990-PF

Return of Private Foundation

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

Fo	r caler	ndar year 2019 or tax year beginning	, and	ending				
		undation			A Employer identification number			
		m Companies Foundation						
Nu	mber and	d street (or P O box number if mail is not delivered to street address)	Room	n/suite	36-6110423			
		321, FSS Tax Filing			B Telephone number (see instructions)			
City	or town	s, state or province, country, and ZIP or foreign postal code						
Blo	oming		21	309-735-0766				
For	eign cou	intry name Foreign province/state/county	Foreign posta	al code	C If exemption application is pending, check here ▶			
					,			
G	Check		of a former public c	harity	D 1. Foreign organizations, check here ►			
		☐ Final return ☐ Amended ret			Foreign organizations meeting the 85% test,			
		Address change Name chang		/	check here and attach computation			
H		type of organization: X Section 501(c)(3) exempt pri	E If private foundation status was terminated under section 507(b)(1)(A), check here ►					
Щ	Section	on 4947(a)(1) nonexempt charitable trust 🛛 Other taxa		tion				
ŧ	Fair m	narket value of all assets at J Accounting method	🛛 Cash 🔲 A	ccrual	F If the foundation is in a 60-month termination			
	end of	f year (from Part II, col. (c), Other (specify)			under section 507(b)(1)(B), check here ►			
	line 16	6) \$ 33,261,463 (Part I, column (d), must be	e on cash basis)					
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	<i>"</i> 、	(d) Disbursement			
		amounts in columns (b), (c), and (d) may not necessarily	expenses per		t investment (c) Adjusted net for charitable ncome income purposes			
		equal the amounts in column (a) (see instructions))	books		(cash basis only)			
	1	Contributions, gifts, grants, etc , received (attach schedule)						
	2	Check ► X if the foundation is not required to attach Sch B						
	3	Interest on savings and temporary cash investments	801,771		801,771			
	4	Dividends and interest from securities						
	5a	Gross rents			PECEIVED			
	b	Net rental income or (loss)			RLOLI			
ne	6a	Net gain or (loss) from sale of assets not on line 10						
en	b	Gross sales price for all assets on line 6a			TEL MAY 2.6 MINU LAI			
Revenue	7	Capital gain net income (from Part IV, line 2)			O MAI 2 O ESSE ON			
œ	8	Net short-term capital gain			OGDEN, UT			
	9	Income modifications			OODE			
	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)	004.774		201 774			
	12	Total. Add lines 1 through 11	801,771		801,771 0			
ses	13 14	Compensation of officers, directors, trustees, etc.						
ens	15	Other employee salaries and wages						
	16a	Pension plans, employee benefits						
ω								
6	b	Accounting fees (attach schedule) Other professional fees (attach schedule)	217,438		1,503			
ati	17	Interest	217,430	<u> </u>	1,000			
str	18	Taxes (attach schedule) (see instructions)	15,938					
Operating and Administrative Exp	19	Depreciation (attach schedule) and depletion	10,550	-				
E	20	Occupancy						
Ac	21	Travel, conferences, and meetings						
PL	22	Printing and publications	25					
ā	23	Other expenses (attach schedule)						
ng	24	Total operating and administrative expenses.						
ati		Add lines 13 through 23	233,401		1,503			
Je.	25	Contributions, gifts, grants paid	13,129,607	·	13,129,60			
ő	26	Total expenses and disbursements. Add lines 24 and 25	13,363,008		1,503 0 13,129,60			
	27	Subtract line 26 from line 12.	10,000,000		1,555			
	a a	Excess of revenue over expenses and disbursements	-12,561,237					
	b	Net investment income (if negative, enter -0-)	12,001,207		800,268			
		Adjusted net income (if negative, enter -0-)		-	000,200			

Page 2

Pa	rt II	Balance Sheets	Attached schedules and amounts in the description column	Beginning of year	End of	f year
			should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest	t-bearing	43,515,092	30,928,192	30,928,192
Ì	2	Savings and tempo	rary cash investments	2,308,377	2,331,576	2,331,576
	3	Accounts receivable				
		Less: allowance for	doubtful accounts			
	4	Pledges receivable				
		Less allowance for	doubtful accounts			
	5					
ŀ	6	Receivables due fro	om officers, directors, trustees, and other		i	
			s (attach schedule) (see instructions)			
	7	Other notes and loans	receivable (attach schedule)			·
-		Less allowance for do	ubtful accounts			
ន្ត	8		or use			
Assets	9	Prepaid expenses a	and deferred charges			
تخ	10a	Investments-U.S. and	state government obligations (attach schedule)			
	b	Investments—corpo	orate stock (attach schedule)			
	С		orate bonds (attach schedule)			
ŀ	11	Investments—land, but	Idings, and equipment basis			
		Less accumulated dep	reciation (attach schedule)			
	12		gage loans			
	13	Investments-other	r (attach schedule)			
	14	Land, buildings, and ed	quipment basis			
		Less accumulated dep	reciation (attach schedule)			
	15	Other assets (desc	ribe ► Federal Income Tax Recoverable)		1,695	1,695
	16		completed by all filers—see the			
		instructions. Also, s	see page 1, item I)	45,823,469	33,261,463	33,261,463
	17		and accrued expenses			
S	18	Grants payable .				
음	19	Deferred revenue				
≣∣	20	Loans from officers, of	directors, trustees, and other disqualified persons			
Liabilities	21		er notes payable (attach schedule)			
-	22	Other liabilities (des	scribe See Attached Statement)	769		
	23	Total liabilities (ad	d lines 17 through 22)	769	0	
Sa		Foundations that t	follow FASB ASC 958, check here			
alances		and complete lines	s 24, 25, 29, and 30.			
<u> </u>	24	Net assets without	donor restrictions			
<u>,</u>	25	Net assets with dor	nor restrictions			<u></u> .
Net Assets or Fund B			o not follow FASB ASC 958, check here 🔻 🕨			
구		and complete lines	26 through 30.			
5	26		principal, or current funds			
ပ္သ	27	Paid-in or capital su	urplus, or land, bldg., and equipment fund			
Se	28	•	ccumulated income, endowment, or other funds	45,822,700	33,261,463	
BS	29		r fund balances (see instructions)	45,822,700	33,261,463	
ਚ 	30		d net assets/fund balances (see		1	
_			<u> </u>	45,823,469	33,261,463	
	rt III		nanges in Net Assets or Fund Balances			<u></u>
1			alances at beginning of yearPart II, column (a)			
		-	d on prior year's return)			45,822,700
			line 27a			-12,56 <u>1,237</u>
3	Other	ncreases not includ	ded in line 2 (itemize)	•••	3	
4	Add li	ines 1, 2, and 3			4	33,261,463
5	Decre	eases not included in	l line 2 (itemize) ► alances at end of year (line 4 minus line 5)—Par		5	
6	Total	net assets or fund ba	alances at end of vear (line 4 minus line 5)—Par	t II. column (b), line 29	161	33 261 463

Page 3

Part	V Capital Gains an	d Losses for Tax on Investr	nent Income					
(b) How acquired						te acquired , day, yr)	(d) Date sold (mo , day, yr)	
1a								
<u>b</u>								
<u> </u>	·						<u> </u>	
<u>d</u>								
<u>e</u>		,		l				
	(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale						n or (loss) f) minus (g))	
<u>a</u>								
<u>b</u>							- · · · · · · · · · · · · · · · · · · ·	
<u>c</u>								
<u>d</u>								
e						.		
	Complete only for assets si	howing gain in column (h) and owned	by the foundation	on 12/31/69			(h) gain minus	
	(ı) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any			t less than -0-) or rom col (h))	
<u>a</u>								
<u>b</u>								
c								
<u>d</u>								
e			<u> </u>	<u> </u>				
2	Capital gain net income or	riner canifal inset 1 -	also enter in Par), enter -0- in Par	, ,	2		0	
3	Net short-term capital gair	n or (loss) as defined in sections 1	222(5) and (6).	[
	If gain, also enter in Part I	, line 8, column (c). See instructio	ns. If (loss), ente	r-0-ın \	İ			
	Part I, line 8	<u> </u>	<u></u>	<u> 5 </u>	3		0	
Part	V Qualification Und	<u>der Section 4940(e) for Redu</u>	uced Tax on N	<u>let investment</u>	Incom	ie		
Was t		ve this part blank section 4942 tax on the distributa ualify under section 4940(e). Do n			e period	?	☐ Yes ☒ No	
1	Enter the appropriate amo	ount in each column for each year	, see the instructi	ons before makin	g any e	ntries.		
Cal	(a) Base penod years endar year (or tax year beginning in	(b)		(c) of noncharitable-use as		Dis	(d) tribution ratio divided by col (c))	
	2018	12,31	4 420	49,584	486	(cor (b)	0,248352	
	2017	13,71		34,531			0 397136	
	2016	12,819		17,816			0.719546	
	2015	10,52		7,851			1.340864	
	2014	13,54		10,772			1.257571	
			- 	-				
2	Total of line 1, column (d)				.	2	3 963469	
3		for the 5-year base period—divide						
	-	oundation has been in existence if			-	3	0.792694	
4	Enter the net value of non	charitable-use assets for 2019 fro	m Part X, line 5		. -	4	38,087,170	
5	Multiply line 4 by line 3 .				-	5	30,191,471	
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)			. -	6	8,003	
7	Add lines 5 and 6				. -	7 30,199,474		
8	Enter qualifying distribution	ns from Part XII, line 4				8	13,129,607	
		ter than line 7, check the box in P						

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instr	uctio	ns)		
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				j
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1		16	5,005
	here ▶ ☐ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of			-	
^	Part I, line 12, col. (b)	ا ۾			^
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2 3		1.0	<u> </u>
3 4	Add lines 1 and 2	4		- 10	5,005
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5		16	5,005
6	Credits/Payments:	 -			3,000
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 17,700				
b	Exempt foreign organizations—tax withheld at source				1
c	Tax paid with application for extension of time to file (Form 8868) 6c				1
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments. Add lines 6a through 6d	7		17	7,700
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			1,695
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ► 1,695 Refunded ►	11			0
Part \	/II-A Statements Regarding Activities		<u> </u>	,	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a	<u> </u>	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			ł	i
	instructions for the definition		. <u>1b</u>		X.,
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	S			
_	published or distributed by the foundation in connection with the activities.		4-	├─	
C C	Did the foundation file Form 1120-POL for this year?		1c	+	X
d	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶\$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impos	ed			
•	on foundation managers. > \$	Cu		1	ŀ
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		×
	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	 	X
	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 and the state legislation that of the state legislation that the st		-	- 	
-	conflict with the state law remain in the governing instrument?			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	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.				
h	IL If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gener	 ral			
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	- <u>X</u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3		80	+-^-	 -
•	or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. I	-		1	' <u>(</u>
	m		. 9		$1 \times C$
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the		· -		<u> </u>
	names and addresses		10		×

Part	VII-A Statements Regarding Activities (continued)	<u></u>		
			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		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	L
	Website address ▶ www.statefarm.com			
14	The books are in care of ► Mark Schwamberger Telephone no. ► 309-766			
	Located at ► One State Farm Plaza Bloomington IL ZIP+4 ► 61710-0			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here		l	▶ ⊔
40	and enter the amount of tax-exempt interest received or accrued during the year		V	Na
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority	16	Yes	No X
	over a bank, securities, or other financial account in a foreign country?	16		 ^
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country.			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	l		
ı aı ı	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1.	·		100	1
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) Engage in the sale or exchange, or leasing of property with a disqualified person? Light Yes X No (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?	<u> </u>		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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	ĺ		
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			
-	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions.	1b		X
	Organizations relying on a current notice regarding disaster assistance, check here			
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 2019?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b	N/A	L
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse			
	of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the	<u> </u>	<u> </u>	
	foundation had excess business holdings in 2019.)	3b	N/A	 ,
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	 	

Part	AII-R	Statements Regarding Activities	101 44	men rom	47 ZU I	nay be ne	<u>equire</u>	<u>~ (</u>	Ornani	ucu,			
5a		e year, did the foundation pay or incur an on propaganda, or otherwise attempt to i			(section	4945(e))?		П	Yes	X No	<u>,</u>	Yes	No
	(2) Influe	nce the outcome of any specific public ele	ection (s	see section 4	955); or	to carry on	,		Yes	— 			'
	directly or indirectly, any voter registration drive?							- 1					
	(4) Provide a grant to an organization other than a charitable, etc., organization described in								'				
	section	on 4945(d)(4)(A)? See instructions							Yes	X 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?								,				
b	, , , , , , , , , , , , , , , , , , , ,												
	Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions									5b	N/A	1	
С	Organizations relying on a current notice regarding disaster assistance, check here									'			
		attach the statement required by Regulation	_									l	
6a		oundation, during the year, receive any fur conal benefit contract?							Yes	X No	, <u> </u>		
b		oundation, during the year, pay premiums,	directi	y or indirectly	, on a p	ersonal ber	nefit cor	ntrac	t? .		6b		X
_		o 6b, file Form 8870.								га			
7a b		e during the tax year, was the foundation a pa did the foundation receive any proceeds o						_		X No	7b	N/A	
8	Is the fou	ndation subject to the section 4960 tax or ation or excess parachute payment(s) duri	n pavme	ent(s) of more	e than \$	1.000.000 i	n			X N			
Part		nformation About Officers, Direct										es,	<u> </u>
		and Contractors				· · · · · · · · · · · · · · · · · · ·	<u> </u>						
1	List all o	fficers, directors, trustees, and foundat	ion ma	nogoro and	41		•	4					
											[
		(a) Name and address	(b) Titl hou	le, and average irs per week ted to position	(c) Co	mpensation not paid, nter -0-)	(d)	Controyee I	butions	s to plans	(e) Exp	ense ac allowar	
Exhibi			(b) Titl hou	le, and average irs per week	(c) Co	mpensation not paid,	(d) empl	Controyee I	butions	s to plans			
Exhibi	t 2	(a) Name and address	(b) Titl hou	le, and average irs per week	(c) Co	mpensation not paid, nter -0-)	(d) empl	Controyee I	butions	s to plans			
	t 2	(a) Name and address	(b) Titl hou	le, and average irs per week	(c) Co	mpensation not paid, nter -0-)	(d) empl	Controyee I	butions	s to plans			
	t 2	(a) Name and address	(b) Titl hou	le, and average irs per week	(c) Co	mpensation not paid, nter -0-)	(d) empl	Controyee I	butions	s to plans			
	t 2	(a) Name and address	(b) Titl hou devol	le, and average urs per week ted to position	(c) Co (lf i er	mpensation not paid, nter -0-)	(d) empl and del	Controyee I	ibutions benefit compe	s to plans nsation	other	allowan	
	t 2	(a) Name and address sation of five highest-paid employees ((b) Titl hou devol	le, and average urs per week ted to position	(c) Co (lf i er	mpensation not paid, nter -0-)	(d) empl and del	Controyee I	toutions benefit is compe	s to plans nsation	other	allowan	
	Compen	(a) Name and address sation of five highest-paid employees ((b) Titl hou devol	le, and average urs per week ted to position	(c) Co (lf er	mpensation not paid, nter -0-)	(d) emplo and del	Controvee I ferred Struct (d) (em plan	ctions	s to plans nsation). If no utions to benefit deferred	one, ent	er	count,
	Compen: "NONE."	(a) Name and address	(b) Titl hou devol	han those in hours per veek	(c) Co (lf er	on line 1—	(d) emplo and del	Controvee I ferred Struct (d) (em plan	ctions Contribu	s to plans nsation). If no utions to benefit deferred	one, ent	allowan	count,
2	Compen: "NONE."	(a) Name and address	(b) Titl hou devol	han those in hours per veek	(c) Co (lf er	on line 1—	(d) emplo and del	Controvee I ferred Struct (d) (em plan	ctions Contribu	s to plans nsation). If no utions to benefit deferred	one, ent	allowan	count,
2	Compen: "NONE."	(a) Name and address	(b) Titl hou devol	han those in hours per veek	(c) Co (lf er	on line 1—	(d) emplo and del	Controvee I ferred Struct (d) (em plan	ctions Contribu	s to plans nsation). If no utions to benefit deferred	one, ent	allowan	count,
2	Compen: "NONE."	(a) Name and address	(b) Titl hou devol	han those in hours per veek	(c) Co (lf er	on line 1—	(d) emplo and del	Controvee I ferred Struct (d) (em plan	ctions Contribu	s to plans nsation). If no utions to benefit deferred	one, ent	allowan	count,
2	Compen: "NONE."	(a) Name and address	(b) Titl hou devol	han those in hours per veek	(c) Co (lf er	on line 1—	(d) emplo and del	Controvee I ferred Struct (d) (em plan	ctions Contribu	s to plans nsation). If no utions to benefit deferred	one, ent	allowan	count,
2	Compen: "NONE."	(a) Name and address	(b) Titl hou devol	han those in (b) Title, and a hours per ve	(c) Co (lf er	on line 1—	(d) emplo and del	Controvee I ferred Struct (d) (em plan	ctions Contribu	s to plans nsation). If no utions to benefit deferred	one, ent	allowan	count,

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pa and Contractors (continued)	aid Employees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter	"NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	. ▶
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 Not applicable	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
4 Not applicable	Amount
1 Not applicable	
2	
All the second of the second o	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	. • (
	Form 990-PF (2019

Part		n founda	ations,
1	see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
•			
а	purposes: Average monthly fair market value of securities	1a	38,667,178
b	Average of monthly cash balances	1b	0
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	38,667,178
e	Reduction claimed for blockage or other factors reported on lines 1a and		00,001,110
C	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	38,667,178
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see		00,007,770
7	instructions)	4	580,008
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	38,087,170
6	Minimum investment return. Enter 5% of line 5	6	1,904,359
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation		1,004,000
1 are	and certain foreign organizations, check here and do not complete this part.)	113	
1	Minimum investment return from Part X, line 6	1	1,904,359
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	16,005
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,888,354
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,888,354
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	1,888,354
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	13,129,607
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.		
а	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	13,129,607
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	13,129,607
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when	ther the fo	oundation
	qualifies for the section 4940(e) reduction of tax in those years.		

² art	Vill Undistributed income (see instructions)			
		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI,				1,888,354
2	Undistributed income, if any, as of the end of 2019				
a	Enter amount for 2018 only	j		o	
b	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2019				
a					
b	From 2015				
C	From 2016				
d	From 2017				
e	From 2018 9,849,998	50.470.400			1
f	Total of lines 3a through e	58,173,120			
4	Qualifying distributions for 2019 from Part XII,				
	line 4: ▶ \$ 13,129,607				
а	Applied to 2018, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
	required—see instructions)			· · · · · · · · · · · · · · · · · · ·	<u> </u>
d	Applied to 2019 distributable amount				1,888,354
е	Remaining amount distributed out of corpus	11,241,253			
5	Excess distributions carryover applied to 2019				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	69,414,373			
	Prior years' undistributed income. Subtract	33,11,1,013		·	
-	line 4b from line 2b		0		
С	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				
А	Subtract line 6c from line 6b Taxable				
•	amount—see instructions ,				
_	Undistributed income for 2018. Subtract line				
-	4a from line 2a Taxable amount—see				
				o	
f	Undistributed income for 2019 Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2020				0
7	Amounts treated as distributions out of corpus				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)			<u> </u>	
8	Excess distributions carryover from 2014 not	40.007.004			
	applied on line 5 or line 7 (see instructions)	13,207,381			
9	Excess distributions carryover to 2020.				
	Subtract lines 7 and 8 from line 6a	56,206,992			
10	Analysis of line 9:				
а	Excess from 2015				
b	Excess from 2016				
C	Excess from 2017				
d	Excess from 2018 9,849,998				
е	Excess from 2019				

Form 9	90-PF (2019) State Farm Companies	Foundation			36-611	10423 Page 10
Part			ctions and Part	VII-A. guestion 9)		N/A
	If the foundation has received a ruling or					11//
	foundation, and the ruling is effective for					
	Check box to indicate whether the foundation	ıs a private operal	ing foundation desc	cribed in section	4942(j)(3	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(0) 10.01
	each year listed					0
b	85% of line 2a			ļ		0
С	Qualifying distributions from Part XII, line 4, for each year listed					0
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0
е	Qualifying distributions made directly					
	for active conduct of exempt activities. Subtract line 2d from line 2c					0
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"Assets" alternative test—enter		\ \ \	1		
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in					
	Part X, line 6, for each year listed					0
С	"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)]	\ 0
	(2) Support from general public					$\overline{}$
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					\ 0
	(3) Largest amount of support from					
	an exempt organization		}			ò
	(4) Gross investment income					0
Part	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(Complete this	s part only if th	e foundation ha	d \$5.000 or mor	<u></u>
	any time during the year—s	•	•		. , , , , , , , , , , , , , , , , , , ,	
1	Information Regarding Foundation Ma		T. · L			
а	List any managers of the foundation who	•	more than 2% of	the total contribution	ns received by the t	foundation
	before the close of any tax year (but only	of they have cont	ributed more than	\$5,000). (See section	on 507(d)(2).)	
NONE	<u> </u>					
b	List any managers of the foundation who	own 10% or mor	e of the stock of a	corporation (or an e	equally large portion	n of the
	ownership of a partnership or other entity	 of which the four 	ndation has a 10%	% or greater interest		
NONE						
2	Information Regarding Contribution, G	irant, Gift, Loan,	Scholarship, etc	., Programs:		
	Check here ▶ ☐ If the foundation only					
	unsolicited requests for funds. If the foun			ndividuals or organi	zations under other	
	conditions, complete items 2a, b, c, and	d See instruction:	S.			· · · · · · · · · · · · · · · · · · ·
а	The name, address, and telephone numb	per or email addre	ess of the person t	o whom applications	s should be addres	sed.
Exhib	nt 3					
b	The form in which applications should be	submitted and in	formation and ma	terials they should in	nclude.	_
Exhib	t 3					
	Any submission deadlines.					
Exhibi						
d	Any restrictions or limitations on awards,	such as by geogr	aphical areas, cha	arıtable fields, kınds	of institutions, or o	ther

factors:

Exhibit 3

Total

Form 990-PF (2019) State Farm Companies Foundation Page **11** Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or contribution status of **Amount** recipient Name and address (home or business) Paid during the year Organization - Exhibit 4 See note on Exhibit 4 13,129,607 За 13,129,607 Total b Approved for future payment Organization - Exhibit 5 4,489,025 See note on Exhibit 5

4,489,025

Pa	rt X'	VI-A Analysis of Income-Producing A	ctivities				
		oss amounts unless otherwise indicated.		isiness income	Excluded by sect	ion 512, 513, or 514	4.3
1	Dro	ogram sonuce rovenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
•		gram service revenue			 		
	a b			<u> </u>		·· · · -	
	-						
	c d						
	_						
	e						
	T						
_		Fees and contracts from government agencies					
2		mbership dues and assessments					
3		rest on savings and temporary cash investments .			14	801,771	
4		idends and interest from securities					
5		t rental income or (loss) from real estate:					
		Debt-financed property					
		Not debt-financed property					
6		t rental income or (loss) from personal property		<u> </u>			
7	Oth	ner investment income					
8	Gai	n or (loss) from sales of assets other than inventory					
9	Net	t income or (loss) from special events					
10	Gro	oss profit or (loss) from sales of inventory .					
11	Oth	ner revenue. a					
	b						
	С						
	d						
	е		<u>-</u>	· · · · ·			
12	Sul	ototal. Add columns (b), (d), and (e)		0		801,771	C
		tal. Add line 12, columns (b), (d), and (e)				13	801.771
13	Tot	tal. Add line 12, columns (b), (d), and (e)				13	801,771
13 (See	Tot wo	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations	s)			13	801,771
13 (See Pa	Tot wo	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	801,771
13 (See Pa	Tote wor	tal. Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculations VI-B Relationship of Activities to the A Explain below how each activity for which incon accomplishment of the foundation's exempt pur	s) Accomplishm ne is reported in c	ent of Exemp	t Purposes	Importantly to the	

Form,99	0-PF (2	2019) State Far	m Companies Foun	dation				36-611	0423	Pa	ge 13
Part	XVII	Information	Regarding Tran	sfers to an	d Transaction	s and Re	lationships Wit	h Nonchari	table	•	
		Exempt Org	ganizations								
1	Did t	he organization d	irectly or indirectly e	engage in any	of the following	with any oth	ner organization de	scribed		Yes	No
	ın se	ction 501(c) (other	er than section 501(d	c)(3) organiza	itions) or in section	on 527, rela	ting to political				
	orga	nizations?									
а	Tran	sfers from the rep	orting foundation to	a noncharita	ble exempt organ	nization of					
									1a(1)	 	X
	` '	Other assets .							1a(2)	1 -	х
b		r transactions									
-			a noncharitable exe	mnt organiza	ition	. 			1b(1)		Х
			ets from a noncharita						1b(2)	† – –	X
			equipment, or other	•	•			• •	1b(3)	1	X
			rrangements						1b(4)	1	X
			rantees						1b(5)		X
			ervices or membersh								X
_				•	_				1b(6)	 	x
C			quipment, mailing lis					 ha fau markat	1c	<u> </u>	
d			he above is "Yes," co								
	value	or the goods, other in any transaction	er assets, or services or sharing arrangem	given by the re ent, show in co	eporting foundation of the value of the valu	e of the good	dation received less ds, other assets, or	services receiv	ed.		
(a) Line	no	(b) Amount involved	(c) Name of non	charitable exemp	ot organization	(d) Desc	enption of transfers, tran	sactions, and sha	ring arra	ngemer	nts
		·									
						1					
						1	· · · · · · · · · · · · · · · · · · ·				
						1		•			
						<u> </u>					
2a b	desc	ribed in section 5	ctly or indirectly affilia 01(c) (other than se following schedule.				xempt organization	ns 	Yes	X N	lo
		(a) Name of organ	ization	(b)) Type of organization		(c) De	scription of relatio	nship		
			lare that I have examined this r					and belief, it is true,			
Sign	сопте	ct, and complete Declaration	on of preparer (other than taxp	ayer) is based on all	information of which prep	arer has any knov	vledge	May the IR	S discuss	this retu	rn
Here	11	Clara S.	June	05	5/16/2020 AS	ssistant Trea	asurer	with the pr	eparer sho	wn belo	w?
	Sign	nature of officer or trus		Da				See instru	tions	X Yes	∐No
	<u></u>	Print/Type preparer:	s name	Preparer's s	signature		Date		PTIN		
Paid		Alana Reimer		alar	(1).)	Date 05/16/2020 4/20/2020	Check if	P0145	33061	
Prepa	rer							5550			

State Farm Mutual Automobile Insurance Company

One State Farm Plaza, Tax Dept D-2, Bloomington, IL 61710-0001

Firm's name

Firm's address

Use Only

37-0533100

309-766-2016

Firm's EIN

Phone no

Part I, Line 16c (990-PF) - Other Professional Fees

		217,438	1,503	0	0	
	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)	
1	Custody Fees	1,503	1,503		0	
2	Outsourcing Fees	215,935			0	

Part I, Line 18 (990-PF) - Taxes

	15,938	0) 0	
	Revenue			Disbursements	
	and Expenses	Net Investment	Adjusted	for Charitable	
Description	per Books	Income	Net Income	Purposes	
1 Tax on Investment Income	15,938				

Part II, Line 15 (990-PF) - Other Assets

	0	1,695	1,695
	Book Value	Book Value	FMV End
Asset Description	Beg of Year	End of Year	of Year
Federal Income Tax Recoverable	0	1,695	1,695

Part II, Line 22 (990-PF) - Other Liabilities

		769			
	Description	Beginning Balance	Ending Balance		
<u> </u>			Dalatice		
1	Federal Tax Payable	769	U		
2	Other Liabilities	0	0		

Form 990-PF, 2019 State Farm Companies Foundation 36-6110423 Part VIII, Line 1 Directors and Officers January 1st through December 31st, 2019

Michael Tipsord; Chairman of the Board and President One State Farm Plaza, Bloomington, Illinois 61710 Devotes time necessary for proper administration of Foundation No compensation, no benefits and no reimbursements.

Mary Schmidt; Vice President and Secretary
One State Farm Plaza, Bloomington, Illinois 61710
Devotes time necessary for proper administration of Foundation
No compensation, no benefits and no reimbursements.

Duane Farrington; Vice President and Assistant Secretary One State Farm Plaza, Bloomington, Illinois 61710 Devotes time necessary for proper administration of Foundation No compensation, no benefits and no reimbursements.

Dr. W. H. Knight, Jr.; Director 3730 42nd Ave. South Seattle, WA 98144 Devotes time necessary for proper administration of Foundation No compensation, no benefits and no reimbursements.

Pamela B. Strobel; Director 44 Woodley Road Winnetka, IL 60093 Devotes time necessary for proper administration of Foundation No compensation, no benefits and no reimbursements.

Jon C. Farney; Treasurer One State Farm Plaza, Bloomington, Illinois 61710 Devotes time necessary for proper administration of Foundation No compensation, no benefits and no reimbursements.

Annette Martinez; Vice President One State Farm Plaza, Bloomington, Illinois 61710 Devotes time necessary for proper administration of Foundation No compensation, no benefits and no reimbursements.

Scott Rassi; Vice President
One State Farm Plaza, Bloomington, Illinois 61710
Devotes time necessary for proper administration of Foundation
No compensation, no benefits and no reimbursements.

Joseph P. Young; Vice President – Fixed Income One State Farm Plaza, Bloomington, Illinois 61710 Devotes time necessary for proper administration of Foundation No compensation, no benefits and no reimbursements. Mark Schwamberger, Assistant Treasurer One State Farm Plaza, Bloomington, Illinois 61710 Devotes time necessary for proper administration of Foundation No compensation, no benefits and no reimbursements.

Alana Reimer; Assistant Treasurer One State Farm Plaza, Bloomington, IL 61710 Devotes time necessary for proper administration of Foundation No compensation, no benefits and no reimbursements.

Ed Woods; Assistant Secretary
One State Farm Plaza, Bloomington, Illinois 61710
Devotes time necessary for proper administration of Foundation
No compensation, no benefits and no reimbursements.

Kristi Higgins, Assistant Secretary
One State Farm Plaza, Bloomington, Illinois 61710
Devotes time necessary for proper administration of Foundation
No compensation, no benefits and no reimbursements.

State Farm Companies Foundation December 31, 2019 Form 990-PF 36-6110423 Part XV, Line 2

A. The name, address, and telephone number of the person to whom application should be addressed:

Ed Woods (309) 994-0280 State Farm Companies Foundation One State Farm Plaza Bloomington, Illinois 61710

B. Form in which applications should be submitted and information and materials they should include:

Foundation Scholarship Program

- Specific entry form

Matching Gift Program

- Specific application form

Good Neighbor Grant® Program

- Specific application form

C. Submission deadlines:

Foundation Scholarship Program

- March 31 each year

Matching Gift Program

- January 31 for previous year's donations

Good Neighbor Grant Program

- January 31 for previous year's volunteer hours

D. Restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Foundation Scholarship Program

- Parents and legal guardians must be a State Farm® employee, agent, or retiree.

Matching Gift Program

- Higher Education Program: Must be two- or four-year or above degree- granting U.S.

accredited college or university.

- Charitable Program: Qualified nonprofit organization, public or private school,

or government municipality.

Good Neighbor Grant Program

- Individual Program: Must be an eligible State Farm associate (active employee, agent or retiree). Must volunteer at least 40 hours a year to a qualified nonprofit organization, public or private school, or government municipality. Limited to one grant per calendar year.
- Team Program: State Farm associates may volunteer as a team to a qualified organization a minimum of 40 hours a year. Limited to one grant per calendar year.

State Farm Companies Foundation 36-06110423 FORM 990-PF, 2019

Note: The organizations listed below are not private foundations. They are either public charities, educational institutions, or divisions of state and local governments.

Other Education Awards		
Foundation for the Carolinas	Charlotte, North Carolina	122,500.00
Heartland Community College	Normal, IL	191,500.00
Illinois Wesleyan University	Bloomington, IL	636,000.00
Lincoln College	Lincoln, IL	20,000.00
National Merit Scholarship Corporation	Evanston, IL	1,796,807.00
Illinois State Universty	Normal, IL	200,000.00
University of Illinois	Urbana, IL	637,500.00
Total Other Education Awards		3,934,307.00
Matching Gift Program		7,722,299.68
Good Neighbor Grant Program		1,473,000.00
Total Organization		13,129,606.68

State Farm Companies Foundation 36-06110423 FORM 990-PF, 2019

Note. The organizations listed below are not private foundations. They are either public charities, educational institutions, or divisions of state and local governments.

Commitments for 2020 Scholarships

	800,000,00	800,000.00	800,000.00	200,000.00	47,500.00		191,500.00	200,000.00	300,000.00	20,000.00	200,000.00		15.00	10.00
Scholarships	National Merit Scholarships 2017	National Merit Scholarships 2018	National Merit Scholarships 2019	National Merit Scholarships 2020	National Merit \$2500 Scholarships	Grants	Heartland Community College	Illinois State University	Illinois Wesleyan University	Lincoln College	University of Illinois	Misc Fees	Illinois Charity Bureau Fund	Office of the Secretary of State

Total