, 457 08/29/20	019 10 02 AM	2	29493	3270	2011 9
Form	990	Return of Organization Exempt From Inc			OMB No 1545-0047
Form		Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (excep		dations)	2018
	of the Treasu renue Service	Pry Do not enter social security numbers on this form as it may be be go to www irs gov/Form990 for instructions and the latest interval	•		Open to Public Inspection
A Fort	he 2018 c	alendar year, or tax year beginning , and ending			
B Check if		C Name of organization		D Employer	dentification number
Address	s change	Patachou Foundation, Inc.			
Name c	hanne	Doing business as			41705
_	, i	Number and street (or P O box if mail is not delivered to street address) F 4923 N College Ave, Suite 25	Room/suite	E Telephone	number 202-0765
Initial re		City or town, state or province, country, and ZIP or foreign postal code		<u> </u>	.02-0705
terminat		Indianapolis IN 46205		C Crons room	ots \$ 801,752
Amende	ed return	F Name and address of principal officer		G Gross recei	
Applicat	tion pending	Eric Bruun	H(a) is this a gro	up return for sub	ordinates? Yes X No
	-		H(b) Are all sub	ordinates inclui	Jed? Yes No
		- 2	If "No	attach a list (s	ee instructions)
I Tax-ex	empt status	X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527			
J Websit		hepatachoufoundation.org	H(c) Group exe	molion oumber	•
	f organization		ar of formation 2		M State of legal domicile IN
Part I		mmary			
		scribe the organization's mission or most significant activities	,		
e i	The	Patachou Foundation's mission is to feed nutritious	after so	chool m	eals
and	to a	t-risk and food insecure children in the community.			
era					
Activities & Governance 9 5 7 5 7	Check the	s box \blacktriangleright [] if the organization discontinued its operations or disposed of more than 25%	6 of its net ass	ets	
os 3	Number of	of voting members of the governing body (Part VI, line 1a)		3	15
<u>s</u> 4	Number of	of independent voting members of the governing body (Part VI, line 1b)		4	15
<u>5</u> 5	Total num	iber of individuals employed in calendar year 2018 (Part V, line 2a)		5	0
9 Act	Total num	nber of volunteers (estimate if necessary)		6	125
7a	a Total unre	elated business revenue from Part VIII, column (C), line 12		7a	0
b	Net unrela	ated business taxable income from Form 990-T, line 38		7b	0
			Prior Yea	5,901	Current Year 684,205
e e		ons and grants (Part VIII, line 1h)		5,901	004,203
9	-	service revenue (Part VIII, line 2g)	1	975	4,091
		nt income (Part VIII, column (A), lines 3, 4, and 7d) enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	12.	L,044	93,833
		enue (Part VIII, column (A), lines 5, 6d, 6c, 9c, 10c, and 11e)		7,920	782,129
		nd similar amounts paid (Part IX, column (A), lines 1–3) R NOV 1 3 2019		,,,,,,,	0
•			<u>}</u>		0
1		other compensation, employee benefits (Part IX, column (A), lines 610 EN, LST		3,940	90,687
Experies 15 Experies 16a B	Professio	nal fundraising fees (Part IX, column (A), line 11e)	i		0
bei b		Iraising expenses (Part IX, column (D), line 25) ► 0			<u>د</u>
¹ 17		enses (Part IX, column (A), lines 11a-11d, 11f-24e)	174	1,704	233,695
18	Total expe	enses Add lines 13–17 (must equal Part IX, column (A), line 25)	243	3,644	324,382
	Revenue	less expenses Subtract line 18 from line 12		1,276	457,747
01 y sets or alances			Beginning of Cur		End of Year
		ets (Part X, line 16)		3,862	1,099,607
<u></u>		lities (Part X, line 26)		5,032	38,030
 Part II		s or fund balances Subtract line 21 from line 20	00.	3,830	1,061,577
<u> </u>	15	anature Block	te endiethe be		
Under po true, cor	rect, and co	mplete. Declaration of preparer (other than officer) is based on all information of which preparer has	s any knowledg	e	wiedge and belief, it is
<u>ר</u> ר	T	P. J. Two			0/20/2019
Sian		gnalture of officer		Date	
Sign Here	N .	Kevin Petrow Treasu	rer		
ζ	- 🗗 ' Ty	/pe or print name and title			· · · · · · · · · · · · · · · · · · ·
)	Print/Type	preparer's signature	Date	Check	If PTIN
Paid	David	M Holmes		/19 self-emp	
Preparer	Firm's nar	ne > Petrow Kane Leemhuis, PC	F	irm's EIN 🕨	26-3503647
Use Only	/ 19	8440 Woodfield Crossing #345			
	Firm's add	ress > Indianapolis, IN 46240	Р	hone no	317-452-4700
		s this return with the preparer shown above? (see instructions)		<u> </u>	X Yes No
For Paper	work Redu	iction Act Notice, see the separate instructions			Form 990 (2018)

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For Paperwork Reduction Act Notice, see the separate instructions DAA

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	Patachou Found		-2741705	Page 2
		Service Accomplishments	Part III	
	ribe the organization's missio	ntains a response or note to any line in this		
The Pat	achou Foundati	on's mission is to feed n nsecure children in the c		ool meals
prior Form 9	anization undertake any signi 990 or 990-EZ? scribe these new services on	ficant program services during the year which were r	not listed on the	Yes X No
services?	inization cease conducting, c scribe these changes on Sch	r make significant changes in how it conducts, any p edule O	program	Yes X No
expenses S	Section 501(c)(3) and 501(c)(vice accomplishments for each of its three largest pr 4) organizations are required to report the amount of for each program service reported		
		324,382 including grants of \$ ed and served over 30,000 after school programs in 3) nd food
4b (Code N/A) (Expenses \$	including grants of \$) (Revenue \$)
4c (Code N/A) (Expenses \$	including grants of \$) (Revenue \$)
) (Expenses \$	including grants of \$) (Revenue \$)
) (Expenses \$	including grants of \$) (Revenue \$)
N/A) (Expenses \$ am services (Describe in Sch) (Revenue \$)
N/A 4d Other progra (Expenses	am services (Describe in Sch	edule O)) (Revenue \$ (Revenue \$)

Form 990 (2018) Patachou Foundation, Inc. Part IV. Checklist of Required Schedules

46-2741705

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11b

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11d

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11f

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20a 20b

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11a X

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- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A
- 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?
- 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*
- 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II
- 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III
- 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I
- 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
- 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*

10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V

- 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable
- a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
- b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*
- c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII
- d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*
- e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
- f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*
- 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII
- Was the organization included in consolidated, independent audited financial statements for the tax year? If
 "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional
- 13 Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
- b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV
- 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV
- 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*
- 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)
- 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*
- **19** Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III
- 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
- b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?
- 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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Form	n 990 (2018) Patachou Foundation, Inc. 46-2741705		F	Page 4
<u> </u>	art IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
~~	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		╂───	X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			x
240	employees? If "Yes," complete Schedule J	23		_
24d	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K if "No," go to line 25a	24a		x
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u> </u>	<u>+</u>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		<u> </u>	<u> </u>
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26	 	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,		1	
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	_27	ļ	x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
•	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	20-		x
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	<u>28a</u>	<u> </u>	<u> </u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	285		x
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	205		
Ŭ	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	x	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Pai	t/ 31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<u>35a</u>		X
þ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	— —	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			v
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	i	x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		x
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note All Form 990 filers are required to complete Schedule O	38	x	
Pa	Int V Statements Regarding Other IRS Filings and Tax Compliance			<u> </u>
	Check if Schedule O contains a response or note to any line in this Part V			\Box
		······································	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	.0		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b C			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			Ì
	reportable gaming (gambling) winnings to prize winners?	1c		L

Δ	6	_	2	7	Δ	1	7	Λ	5	

Form	<u>1990 (2018)</u> Patachou Foundation, Inc. 46-2741705		P	age 5
Pa	Int V Statements Regarding Other IRS Filings and Tax Compliance (continued)		,	
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0	┥━━━		ل ــــا
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<u>2b</u>	L	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)]
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<u>3</u> a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	<u>3</u> b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			1
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u>X</u>
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		<u>X</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	<u>6</u> a		<u>X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	<u>6b</u>		
7	Organizations that may receive deductible contributions under section 170(c)	.		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	<u> </u>		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<u>7h</u>		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the]
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	·		<u> </u>
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations Enter			ł
а	Initiation fees and capital contributions included on Part VIII, line 12	_		-
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations Enter			- 1
а	Gross income from members or shareholders 11a	_		1
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)]
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	4		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.]
а	is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			1
b	Enter the amount of reserves the organization is required to maintain by the states in which			ļ
	the organization is licensed to issue qualified health plans 13b	4		- 1
с	Enter the amount of reserves on hand	<u> </u> i		1
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>X</u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		<u>X</u>
	If "Yes," see instructions and file Form 4720, Schedule N			<u> </u>
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O]
		For	m 990	(2018)

Forn	990 (2018) Patachou Foundation, Inc. 46-2741705		P	age 6
Pa	art VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and	d for a '	"No"	
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O $$ S	ee instr	uctior	าร
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
	•		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 15			
	If there are material differences in voting rights among members of the governing body, or			
	If the governing body delegated broad authority to an executive committee or similar	1		
	committee, explain in Schedule O	- (
b	Enter the number of voting members included in line 1a, above, who are independent 1b 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	·		
	one or more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	76		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	ode)		
		T	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	105		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		х
b	Other officers or key employees of the organization	15b		<u>x</u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a			[
	with a taxable entity during the year?	16a	1	х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed IN			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (<i>explain in Schedule O</i>)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
. •	financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	etrow Kane Leemhuis PC 8440 Woodfield Crossing Blvd.			
		7- <u>45</u>	2-4	<u>700</u>

Form 990 (20	18) Patachou Foundation,	Inc. 46-	2741705	Page 7
Part VII	Compensation of Officers, Directors	s, Trustees, Key Employees,	Highest Compensated Employees, and	d
	Independent Contractors			_
	Check if Schedule O contains a respo	onse or note to any line in this P	Part VII	

Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

. List all of the organization's current key employees, if any See instructions for definition of "key employee "

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

. List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

. List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest

compensated employees, and former such persons

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any	bo	x, unle	Pos check ass pe	rson i	than on s both a r/trustee	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
(1)Martha Hoover					-						
	0.00										
Director	0.00	X		X				0	0	0	
(2) Kevin Petrow											
	0.00		}						_		
Treasurer	0.00	X		X				0	0	0	
(3) Carter Wolf											
	0.00			ĺ					_	-	
Former Chairperson	0.00	X	L	X				0	0	0	
(4) Julie Eskenazi											
	0.00										
Director	0.00	X						0	0	0	
(5) John D. Hoover											
	0.00										
Director	0.00	X	L	_				0	0	0	
(6) Sally Bindley Mi											
ĺ	0.00	1									
Director	0.00	X						0	0	0	
(7) Eric Bruun											
	0.00										
Chairperson	0.00	X		X				0	0	0	
(8)Lisa Harris				1							
	0.00										
Director	0.00	X						0	0	0	
(9) Sallie Jo Mitzel											
	0.00	1									
Secretary	0.00	X		X				0	0	0	
(10) Bill Moreau		[
1	0.00										
Director	0.00	X						0	0	0	
(11) James Morris											
	0.00										
	0.00	X				F 1		0	0	0	

Form 990 (2018) Patachou Part VII Section A. Officers							5 2	46-274 Ind Highest Compensated		Page 8
(A) Name and title	(B) Average hours per week (list any	(d bo	o not c x, unie	(C Pos check ess pe	C) Ition more rson	than o is both	ne an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
.`	hours for related organizations betow dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	- organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(12) Rabbi Sandy S	asso 0.00									
Director	0.00	x						0	0	0
(13) Kelly Krausko	0.00									
Director (14) Jennifer Lee-	0.00 Crist	X				┟─┤		0	0	0
Director	0.00	x						0	0	0
(15) Jennifer Magl	ey 0.00 0.00	x						0	0	0
1b Sub-total										
c Total from continuation shee d Total (add lines 1b and 1c) 2 Total number of individuals (in	. <u></u>				e list	ted al	bove	e) who received more than	\$100,000 of	
 reportable compensation from Did the organization list any fo employee on line 1a? <i>If "Yes,"</i> For any individual listed on line organization and related organ <i>individual</i> Did any person listed on line 1 for services rendered to the org 	ormer officer, dir complete Scher e 1a, is the sum inzations greater a receive or acc ganization? If "Y	ector dule of of re than	, or t J for porta \$15	such able (0,000 ensa	o ind com 0? li ation	lividui pensi f "Yes i from	al atio s, " c n ang	n and other compensation omplete Schedule J for suc y unrelated organization or	from the ch	Yes No 3 X 4 X 5 X
Section B. Independent Contracto 1 Complete this table for your five	e highest comp	ensa	ted in	ndep	end	ent c	ontr	actors that received more t	han \$100,000 of	
compensation from the organia	(A) business address	ompe	ensat		o <u>r u</u>		leno		(B) (B) tion of services	(C) Compensation
·							·			
2 Total number of independent of								se listed above) who		

Form 990 (2018) Patachou Foundation, Inc. [Part VIII]

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Page 9

[Pa	art <u>V</u>	(III) Statement of Reve Check if Schedule		itains a	response	or note to any line	in this Part VIII		
[(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
<u>र</u> ्थ र	12		1a			<u> </u>	revenue		512-514
Program Service Revenue Contributions, Gifts, Grants	b la	Membership dues	1b						
0 Ĕ		Fundraising events	1c						
ar A	, u	Related organizations	1d						
0 2 2 2		Government grants (contributions)	1e					}	
Siz	f	All other contributions, gifts, grants,	16						
her		and similar amounts not included above	1f		684,205				
žõ	g	Noncash contributions included in lines 1a-		 \$	49,920				
Lone Dore	9	Total. Add lines 1a-1f	.,	v	•••	684,205			
<u>e</u>					Busn Code				
enu	2a				0000				······································
Rev									
S	c					·· <u>··</u> ································		<u> </u>	
eν	d					<u></u>			
E	e						· · · · · · · · · · · · · · · · · · ·		
ogra	f	All other program service reve	nue			······································		·	
Pro	g				•			•	
	3	Investment income (including	dividen	ds, intere	est,				
		and other similar amounts)			▶	4,091			4,091
	4	Income from investment of tax	-exem	pt bond p	oroceeds 🕨				
	5	Royalties							
		(i) Real		(II) I	Personal				
	6a	Gross rents							
	b	Less rental exps			_				
	¢	Rental inc. or (loss)							
	d	Net rental income or (loss)			>				
	7a Gross amount from (i) Securities (ii) Gross and (ii) Gross and (ii) Gross and (ii) Gross and (iii) Gross an) Other				
		other than inventory							
	b	Less cost or other							
		basis & sales exps							
	C	Gain or (loss)		l					l
	d	Net gain or (loss)	r		•				
e	8a	Gross income from fundraising eve	nts						
ent		(not including \$							
Sev		of contributions reported on line 1c)							
er		See Part IV, line 18	a		111,401				
Other Revenue		Less direct expenses	b		19,623				·
-	c	Net income or (loss) from fund		events	>	91,778			
	9a	Gross income from gaming activitie					•		
		See Part IV, line 19	a						1
		Less direct expenses	рĮ						
		Net income or (loss) from gam	ing aci	ivities					
	10a	Gross sales of inventory, less returns and allowances							
	h		a b	<u>,</u>					
		Less cost of goods sold		(onton)				·	
	C	Net income or (loss) from sale Miscellaneous Revenue	<u>5 01 Inv</u>	rentory	Busn Code				
	11a	Retail Sales				2,055	2,055	·	
	b	Verait Sates							
	c				<u>├</u> ───┤				
	ď	All other revenue							
	e	Total. Add lines 11a-11d			►	2,055			
	12	Total revenue. See instruction	s			782,129	2,055	0	4,091

Form 990 (2018) Patachou Foundation, Inc.

46-2741705

Page 10

Sec	Ction 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX									
00.			(IIIS Fait IX	(C)						
	not include amounts reported on lines 6b, 3b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses					
1	Grants and other assistance to domestic organizations									
	and domestic governments See Part IV, line 21									
2	Grants and other assistance to domestic				•					
	individuals See Part IV, line 22									
3	Grants and other assistance to foreign									
	organizations, foreign governments, and foreign									
	individuals See Part IV, lines 15 and 16				-					
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees									
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)									
7	Other salaries and wages	90,687	90,687							
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)									
9	Other employee benefits									
10	Payroll taxes									
11	Fees for services (non-employees)									
а	Management									
b	Legal									
С	Accounting									
d	Lobbying									
е	Professional fundraising services See Part IV, line 17									
f	Investment management fees									
g	Other (If line 11g amount exceeds 10% of line 25, column	00.450	00.450							
	(A) amount, list line 11g expenses on Schedule O)	22,450	22,450		<u> </u>					
12	Advertising and promotion	<u> </u>	C 040							
13	Office expenses	6,049	6,049 2,795	··· <u>····</u> ·····						
14	Information technology	2,795	2,195							
15	Royalties									
16		2 224	2,224		<u> </u>					
17	Travel	2,224	Z,ZZ4		<u>+</u>					
18	Payments of travel or entertainment expenses									
10	for any federal, state, or local public officials									
19 20	Conferences, conventions, and meetings Interest									
20 21					<u> </u>					
22	Payments to affiliates Depreciation, depletion, and amortization	1,360	1,360							
23	Insurance	1,178	1,178		·					
24	Other expenses Itemize expenses not covered				·					
	above (List miscellaneous expenses in line 24e If									
	line 24e amount exceeds 10% of line 25, column									
	(A) amount, list line 24e expenses on Schedule O)									
а	Food for the program	98,792	98,792							
b	Meal preparation	57,813	57,813	· · · ·						
c	Education	31,540	31,540							
d	Volunteer expenses	5,081	5,081							
e	All other expenses	4,413	4,413							
25	Total functional expenses Add lines 1 through 24e	324,382	324,382	0	0					
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ if following SOP 98-2 (ASC 958-720)									

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Form 990 (2018) Patachou Foundation, Inc.

46-2741705

<u> </u>	art	Check if Schedule O contains a response or note	to any line in this Part X			
		·		(A) Beginning of year		(B) End of year
	1	Cash-non-interest bearing		597,372	1	1,089,477
	2	Savings and temporary cash investments	L		2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former of	ficers, directors,			
		trustees, key employees, and highest compensated em	ployees			
		Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified per-	sons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B),	and contributing employers and		·	
		sponsoring organizations of section 501(c)(9) voluntary	employees' beneficiary			
3		organizations (see instructions) Complete Part II of Sch	nedule L		6	
クシンククモ	7	Notes and loans receivable, net			7	
ζ	8	Inventories for sale or use	Γ		8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or		_		
		other basis Complete Part VI of Schedule D	10a 3,216			
	b	Less accumulated depreciation	10b 2,660	926	10c	556
	11	Investmentspublicly traded securities			11	
	12	Investments-other securities See Part IV, line 11	Γ		12	
	13	Investmentsprogram-related See Part IV, line 11	l l		13	
	14	Intangible assets	Γ	10,564	14	9,574
	15	Other assets See Part IV, line 11	Γ		15	
	16	Total assets. Add lines 1 through 15 (must equal line 3	4)	608,862	16	1,099,607
	17	Accounts payable and accrued expenses		5,032	17	38,030
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of	of Schedule D		21	
2	22	Loans and other payables to current and former officers	, directors,			
רומחווווומא		trustees, key employees, highest compensated employe	ees, and			
ŝ		disqualified persons Complete Part II of Schedule L			22	
J	23	Secured mortgages and notes payable to unrelated third	d parties		23	
	24	Unsecured notes and loans payable to unrelated third p	arties		24	
	25	Other liabilities (including federal income tax, payables t	o related third			
		parties, and other liabilities not included on lines 17-24)	Complete Part X			
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		5,032	26	<u> </u>
		Organizations that follow SFAS 117 (ASC 958), chec	k here 🕨 🔀 and			• •
5	ļ	complete lines 27 through 29, and lines 33 and 34	-	· ····		
5	27	Unrestricted net assets		538,830	27	716,128
	28	Temporarily restricted net assets		65,000	28	345,449
2	29	Permanently restricted net assets	L		29	
-		Organizations that do not follow SFAS 117 (ASC 958	i), check here 🕨 📃 and 📗			
5	İ	complete lines 30 through 34.	-			•
5	30	Capital stock or trust principal, or current funds			30	
Ś	31	Paid-in or capital surplus, or land, building, or equipmen	t fund		31	
ואבו שמפנים הני הנות המומורכים	32	Retained earnings, endowment, accumulated income, o	r other funds		32	<u></u>
-	33	Total net assets or fund balances		603,830	33	1,061,577
	34	Total liabilities and net assets/fund balances		608,862	34	1,099,607

Forn	990 (2018) Patachou Foundation, Inc. 46-2741705			Page 12
Pa	art XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	78	32,129
2	Total expenses (must equal Part IX, column (A), line 25)	2	32	24,382
3	Revenue less expenses Subtract line 2 from line 1	3	4	57,747
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6(03,830
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	10	1,00	51,577
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
_				Yes No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		ł	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	

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3457 08/29/2019 10 0	2 AM					
SCHEDULE	A	Pub	lic Charity Status	s and Pul	olic Support	OMB No 1545-0047
(Form 990 or 99	90-EZ)	•	ganization is a section 501(c)(3) organi		•••	2040
Department of the Tr	-		Attach to Form 9	990 or Form 990	-EZ.	Open to Public
Internal Revenue Se	rvice	► Go to	www.irs.gov/Form990 for in	structions and t	he latest information.	Inspection
Name of the organi:		_				over identification number
			Indation, Inc.			-2741705
Part I			Status (All organizations			ructions
			e it is (For lines 1 through 12, ociation of churches described	-		$\wedge Q$
			A)(ii). (Attach Schedule E (Fori	•		M
			ce organization described in se			
			d in conjunction with a hospital			er the hospital's name,
	and state	•				
5 🗌 An or	ganization o	perated for the benefit of	of a college or university owned	l or operated by a	i governmental unit descri	bed in
		(A)(iv). (Complete Part				
			overnmental unit described in s			-1
·	•	ion 170(b)(1)(A)(vi). (C	substantial part of its support fr omplete Part II)	rom a governmer	ital unit or from the genera	
			170(b)(1)(A)(vi). (Complete Par	tII)		•
9 🗌 An ag	ricultural res	earch organization des	cribed in section 170(b)(1)(A)((ix) operated in c		
		non-land-grant college of	of agriculture (see instructions)	Enter the name,	city, and state of the colle	age or
univei	•	at normally receives (1) more than 33 1/3% of its sup	nort from contrib	utions membershin fees	and gross
	-	• •	npt functionssubject to certain	•		-
	•		nd unrelated business taxable in	•		ses
·	-	•	0, 1975 See section 509(a)(2)			
			exclusively to test for public saf exclusively for the benefit of, to			
of one	or more pu	blicly supported organiz	zations described in section 50 nat describes the type of suppo	9(a)(1) or sectio	n 509(a)(2). See section	509(a)(3).
а 📋 Ту	ype I. A sup	porting organization ope	erated, supervised, or controlled	d by its supported	d organization(s), typically	by giving
			ver to regularly appoint or elect		directors or trustees of th	e
			omplete Part IV, Sections A a		noted encouration(a) by	hours
			pervised or controlled in conne- ting organization vested in the			
			Part IV, Sections A and C.		..	17 F -
			upporting organization operate			rated with,
	••	•	tructions) You must complete	-		anization/a)
			 A supporting organization operation operation operation generally must set of the set			
			nust complete Part IV, Sectio			
			eived a written determination fr		t is a Type I, Type II, Type	e III
	•	egrated, or Type III noi of supported organizati	n-functionally integrated suppor	ting organization		
		•	ie supported organization(s)			
(i) Name of supp		(II) EIN	(iii) Type of organization	(IV) Is the organization	(v) Amount of monetar	y (vi) Amount of
organization	n		(described on lines 1-10	listed in your governi	· • · · · · · · · · · · · · · · · · · ·	other support (see
			above (see instructions))	document? Yes No	instructions)	instructions)
(A)						
(B)				┼──┼──		
				<u> </u>		
(C)			· · · · · · · · · · · · · · · · · · ·			
(D)						

Total For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ

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Schedule A (Form 990 or 990-EZ) 2018

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3457 0	8/29/2019 10 02 AM						
Sche	edule A (Form 990 or 990-EZ) 2018 Pat	achou Fou	indation.	Inc.	46	-2741705	Page 2 🖊
	art II Support Schedule for O						
	(Complete only if you che						
<u></u>	Part III If the organization	fails to qualify	under the test	s listed below,	please complet	te Part III)	_ /
	tion A. Public Support						
Cale	ndar yeàr (or fiscal year beginning in) 📃 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge		<u>\</u>				
4	Total. Add lines 1 through 3		<u> </u>				
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4			1			
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🛛 🕨	(a) 2014	(b) 2015	/(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4			X			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources			\square			
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10 11	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. Add lines 7 through 10	/	/				
12	Gross receipts from related activities, etc	(see instructions)		L	\	12	+
13	First five years. If the Form 990 is for the		t. second. third. fo	urth, or fifth tax ve	artas a section 501		
	organization, check this box and stop here		,,,	,,		(-/(-/	▶□
Sec	tion C. Computation of Public Su		tage		<u> </u>		
14	Public support percentage for 2018 (line 6	, column (f) divided	d by line 11, colum	nn (f))		14	%
15	Public support percentage from 2017 Sche	edule A, Part II, line	e 14		Ň	15	%
16a	33 1/3% support test-2018. If the organi	zation did not che	ck the box on line	13, and line 14 is 3	33 1/3% ồr more, c	check this	_
	box and stop here. The organization quali				ľ		
b	33 1/3% support test—2017. If the organ				15 is 33 1/3% or m	ore, check	. —
	this box and stop here. The organization of						▶ [_]
17a	10%-facts-and-circumstances test-201				<i>u</i>		
	10% or more, and if the organization meet						
	Part VI how the organization meets the "fa	cts-and-circumsta	nces" test The or	ganization qualifies	s as a publicly sup	ported	▶ □
	organization					Ŋ	
ь	10%-facts-and-circumstances test—201	-				N	
	15 is 10% or more, and if the organization					1	
	Explain in Part VI how the organization me	ets the "facts-and-	-circumstances" te	est The organization	on qualifies as a pl		
40	supported organization	1 not obselv	m luno 12 16a 10	h 170 ar 176 af	ack this hav and as		► [_]
18	Private foundation. If the organization dic	not cneck a box o	on IINE 13, 168, 16	ס, ווא, סר זוס, che			
						Schedule A (Form	990 or 990-EZ) 2018

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Sche	dule A (Form 990 or 990-EZ) 2018 Pat	tachou Fou	indation,	Inc.	46-	-2741705	Page 3
L Pa	art III _ Support Schedule for O	rganizations D	escribed in Se	ection 509(a)(2	2)		
	(Complete only if you che						Part II
	If the organization fails to	qualify under th	e tests listed b	elow, please co	omplete Part II)	
Sec	tion A. Public Support	_					
Cale	ndar year (or fiscal year beginning in) 🕨 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership						
	fees received (Do not include any "unusual grants ")	153,063	199,197	201,916	315,901	684,205	1,554,282
2	Gross receipts from admissions, merchandise	ļ ,	j				
	sold or services performed, or facilities furnished in any activity that is related to the					χ.	
	organization's tax-exempt purpose	21,825	49,368	68,362	132,191	113,456	385,202
3	Gross receipts from activities that are not an						
•	unrelated trade or business under section 513						
4	Tax revenues levied for the						
-	organization's benefit and either paid			ļ			
	to or expended on its behalf						
5	The value of services or facilities						
v	furnished by a governmental unit to the	1					
	organization without charge						
6	Total. Add lines 1 through 5	174,888	248,565	270,278	448,092	797,661	1,939,484
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified			1			
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
•	Add lines 7a and 7b						
c							
8	Public support. (Subtract line 7c from					•	
<u></u>	line 6)	L	l	I	. <u> </u>		1,939,484
_	tion B. Total Support						
	ndar year (or fiscal year beginning in) 🕨 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	174,888	248,565	270,278	448,092	797,661	1,939,484
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,			•			
	royalties, and income from similar sources	247	494	736	975	4,091	6,543
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975						
	acquired after June 30, 1975						
с	Add lines 10a and 10b	247	494	736	975	4,091	6,543
44	Not income from unrelated business						
11	Net income from unrelated business activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	175,135	249,059	271,014	449,067	801,752	1,946,027
14	First five years. If the Form 990 is for the	•	second, third, fou	rth, or fifth tax yea	r as a section 501(c)(3)	
	organization, check this box and stop here					<u></u>	
<u>Sec</u>	tion C. Computation of Public Su	pport Percent	age				
15	Public support percentage for 2018 (line 8,	, column (f), divided	by line 13, colum	n (f))		15	99.66%
<u>16</u>	Public support percentage from 2017 Sche	edule A, Part III, lin	e 15			16	99.80%
Sec	tion D. Computation of Investme	nt Income Per	centage		····		
17	Investment income percentage for 2018 (li	ine 10c, column (f),	divided by line 13,	column (f))		17	%
18	Investment income percentage from 2017					18	%
19a	33 1/3% support tests-2018. If the organ			14, and line 15 is i	more than 33 1/3%	, and line	
	17 is not more than 33 1/3%, check this bo						► X
b	33 1/3% support tests—2017. If the organ						
-	line 18 is not more than 33 1/3%, check th						▶□
20	Private foundation. If the organization did						▶□

Schedule A (Form 990 or 990-EZ) 2018

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Page 4

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Par	IV Supporting Organizations (Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, cor and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Pa Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and com	art I, complete	A
Secti	on A. All Supporting Organizations	<u>5,6(6) alt ()</u>	
		Y	es
1	Are all of the organization's supported organizations listed by name in the organization's governing		
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by	 -	
_	class or purpose, describe the designation If historic and continuing relationship, explain		
2	Did the organization have any supported organization that does not have an IRS determination of status		
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	<u> </u>	
vu	(b) and (c) below		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and		
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the		
	organization made the determination	3b	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)		
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c	
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If		
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign		
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b	
с	Did the organization support any foreign supported organization that does not have an IRS determination	40	
Ŭ	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used		
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	[]	
	purposes	4c	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"		
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN		
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,		
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action		
L	was accomplished (such as by amendment to the organizing document)	_ <u>5a</u>	
D	Type I or Type II only. Was any added or substituted supported organization part of a class already design design and the organization is the organization of a class already	5b	
с	designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	50	
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to		
•	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited		
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or		
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor		
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity		
_	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	8	
0.2	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) Was the organization controlled directly or indirectly at any time during the tax year by one or more		
9a	disqualified persons as defined in section 4946 (other than foundation managers and organizations described		
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which		
-	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	
с	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit		
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section		•
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated		<u></u>
	supporting organizations)? If "Yes," answer 10b below	_ <u>10a</u>	
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	10b	
	determine whether the organization had excess business holdings)		

Schedule A (Form 990 or 990-EZ) 2018

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	······································	41705		Page 5
[_rai	rt IV Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	[····	163	1
a				.
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
_ c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		•	
	controlled the organization's activities If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	<u> </u>		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part		,	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			لـــَـــا
	supervised, or controlled the supporting organization	2		
Secti	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	[-]	t	•
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			.
	or management of the supporting organization was vested in the same persons that controlled or managed			لسبندا
	the supported organization(s)	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		·
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			4
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		<u> </u>	
_	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			-
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			J
Secti	supported organizations played in this regard on E. Type III Functionally-Integrated Supporting Organizations	3		
		ctions)		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	cuonsy		
a b	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations Complete line 3 below The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	instructions)		
C	The organization supported a governmental entity Describe in Part vi now you supported a government entity (see	manuchomay		
2 A	Activities Test Answer (a) and (b) below.	ſ	Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	[]		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			1
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			ł
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			i
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or]
-	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard

3b Schedule A (Form 990 or 990-EZ) 2018

edule A (Form 990 or 990-EZ) 2018 Patachou Foundation, Inc			L 705 P
art V Type III Non-Functionally Integrated 509(a)(3) Supporting			
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust			
instructions. All other Type III non-functionally integrated supporting organization	is must comple	ete Sections A through E	
ection A - Adjusted Net Income		(A) Prior Year	(B) Current Yea
1 Net short-term capital gain	1	<u> </u>	(optional)
2 Recoveries of prior-year distributions	2	· · · · · · · · · · · · · · · · · · ·	+
3 Other gross income (see instructions)	3	··	+
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			l l
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	<u> </u>	<u> </u>
ection B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		· · · · · · · · · · · · · · · · · · ·
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	10 10		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,		<u></u>	
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	w	
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
ection C - Distributable Amount		•	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		·····	
emergency temporary reduction (see instructions)	6		

instructions)

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Schedule A (Form 990 or 990-EZ) 2018

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I.

I.

Part V Type III Non-Functionally Integrated 509(a) Section D - Distributions			Current Year
·			
1 Amounts paid to supported organizations to accomplish exempt p			
2 Amounts paid to perform activity that directly furthers exempt pur	poses of supported		
organizations, in excess of income from activity			
3 Administrative expenses paid to accomplish exempt purposes of	supported organizations		
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval required)			
6 Other distributions (describe in Part VI) See instructions			
7 Total annual distributions Add lines 1 through 6			
8 Distributions to attentive supported organizations to which the org	ganization is responsive		
(provide details in Part VI) See instructions			
9 Distributable amount for 2018 from Section C, line 6			·····
0 Line 8 amount divided by line 9 amount	<u> </u>		<u> </u>
Section E - Distribution Allocations (see instructions)	(I) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-explain in Part VI) See			
Instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013 b From 2014		······	<u> </u>
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from			
Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if			
any Subtract lines 3g and 4a from line 2 For result			
greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h			
and 4b from line 1. For result greater than zero, explain in			
Part VI See instructions			
7 Excess distributions carryover to 2019 Add lines 3j and 4c			
B Breakdown of line 7			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018		·····	

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SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. So to www.irs.gov/Form990 for instructions and the latest informat

Open to Public

OMB No 1545-0047

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Internal	Revenue Service	Go to www.irs.gov/Form990	for instructions and the latest informat	tion.	Inspection
Name o	f the organization			Employer identifica	ation number
D -	•				
		ndation, Inc.		46-27417	/05
Pai		tions Maintaining Donor Advised Fu		Accounts.	
			(a) Donor advised funds	(b) Funds a	and other accounts
1	Total number at end o	f vear			
		ntributions to (during year)			
		ants from (during year)		<u></u>	
	Aggregate value at en				
		nform all donors and donor advisors in writing that	t the assets held in donor advised	4	
	-	ation's property, subject to the organization's exc			🗌 Yes 🗍 No
		nform all grantees, donors, and donor advisors in	-		
	-	poses and not for the benefit of the donor or don	• •		
	conferring impermissil				🗌 Yes 🗌 No
Par	t II Conserva	ation Easements.			
	Complete	if the organization answered "Yes" on	Form 990, Part IV, line 7		
1	Purpose(s) of conserv	ation easements held by the organization (check	all that apply)		
[Preservation of lai	nd for public use (e g , recreation or education)	Preservation of a historically imp	ortant land area	
[Protection of natu	ral habitat	Preservation of a certified histori	ic structure	
[Preservation of op	pen space			
2	Complete lines 2a thro	ough 2d if the organization held a qualified conse	rvation contribution in the form of a const	ervation	
	easement on the last of	day of the tax year		Held at	the End of the Tax Year
а	Total number of conse	ervation easements		2a	
Ь	Total acreage restricte	ed by conservation easements		2b	<u> </u>
С	Number of conservation	on easements on a certified historic structure inc	luded in (a)	2c	
ď	Number of conservation	on easements included in (c) acquired after 7/25/	06, and not on a		
		In the National Register		2d	
	Number of conservation tax year ►	on easements modified, transferred, released, ex	tinguished, or terminated by the organiza	ation during the	
	•	re property subject to conservation easement is	located ►		
		have a written policy regarding the periodic mon			
	•	ement of the conservation easements it holds?			Yes No
		urs devoted to monitoring, inspecting, handling o	of violations, and enforcing conservation e	easements during	the year
				-	
7	Amount of expenses ⊪ ▶ \$	ncurred in monitoring, inspecting, handling of vio	lations, and enforcing conservation easer	ments during the y	vear
8	r ↓ Does each conservatu	on easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(B)(n)	
	and section 170(h)(4)(·/	Yes No
		now the organization reports conservation easem	ents in its revenue and expense stateme	nt, and	
		clude, if applicable, the text of the footnote to the			
		ting for conservation easements	•	_	
Par	t III Organiza Complete	tions Maintaining Collections of Art, If the organization answered "Yes" on	Historical Treasures, or Other Form 990, Part IV, line 8	Similar Asset	s.
1a		cted, as permitted under SFAS 116 (ASC 958), n		balance sheet	
		treasures, or other similar assets held for public			
1	public service, provide	, in Part XIII, the text of the footnote to its financi	al statements that describes these items		
b	If the organization elec	cted, as permitted under SFAS 116 (ASC 958), to	o report in its revenue statement and bala	ance sheet	
,	works of art, historical	treasures, or other similar assets held for public	exhibition, education, or research in furth	nerance of	
I	public service, provide	the following amounts relating to these items			
((i) Revenue included	on Form 990, Part VIII, line 1		▶ \$	
((ii) Assets included in	Form 990, Part X		▶ \$	
2	If the organization rece	eived or held works of art, historical treasures, or	other similar assets for financial gain, pr	ovide the	
		uired to be reported under SFAS 116 (ASC 958)			
	-	Form 990, Part VIII, line 1		► \$	
b /	Assets included in For	m 990, Part X		► \$	

Schedule D (Form 990) 2018 Patachou	Foundatio	n, Inc		46-274	1705_	_	Page 2
Part III Organizations Maintaining	g Collections of	f Art, Historical T	reasures,	or Other Si	imilar Ass	ets (continue	
3 Using the organization's acquisition, accessi collection items (check all that apply)	on, and other record	ds, check any of the fo	llowing that a	are a significant	use of its		
a Public exhibition	d 🗌	Loan or exchange pro	ograms				
b Scholarly research	е 🗖	Other	0				
c Preservation for future generations	<u> </u>						
4 Provide a description of the organization's co	diections and explai	n how they further the	organization	's exempt purp	ose in Part		
XIII	•	•	U				
5 During the year, did the organization solicit o						Yes	
assets to be sold to raise funds rather than to Part IV Escrow and Custodial Arr		part of the organization	n's collection				
Complete if the organization 990, Part X, line 21	-	" on Form 990, Pa	art IV, line	9, or reporte	d an amou	unt on Form	
1a Is the organization an agent, trustee, custodi included on Form 990, Part X?	an or other intermed	diary for contributions	or other asse	ts not		☐ Yes	
b If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table					
		, ioning toble				Amount	
c Beginning balance					1c		
d Additions during the year					1d		
e Distributions during the year					1e		
f Ending balance					1f		
2a Did the organization include an amount on Fi	orm 990 Part X line	21 for escrow or cus	stodial accourt	nt liability?		Yes	No
b If "Yes," explain the arrangement in Part XIII							H
Part V Endowment Funds.	oncok here ii the e	xpianation has been p					
Complete if the organization	answered "Yes	" on Form 990 Pa	art IV line :	10			
	(a) Current year	(b) Prior year	(c) Two yes) Three years ba	ck (e) Four ye	ars hack
			(0) 1.10 90		,		
1a Beginning of year balance			+		<u>-</u>		
			<u>+</u>				
c Net investment earnings, gains, and			ļ				
			+				
d Grants or scholarships		· · · · · · · · · · · · · · · · · · ·	+				
e Other expenditures for facilities and							
programs			+				
f Administrative expenses			+				
g End of year balance		<u> </u>	<u> </u>	·			
2 Provide the estimated percentage of the curr		e (line 1g, column (a))	held as				
a Board designated or quasi-endowment	%						
b Permanent endowment ► %	•						
c Temporarily restricted endowment ►	%						
The percentages on lines 2a, 2b, and 2c sho	•						
3a Are there endowment funds not in the posses	ssion of the organiza	ation that are held and	administered	a for the		[
organization by						[]	es No
(i) unrelated organizations						3a(i)	
(ii) related organizations						3a(ii)	
b If "Yes" on line 3a(ii), are the related organiza						3b	
4 Describe in Part XIII the intended uses of the		owment funds				·	
Part VI Land, Buildings, and Equi		"		44 - O F-	000 D-		
Complete if the organization							
Description of property	(a) Cost or other t			(c) Accumi		(d) Book valu	91
·	(investment)	(oth	iei)	deprecia			
1a Land							<u> </u>
b Buildings	ļ			ļ			
c Leasehold improvements							
d Equipment			0.01.0				
e Other		l	3,216		2,660		556
Total. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	t X, column (B), line 10	Dc)				556

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10c	Total.	Add lines	1a through	1e	(Column (′d) mu	st equa	l Form 990,	Part X,	column (B,), line 10	c)
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Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 Patachou Foundation,	Inc.	46-2741705	Page 3
Part VII	Investments—Other Securities.			
	Complete if the organization answered "Yes" on	Form 990, Part IV, Iir	e 11b See Form 990, F	Part X, line 12
	(a) Description of security or category	(b) Book value	(c) Method o	f valuation
	(including name of security)		Cost or end-of-ye	ar market value
(1) Financial	derivatives			
(2) Closely-h	eld equity interests	· · · · · · · · · · · · · · · · · · ·	· · · · · ·	· · · · · · · · · · · · · · · · · · ·
(3) Other				·····
(a)				
(B)				
(C)				
(D)			<u> </u>	
(E)				
(F)			······	
(G)				
(H)				
Total. (Colun	nn (b) must equal Form 990, Part X, col. (B) line 12) 🕨			
[Part VIII]	Investments—Program Related.			· _
	Complete if the organization answered "Yes" on	Form 990, Part IV, lin	e 11c See Form 990. F	Part X, line 13
	(a) Description of investment	(b) Book value	(c) Method o	
			Cost or end-of-ye	
(4)				
<u>(1)</u>			<u> </u>	
(2)				
(3)			}	
_(4)				
_(5)				
_(6)		[
_(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col. (B) line 13) 🕨			······································
Part IX	Other Assets.	<u> </u>	L	
	Complete if the organization answered "Yes" on I	Form 990 Part IV Jun	e 11d. See Form 990. F	Part X line 15
	(a) Description			(b) Book value
(4)				
(1)				
(2)				
(3)				
_(4)				
_(5)				
_(6)				
_(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col (B) line 15)			
Part X	Other Liabilities.			·
	Complete if the organization answered "Yes" on I	Form 990 Part IV Jun	e 11e or 11f. See Form	990 Part X
	-			
	line 25	T	<u> </u>	
1	(a) Description of liability	(b) Book value	4	
(1) Federal	income taxes		-	
_(2)			-	:
_(3)			<u> </u>	
_(4)				
(5)				
(6)				
(7)			1	•
			1	
(8)		<u>├</u>	1	
<u>(9)</u>			4	
	n (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>		
	uncertain tax positions In Part XIII, provide the text of the footi			
organization's	liability for uncertain tax positions under FIN 48 (ASC 740) Ch	eck here if the text of the f		
DAA			s	Schedule D (Form 990) 2018

hedule D (Form 990) 2018 Patachou Foundation, In	c. 46-	2741705	Page 4
Part XI Reconciliation of Revenue per Audited Financial	Statements With Revenu	ie per Return.	
Complete if the organization answered "Yes" on For	<u>m 990, Part IV, line 12a</u>		
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a Net unrealized gains (losses) on investments	2a		
b Donated services and use of facilities	26		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b		4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	12)	5	
Part XII Reconciliation of Expenses per Audited Financia	al Statements With Expen	ses per Return.	
Complete if the organization answered "Yes" on For	m 990, Part IV, line 12a		
Total expenses and losses per audited financial statements			
2 Amounts included on line 1 but not on Form 990, Part IX, line 25			
a Donated services and use of facilities	2a		
b Prior year adjustments	2b		
c Other losses	2c		
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d		2e	
Subtract line 2e from line 1		3	
Amounts included on Form 990, Part IX, line 25, but not on line 1			
Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	4a 4b		
a Investment expenses not included on Form 990, Part VIII, line 7b	······	40	

Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

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SCHEDULE G	Supplemental Inform	nation Regard	ling	Fund	draising or Gamin	g Activities	OMB No 1545-0047
(Form 990 or 990-EZ)		zation entered more th	an \$15,	000 on		r if the	2018
Department of the Treasury Internal Revenue Service	Go to w	Attach to For ww.irs.gov/Form990 fo			and the latest information		Open to Public Inspection
Name of the organization						Employer identific	
	tachou Foundatio					46-2741	
	ing Activities. Complete if -EZ filers are not required t				red "Yes" on Form	990, Part IV, line	e 17
	rganization raised funds through a				Check all that apply		
a 🗌 Mail solicitations		e 🗌 Solicitation	n of no	n-qov	ernment grants		
b Internet and email	solicitations			_	nent grants		
c Phone solicitations		g 🗌 Special fur					
d In-person solicitati			- arais				
2a Did the organization ha	ave a written or oral agreement w	th any individual (includ	ing of	ficers, directors, trustee	es,	
	d in Form 990, Part VII) or entity i nest paid individuals or entities (fu				-		_ Yes _ No
	\$5,000 by the organization						
				id fund- r have		(v) Amount paid to	(vi) Amount paid to
	address of individual y (fundraiser)	(II) Activity		ody or irol of	(IV) Gross receipts from activity	(or retained by) fundraiser listed in	(or retained by) organization
- <u></u>				outions?		col (I)	
			Yes	No	•		
1				ļ			
2			+				
			1				
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4			+				+
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6							+
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<u></u>	<u> </u>					<u></u>	
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0							
-							
9							
						<u>_</u>	
• <u></u>							
Total							1

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

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Schedule G (Form 990 or 990-EZ) 2018 Patachou Foundation, Inc.

46-2741705 Page 2

LPart II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

-						
		•	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Speakers Forum	First Friday on	None	(add col (a) through
e			(event type)	(event type)	(total number)	co! (c))
Revenue	1	Gross receipts	86,236	25,165		111,401
	2	Less Contributions		· · · · · · · · · · · · · · · · · · ·		
	3		86,236	25,165		111,401
——		line 2)	00,230	23,103		111,401
	4	Cash prizes				
	5	Noncash prizes				
enses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Dire	8	Entertainment				
	9	Other direct expenses	12,756	6,867	F	19,623
	10	Direct expense summary	Add lines 4 through 9 in column (d	d)	►	19,623
			btract line 10 from line 3, column (91,778
<u>. r</u>	ar <u>ı</u>		plete if the organization answ in Form 990-EZ, line 6a	wered tes on Form 990, P	art IV, line 19, or repor	ted more
			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
evenue				(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue			(c) Other gaming	
		Gross revenue Cash prizes			(c) Other gaming	
	2				(c) Other gaming	
Direct Expenses Revenue	2 3	Cash prizes			(c) Other gaming	
	2 3 4	Cash prizes Noncash prizes Rent/facility costs			(c) Other gaming	
	2 3 4 5	Cash prizes Noncash prizes			(c) Other gaming	
	2 3 4 5 6	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	(a) Bingo	Yes % No	Yes %	
	2 3 4 5 6 7	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary	(a) Bingo Yes % No	bingo/progressive bingo	Yes % No	
Direct Expenses	2 3 4 5 6 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Net gaming income summ	(a) Bingo Yes % No Add lines 2 through 5 in column (c hary Subtract line 7 from line 1, co	bingo/progressive bingo	Yes % No	
c Direct Expenses	2 3 4 5 6 7 8 Ent	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Net gaming income summ	(a) Bingo Yes % No Add lines 2 through 5 in column (c hary Subtract line 7 from line 1, co	bingo/progressive bingo	Yes % No	
e co Direct Expenses	2 3 4 5 6 7 8 Ent Is t	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Net gaming income summ	(a) Bingo Yes % No Add lines 2 through 5 in column (c hary Subtract line 7 from line 1, co	bingo/progressive bingo	Yes % No	col (a) through col (c))
g w co	2 3 4 5 6 7 8 Ent Is t If "f	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary Net gaming income summ ter the state(s) in which the he organization licensed to No," explain	(a) Bingo Yes % No Add lines 2 through 5 in column (c hary Subtract line 7 from line 1, co	bingo/progressive bingo	Yes % No	col (a) through col (c))

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Sche	edule G (Form 990 or 990-EZ) 2018 Patachou Foundation, Inc.	46-274170	5 F	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity			_
	formed to administer charitable gaming?		Yes	No No
13	Indicate the percentage of gaming activity conducted in			
а	The organization's facility	<u>13a</u>		%
b	An outside facility	13b		%_
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records			
	Name 🕨			
	Address ►			
15a	Does the organization have a contract with a third party from whom the organization receives gaming			
	revenue?		Yes	No No
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 💲	and the		
	amount of gaming revenue retained by the third party \$			
C	If "Yes," enter name and address of the third party			
	Name 🕨			
	Address ►			
16	Gaming manager information			
	Name 🕨			
	Gaming manager compensation > \$			
	Description of services provided ►			
	Director/officer Employee Independent contractor			
17	Mandatory distributions			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	🗌 No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or			
	spent in the organization's own exempt activities during the tax year > \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b,			
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any a See instructions		I	

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30

Attach to Form 990.

Go to www irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 2018

Open To Public

Inspection Employer identification number

46-2741705

		Found	<u>dation, Inc.</u>		46-274170)5		
i Pa	art I Types of Property						_	
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amo			
1	Art — Works of art							
2	Art — Historical treasures							
3	Art — Fractional interests			<u> </u>				
4	Books and publications		[······					
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded	L						
10	Securities — Closely held stock							
11	Securities — Partnership, LLC, or trust interests							
12	Securities — Miscellaneous	 					-	
13	Qualified conservation	[[
	contribution — Historic							
	structures	l l						
14	Qualified conservation							
	contribution — Other							
15	Real estate — Residential							
16	Real estate — Commercial							
17	Real estate — Other							
18	Collectibles							
19	Food inventory	<u> </u>	1	4,224				
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens		, 	· · · · · · · · · · · · · · · · · · ·				
24	Archeological artifacts	x	4	45,696	······································			
25 26	Other ►())	^	<u> </u>	45,090				
26 27	Other ►()	···	<u> </u>	······				
28	Other N(<u> </u>						
29	Number of Forms 8283 received by		zation during the tax yea	ar for contributions for	· · · · · · · · · · · · · · · · · · ·			
	which the organization completed Fo	-	• •		29			
		,	· · · · · · ·	J I	<u> </u>		Yes	No
30a	During the year, did the organization	receive by	y contribution any prope	rty reported in Part I, lines	1 through			[
	28, that it must hold for at least three	e years fro	m the date of the initial	contribution, and which isn'i	trequired			
	to be used for exempt purposes for t	the entire h	nolding period?			30a	ļ	X
b	If "Yes," describe the arrangement in	n Part II						
31	Does the organization have a gift ac	ceptance p	policy that requires the r	eview of any nonstandard				. - <u></u> -
	contributions?					31	<u> </u>	X
32a	Does the organization hire or use thi	rd parties	or related organizations	to solicit, process, or sell n	oncash			
	contributions?					<u>32a</u>	╂──	X
	If "Yes," describe in Part II			, ,				
33	If the organization didn't report an an	nount in co	plumn (c) for a type of p	roperty for which column (a) is checked,	1		
	describe in Part II					L	L	L

For Paperwork Reduction Act Notice, see the Instructions for Form 990

Schedule M (Form 990) 2018

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.
 Go to www.irs.gov/Form990 for the latest information.

Martha S. Hoover

Director

OMB No 1545-0047

Open to Public Inspection

Patachou Foundation, Inc.

Employer identification number 46–2741705

Form 990, Part VI, Line 2 - Related Party Information Among Officers

John D. Hoover

Director

Family relationship

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 The President and Treasurer of the Foundation reviewed the Form 990 before filing.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing documents and tax returns are made available upon request at the headquarters office.