299.

。 ATTACHMENT 8 (CONT'D) 。 EXPENSE ACCT ALLOWANCES AND OTHER 。 0 TO EMPLOYEE BENEFIT PLANS CONTRIBUTIONS 6,200. 6,200. COMPENSATION 42,200. TITLE AND AVERAGE HOURS PER DIR, ASST SEC, ASST TREAS WEEK DEVOTED TO POSITION GRAND TOTALS 1.00 1.00 DIR, PRES* FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377 FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377 *RESIGNED FROM POSITION IN 2018 MATTHEW MAYRO KEENEY SARAH SP MCCARTHY NAME AND ADDRESS

2018 FORM 990-PF GUSTAVUS AND LOUISE PFEIFFER RESEARCH 13-6086299

990PF, PART VIII- COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALS

| | ATTACHME | ENT 9 |
|---|-----------------|--------------|
| NAME AND ADDRESS | TYPE OF SERVICE | COMPENSATION |
| FOUNDATION SOURCE 55 WALLS DRIVE, 3RD FLOOR FAIRFIELD, CT 06824 | ADMINISTRATIVE | 65,758. |
| TOTAL COM | PENSATION | 65,758. |

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

ATTACHMENT 10

| AMOUNT | 150,000 | 250,000 | 150,000 | 1,500,000 | 2,050,000 | \$2,050,000 \$ 250,000 \$1,800,000 |
|--|--|---|---|--|--------------------------|--|
| PURPOSE OF GRANT OR CONTRIBUTION | THE MILTON C ROSE RESEARCH SCHOLARS PROGRAM | DEVELOPMENT OF NEW ANTI-RESISTANT ANTIBIOTICS PROJECT | THE GUSTAVUS AND LOUISE PFEIFFER RESEARCH FOUNDATION MEDICAL SCHOLARS PROGRAM | ENDOWED DIRECTORSHIP FOR THE MD-PHD PROGRAM AT YALE SCHOOL OF MEDICINE FUND | TOTAL CONTRIBUTIONS PAID | TOTAL FORM 990-PF, PART I, LINE 25, COLUMN (D) AND PART XV, LINE 3A LESS GRANTS AUTHORIZED IN PRIOR YEARS TOTAL FORM 990-PF, PART I, LINE 25, COLUMN (A) |
| RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT | N/A PC | N/A PC | N/A PC | N/A PC | | TOTAL FORM 990- LESS GRANTS AU TOTAL FORM 990- |
| RECIPIENT NAME AND ADDRESS | PFEIFFER UNIVERSITY PO BOX 960 MISENHEIMER, NC 28109 | PRESIDENT AND FELLOWS OF HARVARD COLLEGE 1033 MASSACHUSETTS AVE STE 3 CAMBRIDGE, MA 02138 | STANFORD UNIVERSITY - FINANCIAL AID OFFICE 326 GALVEZ ST STANFORD, CA 94305 | YALE UNIVERSITY PO BOX 2038 NEW HAVEN, CT 06521 | | |

| 13-6086299, | | RELATED OR EXEMPT FUNCTION INCOME | | |
|---------------------------------------|---|--------------------------------------|-----------------------------------|---------|
| | ATTACHMENT 11 | AMOUNT | 26,000. | 26,000. |
| | | CODE | 01 | |
| | | AMOUNT | | |
| 2018 FORM 990-PF | REVENUE | BUSINESS CODE | | |
| GUSTAVUS AND LOUISE PFEIFFER RESEARCH | FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE | DESCRIPTION | DECREASE IN DEFERRED EXCISE TAXES | TOTALS |