-	.6	990-PF	l Re	turn of Private	Founda	tion		OMB No 1545-0052	2
_	Fo∍n`	99U-PF		4947(a)(1) Trust Trea			on 1/19	<b>୭</b> ጠ17	
من	Departr	ment of the Treasury	▶ Do not enter so	ocial security numbers o	n this form as it	may be mad	le public.	40	
		Revenue Service	► Go to www irs.	gov/Form990PF for instr	- 7			pen to Public Inspec	
			or tax year beginning	05	5/01 <b>, 2017,</b>	and ending		04/30,20	18
		e of foundation					A Employer identi		
		<u>IA</u> CRE FOUNDAT					21-057748		
	Numb	per and street (or P O	box number if mail is not delivered	d to street address)		Room/suite	B Telephone numb	ber (see instructions)	
								01 0000	
		632 THE GRE					(609) 92	21-8900	
	City o	r town, state or provinc	ce, country, and ZIP or foreign por	stal code			C If exemption applic	antion in	- $I$
			05.40				pending, check her		□ (
		NCETON, NJ 0	<del> </del>				_	1	$\overline{}$
,	G Check all that apply Initial return				of a former pu	ublic charity	o.o.g o.gaa.		Ш
			Final return	Amended ref		· ,.	2 Foreign organiz		$\overline{}$
			Address change	Name chang		-11-	computation .		Ш
			zation X Section 501	· <del></del>		<b>∦_</b> ]	E If private foundation	on status was terminated	
			nonexempt charitable trust	Other taxable pr			under section 507(	b)(1)(A), check here . 🕨	
		r market value o			ash X Accr	ual		s in a 60-month termination	
		d of year (from Pa		ther (specify)			under section 507(t	o)(1)(B), check here .	
			[(	column (d) must be on ca	ish basis )			(d) Disbursemen	ite
فركما	ંલા		venue and Expenses (The in columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net inves		(c) Adjusted net	for charitable	
		may not necessar	rily equal the amounts in	books	income	•	ıncome	purposes (cash basis only	<i>(</i> )
	Τ.	column (a) (see in	· •	76,942,122				(Sasir pasis of hy	1
) \	1 2	Chack I if the	ts, etc., received (attach schedule). e foundation is not required to	. 07 5 12 7 12 2					
,	1	attac	ch Sch B	179,062	179	062	179,062		
	3	•	nd temporary cash investments.	5,136,177		5,177.	5,136,177	C11	18
	5 a		rest from securities	, , , , , ,	, , , , , ,	, =		<u>                                   </u>	
	1	Net rental income or (	(loss)					-	<u> </u>
		· · · · · · · · · · · · · · · · · · ·	m sale of assets not on line 10	18,604,818			•	<del>ାରା ≶</del>	Tr
	E o	Gross sales price for a					•	<u> </u>	$\dashv$
\$	6a b	Capital gain net in	come (from Part IV, line 2) .		18,604	,818	,		
ņ	2 8		oital gain				810,127	- 2	<
	9		ons						
		Gross sales less return and allowances	is		•			-  "	7
	Ь	Less Cost of goods so						IRS-O	
	- I	•	s) (attach schedule)			·			<del></del>
	11		ich schedule) ATCH 1	3,848,166			3,848,166		
_	12		through 11	104,710,345	23,920	,057	9,973,532		-
	13	Compensation of office	cers, directors, trustees, etc	1,068,275	31	.,879	31,879	1,036,3	
Cynonege	14		laries and wages	8,128,088			1,444,378	7,244,0	
2	15		ployee benefits	3,004,465	6	, 994	6,994	2,339,6	
\$	₹i/Ca	Legal fees (attach s	schedule) ATCH 2	249,211				249,2	
V.	, b		ittach schedule)ATCH 3	63,636				63,6	
07	b c 17 18 19 20 21 22	Other professional	fees (attach schedule).[.4]	2,776,711	1,911	,550	1,911,550	865,1	161
0 5	17	Interest		10.000					~~~
يَّ الْمُ	18	Taxes (attach schee	dule) (see instructions)[5].	49,028			001 716	49,0	028
٤	19	Depreciation (attac	ch schedule) and depletion.	3,588,401			281,716	0.44	136
. t	20	Occupancy		418,120			76,984	341,1	
7	21		s, and meetings	346,416				346,4	
ā	22	= '	ations	61,699			3 040 000	61,6	
<u>.</u>	23 24 25 25		tach schedule) ATCH .6	4,364,581.			2,040,088	1,040,4	100
1	24		d administrative expenses.	24 110 621	1 050	422	E 700 E00	12 626 7	770
ğ	3		gh 23	24,118,631	1,950	,423	5,793,589	13,636,7 50,934,4	
C		-	s, grants paid	52,934,401 77,053,032	1 050	123	5 702 500	64,571,1	
-	26		ursements Add lines 24 and 25	11,000,002	1,950	,423	5,793,589	04,3/1,1	- 00
	27	Subtract line 26 fro		27 657 212					
	1		expenses and disbursements	27,657,313	21,969	634			1
	1		come (if negative, enter -0-)		21,909	, 034	4,179,943		
_	C	Adjusted net incom	ne (if negative, enter -0-)			L	4,110,040		

JSA For Paperwork Reduction Act Notice, see instructions. 7E1410 1 000 9430NS 700P 3/15/2019 11 27 05 AM V 17-7 10

End of year Attached schedules and amounts in the Beginning of year Part II Balance Sheets description column should be for end-of-year (c) Fair Market Value (b) Book Value (a) Book Value amounts only (See instructions ) 17,442. 17,442 131,714 22,051,481 22,051,481 20,361,024 2. Savings and temporary cash investments . . . . 317,811 Accounts receivable ▶ ٠3 188,526 317,811 317,811 Less allowance for doubtful accounts ▶ Pledges receivable ▶ Less allowance for doubtful accounts ▶ Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . 482,517 ATCH 7 Other notes and loans receivable (attach schedule) -1,039,591 482,517 482,517 Less allowance for doubtful accounts ▶ Assets 8 4,746,315 4,746,315. 8,733,443 5,379,247 3,736,870 5,379,247 10a Investments - U S and state government obligations (attach schedule), . 169,866,767 268,461,564 268,461,564 b Investments - corporate stock (attach schedule) . . . . . . . 24,442,399 23,862,279 23,862,279 Investments - corporate bonds (attach schedule). . . . . . . 11 Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 12 71,454,218. Investments - other (attach schedule) . . . . . . . . . . . 79,809,049 Less accumulated depreciation 32,558,791 40,735,665 47,250,258 47,250,258 (attach schedule) 126,643 118,257 118,257 ATCH 8 15 Other assets (describe ▶ Total assets (to be completed by all filers - see the 16 340,816,860 372,687,171 372,687,171 702,540 4,127,109 17 981,123 981,123 18 Liabilities 19 20 Loans from officers, directors, trustees, and other disqualified persons. . 21 Mortgages and other notes payable (attach schedule) . . . . . 22 Other liabilities (describe 1,683,663 5, 108, 232 Total liabilities (add lines 17 through 22) . . . . . . . . Foundations that follow SFAS 117, check here . . . . ▶ X **Balances** and complete lines 24 through 26, and lines 30 and 31. 338,845,909 367, 291, 651 24 14,262 14,262 25 273,026 273,026 26 Fund Foundations that do not follow SFAS 117, check here ▶ and complete lines 27 through 31. 5 27 Capital stock, trust principal, or current funds . . . . . . . . . Net Assets 28 Paid-in or capital surplus, or land, bldg, and equipment fund. . . . . . 29 Retained earnings, accumulated income, endowment, or other funds . . 339, 133, 197 367,578,939 Total net assets or fund balances (see instructions). . . . . . 30 Total liabilities and net assets/fund balances (see 340,816,860. 372,687,171 Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with 339, 133, 197 27,657,313 .2 Enter amount from Part I, line 27a............. 4,431,203 3. Other increases not included in line 2 (itemize) ▶ ATCH 9 3 371,221,713 4

ATCH 10

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 . .

367, 578, 939 Form **990-PF** (2017)

6

3,642,774

5 Decreases not included in line 2 (itemize) ▶

21-0577480

Form	990-PF (2017)					Page 3
Pa	rt IV Capital Gains	and Losses for Tax on Inv	estment Income			
-		scribe the kind(s) of property sold (for		(b) How	(c) Date acquired	(d) Date sold
		prick warehouse, or common stock, 200	shs MLC Co)	P - Purchase D - Donation	(mo , day, yr )	(mo , day, yr )
<u>1 a</u>	SEE PART IV SCHE	DULE				
b						
c						
_ <u>d</u>						
_ <u>e</u>	<del></del>			ļ		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) mini	
a	· · · · · · · · · · · · · · · · · · ·					
b					<u> </u>	
c		<u> </u>				
_ <u>d</u>						·
<u>e</u>						<del></del>
	Complete only for assets s	howing gain in column (h) and owned	by the foundation on 12/31/69		Gains (Col (h) ga	
_ (	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less the Losses (from col	
a						
b						
_ c						
d						
е						
2	Capital gain net income	or (net canital loss)	ain, also enter in Part I, line 7 oss), enter -0- in Part I, line 7	2	1.8	604,818
3	Net short-term capital of	ain or (loss) as defined in sections				0017010
·		Part I, line 8, column (c) See ins				
				2	•	810,127
Par			duced Tax on Net Investment I	ncome		
Was		the section 4942 tax on the distrib	outable amount of any year in the b	ase period	?	Yes X No
	<del></del>	n't qualify under section 4940(e)			<del> </del>	
_1	(a)		ar, see the instructions before maki I	ng any en	ries (d)	
_Cale	Base penod years indar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution raticol (b) divided by	
	2016					
	2015					
	2014					
	2013					
	2012				<del></del>	
2				2	<del></del>	
3	•	o for the 5-year base period - divid				
	the number of years the	foundation has been in existence	ıf less than 5 years	3		
4	Enter the net value of no	oncharitable-use assets for 2017 f	rom Part X, line 5	4		
5	Multiply line 4 by line 3.			5		
6	Enter 1% of net investm	ent income (1% of Part I, line 27b).		6		
7	Add lines 5 and 6			7		
8	If line 8 is equal to or g	ions from Part XII, line 4 greater than line 7, check the box	ın Part VI, line 1b, and complete	8 that part	using a 1% tax	rate See the
	Part VI instructions					

JSA 78130 1000 9430NS 700P 3/15/2019 11:27 05 AM V 17-7 10

1a Exempt operating foundations described in section 4940(d)(2), check here   □ 28/24/2017		N/A 0 0
Date of ruling or determination letter 08/24/2017 (attach copy of letter if necessary - see instructions)  b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% of Part I, line 27b		0 0
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% of Part I, line 27b		0 0
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 Add lines 1 and 2		0
Part I, line 12, col (b)  Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)  Add lines 1 and 2		0
Part I, line 12, col (b)  Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)  Add lines 1 and 2		0
Add lines 1 and 2		0
Add lines 1 and 2		0
Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)  Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0		
6 Credits/Payments a 2017 estimated tax payments and 2016 overpayment credited to 2017 6a b Exempt foreign organizations - tax withheld at source 6b		0
a 2017 estimated tax payments and 2016 overpayment credited to 2017 6a ' b Exempt foreign organizations - tax withheld at source		
b Exempt foreign organizations - tax withheld at source		İ
Learning to eight organizations - tax within the decision of the first organization - tax within the decision of the first organization organization of the first organization of the first organization		į.
c Tax paid with application for extension of time to file (Form 8868) 6c		- 1
d Backup withholding erroneously withheld		لــِــا
7 Total credits and payments Add lines 6a through 6d		0
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		
11 Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶ 11		
Part VII-A Statements Regarding Activities		
ta During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Yes	
participate or intervene in any political campaign?	+	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the		.,
instructions for the definition	-	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		
published or distributed by the foundation in connection with the activities		_
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		
(1) On the foundation ►\$0 (2) On foundation managers ►\$0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		i
on foundation managers > \$	-	- - <del>-</del>
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		<del>-^-</del> -
If "Yes," attach a detailed description of the activities		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	- - <u>-</u>	-
incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	1,7	+
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<del></del>	+-
b If "Yes," has it filed a tax return on Form 990-T for this year?	^	<del>  x</del>
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		+
If "Yes," attach the statement required by General Instruction T		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		
By language in the governing instrument, or		
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	x	-
Conflict with the state law remain in the governing institution.	X	+-
The Did the foundation have at least \$5,000 in assets at any time during the year in 163, complete rait in, 607 (0), and rait xx	+	+
8a Enter the states to which the foundation reports or with which it is registered. See instructions. ► NJ,		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General  (or designate) of each state as required by General Instruction G2 If "No " attach explanation ATCH 11  8th	-	- - <u>-</u> -
(of designate) of each state as required by deneral instruction of it indicates explanation		+
9 is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	-	- - <del></del>
4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV if "Yes,"	x	
complete at Atv.	+=	+
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	X	
Hamics and addresses	90-PF	(2017)

Dá	rt VII-A: Statements Regarding Activities (continued)			
Pal	rt VII-A Statements Regarding Activities (continued)		Yes	No
	and the state of t			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	11		х
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	<b></b>		
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	12		Х
	person had advisory privileges? If "Yes," attach statement See instructions		X	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		
	Website address ► WWW TENACRE ORG	9000	<u> </u>	
14	The books are in care of ► CATHERYN MURDOCH  Telephone no ► 609-921-	-0900		
	Located at ▶THE GREAT ROAD PRINCETON, NJ ZIP+4 ▶ 08542			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	• • •	▶	· L
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country >	<u> </u>		
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	'		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
h	of f any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		Х
	Organizations relying on a current notice regarding disaster assistance, check here			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
·	were not corrected before the first day of the tax year beginning in 2017?	1c		X
•	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
2				
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))  At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
a	6e, Part XIII) for tax year(s) beginning before 2017?			
	16 DVcs II had also years			
	If "Yes," list the years		•	
D	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	2b		
	all years listed, answer "No" and attach statement - see instructions)			
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	olf "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2017 )	3b		X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			<del></del>
	charitable number that had not been removed from jegnardy before the first day of the tax year beginning in 2017?	l 4h l	I	Х

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21-0577490

Par	t VII-B	Statements Regarding Activities	for Which Form	4720 May Be Red	uired (continued)			
5a	During th	e year, did the foundation pay or incur any am	ount to				Yes	No
	(1) Carry	on propaganda, or otherwise attempt to influ	ence legislation (section	n 4945(e))?	. Yes X No	,		
		ence the outcome of any specific public el					ł	}
	• •	ily or indirectly, any voter registration drive?	•			,		
		de a grant to an individual for travel, study, or			·	,		
		de a grant to an individual for travel, study, or the decision of the study, or th	• •		•			
								1
		on 4945(d)(4)(A)? See instructions de for any purpose other than religious, c				'		ŀ
		oses, or for the prevention of cruelty to children			• — —	- 1		
þ		nswer is "Yes" to 5a(1)-(5), did any of the				I	<b> </b>	
		ns section 53 4945 or in a current notice rega				5b	₩-	
		tions relying on a current notice regarding disa				$\sqcup$		
С		iswer is "Yes" to question 5a(4), does the			f l f l			
	because i	t maintained expenditure responsibility for the	grant?		Yes No	,		
If "Yes," attach the statement required by Regulations section 53 4945-5(d)							'	
6a	Did the f	foundation, during the year, receive any ful	nds, directly or indir	ectly, to pay premiui	ms			
	on a perso	onal benefit contract?			Yes X No	,   <u> </u>		
b	Did the fo	oundation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contra	act?	. 6b		X
	If "Yes" to	6b, file Form 8870						
7a	At any tim	ne during the tax year, was the foundation a p	arty to a prohibited tax	shelter transaction?	Yes X No	, [		
b	If "Yes." o	did the foundation receive any proceeds or ha	ve any net income attr	butable to the transact	ion?	7b		
Par	t VIII	Information About Officers, Directo	rs, Trustees, Fou	ndation Manager	s, Highly Paid Emp	loyees,		
		and Contractors			- In-Amundlama			
	LIST all of	ficers, directors, trustees, foundation i	(b) Title, and average	(c) Compensation. Set	(d) Contributions to	(-) F		
		(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expens other all	se accou lowance	unt, es
		<del></del>	devoted to position		una delende dempendanen			
ATC	H 13			1,009,746	293,285	1	77', 1	100
				· · · · · · · · · · · · · · · · · · ·	· · ·			_
		<del></del>						
				<del></del>				
					ļ			
		<del></del>	-					
				<del></del>				
2	Compens "NONE."	ation of five highest-paid employees	(other than thos	e included on line	e 1 - see instruction	ons). If n	one,	ente
	NONE.		(b) Title, and average	<del></del>	(d) Contributions to			
(a)	Name and a	iddress of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expens other all	e accou	unt,
			devoted to position		compensation			
ATC	H 14			554,743	214,953		65,7	760
		<del></del>						
			<del> </del>	_ <del></del>				
		, , , , , , , , , , , , , , , , , , ,						
			<del> </del>					
			Į J					
			<u> </u>	· <del></del>			<del>_</del> -	7.2
otal	number o	f other employees paid over \$50,000	<u> </u>	· · · · · · · · · · · · · · · · · · ·	<u> ▶  </u>			73
						Form 990	ノーピド(	(2017)



Form 990-PF (2017)	Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employand Contractors (continued)	yees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
	0.050
ATCH 15	2,978,848
Total number of others recovering over \$50,000 for professional convers	9
Total number of others receiving over \$50,000 for professional services	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 CHRISTIAN SCIENCE NURSING SERVICES	
(SEE GENERAL EXPLANATION ATTACHMENT)	
	12,210,505
2 SCHOOL OF CHRISTIAN SCIENCE NURSING	
(SEE GENERAL EXPLANATION ATTACHMENT)	760 650
3 CHRISTIAN SCIENTISTS IN RESIDENCE PROGRAM	768,658
(SEE GENERAL EXPLANATION ATTACHMENT)	
	351,559
4 TENACRE VISITOR ACCOMMODATIONS AND SPIRITUAL RESOURCE	
LIBRARY	
(SEE GENERAL EXPLANATION ATTACHMENT)	695,889
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	,,,,,,
2	:
All other program-related investments. See instructions	
3 NONE	
Total. Add lines 1 through 3	
	- 000 DF



3

4

5

	TENACRE FOUNDATION	2	1-0577480
_	990-PF (2017)		Page <b>8</b>
Pa	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ıgn four	ndations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
a	Average monthly fair market value of securities	1a	289,637,861
	Average of monthly cash balances	1b	13,227,535
	Fair market value of all other assets (see instructions).	1c	420,089.
	Total (add lines 1a, b, and c)	1d	303, 285, 485
	Reduction claimed for blockage or other factors reported on lines 1a and	_	

Pa	Tt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ► X and do not complete this part)	ındatıo	ns 
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2017 from Part VI, line 5 2a		
	Income tax for 2017 (This does not include the tax from Part VI) 2b	]	
	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	1	
4	Recoveries of amounts treated as qualifying distributions	1	
5	Add lines 3 and 4	_	
6	Deduction from distributable amount (see instructions)		
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1,	1	

#### Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 64,571,180 1a′ Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 8,180,222 2 Amounts set aside for specific charitable projects that satisfy the 3a 3b 72,751,402 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 5. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 0 72,751,402

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

Form **990-PF** (2017)

303, 285, 485

298,736,203

14,936,810

4,549,282

Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see

instructions)

a. 5' Alet value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.

21-0577480 TENACRE FOUNDATION Form 990-PF (2017) Page 9 Undistributed Income (see instructions) Part XIII (b) (c) (d) (a) Years prior to 2016 2016 2017 Corpus Distributable amount for 2017 from Part XI, 2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only. . . . . . . . . . . . **b** Total for pnor years 20\_\_\_\_\_,20\_\_\_\_,20\_\_\_\_ 3 Excess distributions carryover, if any, to 2017 a From 2012 . . . . . . b Γrom 2013 . . . . . . c From 2014 . . . . . . d From 2015 . . . . . . e From 2016 . . . . . . f Total of lines 3a through e . . . . . . . . . . . 4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ a Applied to 2016, but not more than line 2a . . . b Applied to undistributed income of prior years (Election required - see instructions). . . . . . c Treated as distributions out of corpus (Election required - see instructions) . . . . . . . . . . . . d Applied to 2017 distributable amount.... e Remaining amount distributed out of corpus. . . Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a) ) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b, . . . . . . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . . . . d Subtract line 6c from line 6b Taxable amount - see instructions . . . . . . . . . . . . . e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount - see f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be

-orm	99	0-PF	(2017

10 Analysis of line 9

a Excess from 2013 . . . . b Excess from 2014 . . . c Excess from 2015 . . . d Excess from 2016 . . . e Excess from 2017 . . . .

_	1 990-PF (2017)	TENACKE F		<del></del>		OSYTIOO Page 10	
		erating Foundations					
1 a	If the foundation has	-			_		
_	·	g is effective for 2017, er					
b	Check box to indicate v		is a private operating		section A 4942	(j)(3) or 4942(j)(5)	
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	40.0044	(e) Total	
	justed net income from Part I or the minimum investment	(a) 2017	(b) 2016	(c) 2015	(d) 2014		
	return from Part X for each	4,179,943				4,179,943	
	year listed	3,552,952	· <del></del>			3,552,952	
	85% of line 2a					370327302	
	Qualifying distributions from Part XII, line 4 for each year listed ,	72,751,402				72,751,402	
d	Amounts included in line 2c not used directly for active conduct of exempt activities	50,934,401				50,934,401	
е	Qualifying distributions made directly for active conduct of	,					
	exempt activities Subtract line 2d from line 2c	21,817,001				21,817,001.	
3	Complete 3a, b, or c for the						
а	alternative test relied upon "Assets" alternative test - enter						
	(1) Value of all assets					<del> </del>	
	(2) Value of assets qualifying under section						
	4942(j)(3)(B)(i)						
b	"Endowment" alternative test- enter 2/3 of minimum invest-						
	ment return shown in Part X,	0.057.072				0.057.073	
	line 6 for each year listed	9,957,873				9,957,873	
С	"Support" alternative test - enter						
	(1) Total support other than gross investment income						
	(interest, dividends, rents,						
	payments on securities loans (section 512(a)(5)),						
	or royalties)						
	(2) Support from general public and 5 or more.						
	exempt organizations as provided in section 4942						
	()(3)(B)(m)						
	(3) Largest amount of sup- port from an exempt organization						
	(4) Gross investment income.						
Pa				only if the foundat	tion had \$5,000 o	r more in assets at	
4		uring the year - see i	<del></del>		<del></del>		
	Information Regarding List any managers of the August August List any managers of the List and List any managers of the List and List and			than 2% of the tota	l contributions recei	yed by the foundation	
a	before the close of any						
	N/A						
b	List any managers of					y large portion of the	
	ownership of a partner	snip or other entity) or	which the foundation	nas a 10% or greater	interest		
	N/A						
<u> </u>	Information Regarding	Contribution, Grant	Gift, Loan, Scholarsh	ip. etc Programs:	<del></del>		
		•		•	table arganizations	and doos not assent	
	Check here ► X If the unsolicited requests for	ne roundation only market founds.	takes contributions tion makes diffs dra	to preselected chari nts etc. to individual	table organizations u	and does not accept	
	unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.						
a	a The name, address, and telephone number or email address of the person to whom applications should be addressed						
	, , , , , , , , , , , , , , , , , , , ,			- F			
b	The form in which appli	ications should be sub-	mitted and informatio	n and materials they s	should include		
С	Any submission deadlir	nes		<del></del>			
	-						
Н	Any restrictions or lir	mitations on awards	such as by geogra	phical areas charital	ble fields kinds of	institutions or other	
	factors	intations on awards,	Such as by geogra	pinoai aicas, ciiaillai	oro norus, kinus Ul	montunons, or other	

Page **11** 

## TENACRE FOUNDATION

Form 990-PF (2017)

NE POORDITION

Part XV Supplementary Information (	continued)			
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the <mark>Year or App</mark> r	oved for I	Future Payment	<del></del>
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
ATCH 16				
·				
			}	,
	]	]	J	
		,	j	<b>j</b> ,
•				
			İ	
			İ	
		]		]
				J
				į
Total			<b>&gt;</b> 20	50,934,401.
b Approved for future payment	<u> </u>			30,731,101.
KIPP FOUNDATION	N/A	PC	EDUCATION	2,000,000.
135 MAIN STREET	IN/A	10	EDUCATION	2,000,000.
SAN FRANCISCO, CA 94105				
SAN FRANCISCO, CA 94105			(	ļ
				'
			•	
				1
				1
,				
		J		
				,
Total			<b>&gt;</b> 2h	2,000,000
Total	· · · · · · · · · · · · · · · · · · ·	· · · · · ·	▶ 3b	2,000,000

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Page **12** 



Part X	VI-A Analysis of Income-Prod			T=		(a)
Enter gro	ss amounts unless otherwise indicated	Unrela (a) Business code	ted business income (b) Amount	(c)	y section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
-	am service revenue	Business code	Amount	Exclusion code	Amount	(See instructions )
	S NURSING SERVICES			<del> </del>		3,096,930
~ _	DOD SERVICES			<del> </del>		339,029
,,,	ESIDENTIAL					191,931
d <u>∨</u>	ISITOR ACCOMMODATIONS			<del> </del>		90,885
e _	<del></del>			<del> </del>	<u> </u>	<del></del>
f _					<del></del>	
g Fe	es and contracts from government agencies			<del> </del>		
2 Memi	pership dues and assessments			14	179,062	<del></del>
	st on savings and temporary cash investments -			14	5,136,177	
	ends and interest from securities			<del></del>		
	ental income or (loss) from real estate			<del> </del> -		
	ebt-financed property		·	<del>  -</del> -		
	ot debt-financed property		<del></del>	_		
	ntal income or (loss) from personal property					
	Investment income	900099	158,516	18	18,446,302	· <del></del>
	r (loss) from sales of assets other than inventory	-				
	come or (loss) from special events profit or (loss) from sales of inventory				-	
11 Other	revenue a STAFF SERVICES					51,424
ь M	SCELLANEOUS					77,967
С						
d						<u> </u>
e						
12 Subto	tal Add columns (b), (d), and (e)		158,516		23,761,541	3,848,166
13 Total	Add line 12, columns (b), (d), and (e)				13	27,768,223
(See worl	Kisheet in line 13 instructions to verify calculated Relationship of Activities					
Line No.  ▼	Explain below how each activity accomplishment of the foundation	-		•		•
	ATCH	17				
	77701					
<u>.</u>						
	<del> </del>					
		<del></del>		<del></del>		<del></del>
		<del></del>				
-						
			<del></del>			

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TENACRE FOUNDATION

Part	_	Information R Exempt Organ	egarding Tr	ansfers to and Trans	actio	ns and Relation	nships With No	nchari	table	;
ır	n sect			engage in any of the folk 501(c)(3) organizations					Yes	No
		•	-	o a noncharitable exempt o				4 - (4)		х
								1a(1) 1a(2)		X
•	•	ansactions								
('	1) Sale	es of assets to a no	ncharitable exe	empt organization				1b(1)		Х
•				able exempt organization					1	X
•	•	• •	•	rassets						X
•	•	_								X
į	6) Perf	ormance of service	s or members	hip or fundraising solicitatio sts, other assets, or paid en	ns		. <b></b>	1b(6)		X
d If	the a	nswer to any of th	e above is "Yo	es," complete the following the complete the following the reporting the	ng sch	nedule Column (b)	should always sh	ow the		
v	alue in	any transaction of	sharing arran	gement, show in column	(d) th	e value of the good	ds, other assets, o	r service	s rec	eived
(a) Line	no	N/A	(c) Name of	noncharitable exempt organization	<u> </u>	(d) Description of tran	nsfers, transactions, and	shanng arra	angeme	nts
		N/A	ļ			N/A	<del> </del>			
			,							
			<u> </u>							
-		<u> </u>				···				
							<del></del>			
		<del></del>								
		<u> </u>					<del> </del>			
				· · · · · · · · · · · · · · · · · · ·			<u> </u>			
					Ĺ			<del></del>	-	
		_	-	ffiliated with, or related to ection 501(c)(3)) or in secti			-	Y	es X	] No
<u>b</u> If	"Yes,	complete the follo		· · · · · · · · · · · · · · · · · · ·			<del></del>		_	
		(a) Name of organizatio	<u> </u>	(b) Type of organizati	ion		(c) Description of relat	ionship		
	<del> </del>									
<del></del>		· · · · · · · · · · · · · · · · · · ·							•	
		`								
	Under	penalties of perjury, I decl	are that I have exam	nned this return, including accompantaxpayer) is based on all information of	ying sah	edules and statements, and	to the best of my know	ledge and t	oelief it	is true,
Sign	<b>b</b> /	Deluano	W.	0315	willen pi	oparat nas any knowledge	May the	IRS discus	s this	retum
Here	Signa	ature of officer ontrustee		Date						
	<u> </u>									
Paid	],	Print/Type preparer's na סאפר אסאפ		Preparer's signature						
Prepa			TRONG ANT THORNT	CON LLP						
Use C	L	7 11 11 1 E 1 E 1	01 MARKET							
			ILADELPHIA							

#### Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury

Internal Revenue Service Name of the organization

#### Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

TENACRE FOUNDATION 21-0577480 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions نaution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Employer identification number 21-0577480

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	JE BARBEY 8 TENACRE FOUNDATION  1600 MARKET STREET C/O PNC BANK  PHILADELPHIA, PA 19103	\$	Person X Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2	LUCIA MOUAT  175 E DELAWARE PL APT 7903  CHICAGO, IL 60611	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
3_	FIRST CHURCH OF CHRIST, SCIENTIST  18091 FRESHWATER CIRCLE  HUNTINGTON BEACH, CA 92648	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
4_	JOHN HANSON  12513 FOSTORIA WAY  GAITHERSBURG, MD 20878	\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
5_	RITA ROBLES  716 AL SMITH  EL PASO, TX 79932	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
6_	ESTATE - DORIS S SHEPARD  75 FEDERAL STREET, SUITE 1300  BOSTON, MA 02110	\$ 34,375	Person X Payroll Noncash  (Complete Part II for noncash contributions)			

Employer identification number 21-0577480

Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is ne	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	HUBERT GRANT LARSON ESTATE  PO BOX 75000  DETROIT, MA 48275	\$\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8_	APRIL A SAVOYE  151 S WASHINGTON AVE  BERGENFIELD, NJ 07621	\$\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	TRUST - ELEANOR L RYDER  100 FOUR FALLS, SUITE 300  WEST CONSHOCKEN, PA 19428	\$\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

21-0577480

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





Employer identification number 21-0577480

Part III	Exclusively religious, charitable, etc. (10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of the second contributions of \$1,000 or less for the second contributions of \$1,000 o	the year from any ons completing Par e year. (Enter this in	one contributor. One contributor. On the total of the tot	Complete columns (a) through (e) and of exclusively religious, charitable, etc.,			
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held			
		(e) Transfer of gift					
	Transferee's name, address, an	d ZIP + 4	Relation	nship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
	Transferee's name, address, an	(e) Transf d ZIP + 4	-	r of gift  Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
	Transferee's name, address, an	(e) Transf d ZIP + 4	· ·	nship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
	Transferee's name, address, an	(e) Transf d ZIP + 4	sfer of gift  Relationship of transferor to transferee				

## FORM 990PF - GENERAL EXPLANATION ATTACHMENT

FORM 990-PF, PART VII-A, LINE 10

SUBSTANTIAL CONTRIBUTOR
JE BARBEY 8 TENACRE FOUNDATION WAS A SUBSTANTIAL CONTRIBUTOR IN PREVIOUS YEARS THE ORGANZATION FILED THE FORM 990.

#### FORM 990PF - GENERAL EXPLANATION ATTACHMENT

FORM 990-PF, PART IX-A

#### SUMMARY OF DIRECT CHARITABLE ACTIVITIES

- 1) CHRISTIAN SCIENCE NURSING: TENACRE FOUNDATION MAKES AVAILABLE THE RELIGIOUS MINISTRY OF CHRISTIAN SCIENCE NURSING FOR THOSE INDIVIDUALS CHOOSING TO RELY RADICALLY ON GOD FOR HEALING, AS TAUGHT IN CHRISTIAN SCIENCE, AND BY PROVIDING BENEVOLENCE TO DO SO WITHOUT REGARD TO THE ABILITY OF THOSE IN NEED TO PAY FOR THE PROVISION OF SUCH SERVICES. TENACRE SERVED A DAILY AVERAGE OF 37 CHRISTIAN SCIENCE NURSING GUESTS ON CAMPUS, ALONG WITH A DAILY AVERAGE OF 2-3 IN THEIR HOMES. TENACRE PROVIDES BENEVOLENCE TO MORE THAN HALF OF THESE SERVED, WHICH ACCOUNTS FOR MORE THAN 50% OF REVENUE.
  - 2) SCHOOL OF CHRISTIAN SCIENCE NURSING: TENACRE ALSO OPERATES A SCHOOL IN ACCORDANCE WITH THE PRECEPTS OF CHRISTIAN SCIENCE TO HELP PREPARE MEMBERS OF THE MOTHER CHURCH TO REPRESENT THEMSELVES AS CHRISTIAN SCIENCE NURSES WHO MAY SERVE INDIVIDUALLY, OR WHO MAY STAFF THE FACILITIES OF THE CORPORATION AND OTHER CHRISTIAN SCIENCE ORGANIZATIONS AND FACILITIES. THERE ARE 4 COURSES OFFERED, EACH AVERAGING 4-6 MONTHS DURING THE YEAR, THE SCHOOL OFFERED 4 COURSES, EACH WITH 4-5 STUDENTS.
  - 3) CHRISTIAN SCIENTISTS-IN-RESIDENCE: TENACRE MAINTAINS AND OPERATES A RETREAT FACILITIES FOR CHRISTIAN SCIENTISTS-IN-RESIDENCE IN A COMMUNITY SETTING WITH A SPIRITUAL FOCUS FOR THOSE WHO AGREE TO AND HAVE THE QUALIFICATIONS TO PARTICIPATE IN THE SPIRITUAL AND RELIGIOUS MISSION OF THE CORPORATION AND/OR TO PRACTICE THE RELIGION OF THE FIRST CHURCH OF CHRIST, SCIENTIST, IN BOSTON, MASSACHUSETTS. THERE ARE 12 ACCOMMODATIONS AVAILABLE, OF WHICH 10 WERE OCCUPIED.
- 4) TENACRE VISITOR ACCOMMODATIONS, SPIRITUAL RESOURCE LIBRARY AND DISCOVERY SPEAKER SERIES: TENACRE ALSO PROVIDES FACILITIES, COURSES, WORKSHOPS, AND OTHER EVENTS FOR PRAYERFUL STUDY OF AND RESEARCH INTO RELIGIOUS SUBJECTS RELATED TO CHRISTIAN SCIENCE. THERE ARE 15 ROOMS AVAILABLE, WITH AN AVERAGE OCCUPANCY OF 153 VISITORS PER MONTH. TENACRE HOSTED 8 COMPLIMENTARY TALKS/WORKSHOPS ON THE BIBLE AND OTHER RELIGIOUS SUBJECTS RELATED TO CHRISTIAN SCIENCE.

## ATTACHMENT 1

## FORM 990PF, PART I - OTHER INCOME

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	ADJUSTED NET INCOME
CHRISTIAN SCIENCE NURSING SERVICES FOOD SERVICES RESIDENTIAL VISITOR ACCOMMODATIONS STAFF SERVICES MISCELLANEOUS INCOME	3,096,930. 339,029. 191,931. 90,885. 51,424 77,967.	3,096,930. 339,029. 191,931. 90,885. 51,424. 77,967.
TOTALS	3,848,166.	3,848,166.

1. .

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ATTACHMENT	,
VI I VCIII III II	_

## FORM 990PF, PART I - LEGAL FEES

DESCRIPTION		REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT <u>INCOME</u>	ADJUSTED NET INCOME	CHARITABLE PURPOSES
LEGAL FEES		249,211.			249,211.
	TOTALS	249,211.			249,211.

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# FORM 990PF, PART I - ACCOUNTING FEES

DESCRIPTION		REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT <u>INCOME</u>	ADJUSTED NET INCOME	CHARITABLE PURPOSES
ACCOUNTING FEES	,	63,636.			63,636.
	TOTALS	63,636.			63,636.

14. 15

ATTACHMENT 4

## FORM 990PF, PART I - OTHER PROFESSIONAL FEES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT <u>INCOME</u>	ADJUSTED NET <u>INCOME</u>	CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES OTHER PROFESSIONAL SERVICES SECURITY PAYROLL PROCESSING	1,911,550. 520,294 279,021. 65,846.	1,911,550.	1,911,550.	520,294. 279,021. 65,846.
TOTALS	2,776,711.	1,911,550.	1,911,550.	865,161

21-0577480

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FORM 990PF, PART I - TAXES

REVENUE
AND
EXPENSES
PER BOOKS

CHARITABLE PURPOSES

PROPERTY TAXES

DESCRIPTION

49,028.

49,028.

TOTALS

49,028.

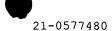
49,028.

## ATTACHMENT 6

## FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION REPAIRS & MAINTENANCE SMALL EQUIP. & SUPPLIES LIBRARY BOOKS STAFF EDUCATION INSURANCE DUES AND SUBSCRIPTIONS OFFICE EXPENSES FOOD CS NURSING BENEVOLENCE CASH BASIS ADJUSTMENT	REVENUE AND EXPENSES PER BOOKS 1,300,740. 584,046. 13,746. 47,800. 165,013 124,985. 136,670 326,080 1,665,501	ADJUSTED NET INCOME 48,507.	CHARITABLE PURPOSES  1,252,233. 584,046. 13,746. 47,800. 165,013. 124,985. 136,670.
	TOTALS 4,364,581.	2,040,088.	1,040,465.

## TENACRE FOUNDATION



## ATTACHMENT 7

## FORM 990PF, PART II - OTHER NOTES AND LOANS RECEIVABLE

ORIGINAL AMOUNT:	FIRST CHURCH OF CHRIST, SCIENTIST P 810,000. 05/29/2007 06/30/2037	RINC
BEGINNING BALANCE DUE		544,682.
ENDING BALANCE DUE		
ENDING FAIR MARKET VALUE		
ORIGINAL AMOUNT: INTEREST RATE:	HIGH RIDGE HOUSE 500,000. 2.0000 % 11/01/2016 12/31/2021	
BEGINNING BALANCE DUE .		494,909.
ENDING BALANCE DUE		482,517.
ENDING FAIR MARKET VALUE		482,517.
TOTAL BEGINNING OTHER N	OTES AND LOANS RECEIVABLE	1,039,591.
"TOTAL ENDING BOOK - OTH	ER NOTES AND LOANS RECEIVABLE	482,517
TOTAL ENDING FMV - OTHE	R NOTES AND LOANS RECEIVABLE	482,517.

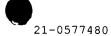
ATTACHMENT	8	
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## FORM 990PF, PART II - OTHER ASSETS

DESCRIPTION	BOOK VALUE	ENDING <u>FMV</u>
INTEREST RECEIVABLE SAIKOWSKO CRT	103,995. 14,262.	103,995. 14,262.
TOTALS	118,257.	118,257.

2017 FORM 990-PF

TENACRE FOUNDATION



ATTACHMENT 9

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

DESCRIPTION

AMOUNT

MET UNREALIZED GAIN FROM INVESTMENTS . 4,431,203.

TOTAL

4,431,203.



ATTACHMENT 10

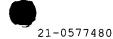
# FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u> <u>AMOUNT</u>

NET ACTUARIAL LOSS 3,642,774.

TOTAL 3,642,774.

#### TENACRE FOUNDATION



#### ATTACHMENT 11

## FORM 990PF, PART VII-A, LINE 8B - EXPLANATION OF NON-FILING

TENACRE FOUNDATION IS NOT REQUIRED TO FURNISH ITS FORM 990-PF TO THE ATTORNEY GENERAL OF NEW JERSEY. THE NEW JERSEY CHARITABLE REGISTRATION & INVESTIGATION ACT, WHICH REQUIRES THE ANNUAL REGISTRATION OF NON-PROFITS AND THE SUBMISSION OF FORM 990S TO THE NEW JERSEY DIVISION OF CONSUMER AFFAIRS WITHIN THE OFFICE OF THE ATTORNEY GENERAL, DOES NOT APPLY TO TENACRE FOUNDATION DUE TO A STATUTORY EXEMPTION FOR RELIGIOUS CORPORATIONS AND FOUNDATIONS ESTABLISHED FOR RELIGIOUS PURPOSES. SEE N.J.S.A. 45:17A-26(A).

21-0577480

FORM 990PF, PART VII-A, LINE 10 - SUBSTANTIAL CONTRIBUTORS

ATTACHMENT 12

NAME AND ADDRESS

JE BARBEY 8 TENACRE FOUNDATION 1600 MARKET STREET C/O PNC BANK PHILADELPHIA, PA 19103

ATTACHMENT 13

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

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	AND OTHER :
)				
CHRISTINE I WILLIAMS BOX 632 THE GREAT ROAD PRINCETON, NJ 08542	PRES/CEO (END 9/7/17), CHAIR 15 00	196,393	84,763	46,400
CHRISTINE I WILLIAMS AVERAGE H POSITION AS PRESIDENT AND CEO	OURS PER WEEK WERE 60 HOURS IN THEIR			1
CYNTHIA R LOVE BOX 632 THE GREAT ROAD PRINCETON, NJ 08542	VICE CHAIR 10 00	0	0	; C   
GAIL CHADDOCK BOX 632 THE GREAT ROAD PRINCETON, NJ 08542	TRUSTEE 10.00	0	0	; ; ;
HELEN JENNINGS BOX 632 THE GREAT ROAD PRINCETON, NJ 08542	TRUSTEE 10 00	0	0	
CHARLES LINDAHL BOX 632 THE GREAT ROAD PRINCETON, NJ 08542	TRUSTEE (BEG 6/18/17) 10 00	0	0	

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

ATTACHMENT	13	(CONT'D)
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NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	AND OTHER I
SCOTT SHIVERS BOX 632 THE GREAT ROAD PRINCETON, NJ 08542	TRUSTEE 10 00	0	0	
ELIZABETH WALLINGFORD BOX 632 THE GREAT ROAD PRINCETON, NJ 08542	TRUSTEE 10 00	0 .	0	ò.
MICHAEL A FISHER BOX 632 THE GREAT ROAD PRINCETON, NJ 08542	CEO (BEG 9/7/17), TRUSTEE 60 00	103,961	7,425	16,200
CATHERYN E MURDOCH BOX 632 THE GREAT ROAD PRINCETON, NJ 08542	TRUSTEE/TREASURER/CFO 60 00	146,178.	24,646	40,080
CAROLEEN M SCHOLET BOX 632 THE GREAT ROAD PRINCETON, NJ 08542	VP-CHRISTIAN SCI NURSING & COO	153,739	55,687	Ö
WILLIAM H BELL BOX 632 THE GREAT ROAD PRINCETON, NJ 08542	VP - PHILANTHROPY & CPO 60 00	162,955	69,324.	35,280.

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

ATTACHMENT	13	(CONT'D)

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
MARINA N BONSI BOX 632 THE GREAT ROAD PRINCETON, NJ 08542	SECRETARY 50 00	99,104	12,661	29,280
GARY L WRIGHT BOX 632 THE GREAT ROAD PRINCETON, NJ 08542	ASSISTANT TREASURER 50 00	104,893	31,302	ŋ
GENEVIEVE BERGESON BOX 632 THE GREAT ROAD PRINCETON, NJ 08542	ASS SECRETARY (BEG 12/2017) 45 00	42,523	7,477	9,860
	GRAND TOTALS	1,009,746	293,285	177,100

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

NAME AND ADDRESS   DEVOTED TO POSITION   COMPENSATION   EXPENSE ACCT TO EMPLOYEE AND OTHER BOX 632 THE GREAT ROAD PRINCETON, NJ 08542   SNR MANAGER BOX 632 THE GREAT ROAD PRINCETON, NJ 08542   SNR MANAGER BOX 632 THE GREAT ROAD PRINCETON, NJ 08542   SNR MANAGER BOX 632 THE GREAT ROAD PRINCETON, NJ 08542   SNR MANAGER BOX 632 THE GREAT ROAD PRINCETON, NJ 08542   SNR MANAGER BOX 632 THE GREAT ROAD PRINCETON, NJ 08542   SNR MANAGER BOX 632 THE GREAT ROAD PRINCETON, NJ 08542   SNR MANAGER BOX 632 THE GREAT ROAD PRINCETON, NJ 08542   SNR MANAGER BOX 632 THE GREAT ROAD PRINCETON, NJ 08542   SNR MANAGER BOX 632 THE GREAT ROAD PRINCETON, NJ 08542   SNR MANAGER BOX 632 THE GREAT ROAD PRINCETON, NJ 08542   SNR MANAGER BOX 632 THE GREAT ROAD PRINCETON, NJ 08542   SNR MANAGER BOX 632 THE GREAT ROAD BOX				ATTACHMENT 14	
BOX 632 THE GREAT ROAD PRINCETON, NJ 08542  CHRISTINE HEIN DIRECTOR 117,388. 68,092. 0. BOX 632 THE GREAT ROAD FRINCETON, NJ 08542  WILLIAM BUNTING SNR MANAGER 109,807. 44,438. 0. BOX 632 THE GREAT ROAD FRINCETON, NJ 08542  GRIFFITH HENNINGER DIRECTOR 104,994. 33,739. 0. BOX 632 THE GREAT ROAD FRINCETON, NJ 08542  MARILYN BAUM BOX 632 THE GREAT ROAD FRINCETON, NJ 08542  MARILYN BAUM BOX 632 THE GREAT ROAD FOR SOAD FRINCETON, NJ 08542  MARILYN BAUM BOX 632 THE GREAT ROAD FOR SOAD FRINCETON, NJ 08542	NAME AND ADDRESS	HOURS PER WEEK	COMPENSATION	TO EMPLOYEE	AND OTHER
BOX 632 THE GREAT ROAD	BOX 632 THE GREAT ROAD		117,560.	57,517.	32,880.
BOX 632 THE GREAT ROAD 50.00 PRINCETON, NJ 08542  GRIFFITH HENNINGER DIRECTOR 104,994. 33,739. 0. BOX 632 THE GREAT ROAD 50.00 PRINCETON, NJ 08542  MARILYN BAUM MANAGER 104,994. 11,167. 32,880. PRINCETON, NJ 08542	BOX 632 THE GREAT ROAD		117,388.	68,092.	0.
BOX 632 THE GREAT ROAD 50.00 PRINCETON, NJ 08542  MARILYN BAUM MANAGER 104,994. 11,167. 32,880. BOX 632 THE GREAT ROAD 50 00 PRINCETON, NJ 08542	BOX 632 THE GREAT ROAD		109,807.	44,438.	0.
BOX 632 THE GREAT ROAD 50 00 PRINCETON, NJ 08542	BOX 632 THE GREAT ROAD		104,994.	33,739.	0.
TOTAL COMPENSATION 554,743 214,953. 65,760	BOX 632 THE GREAT ROAD		104,994.	11,167.	32,880.
		TOTAL COMPENSATION	554,743	214,953.	65,760



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

·	ATTACHME	NT 15
 NAME AND ADDRESS	TYPE OF SERVICE	COMPENSATION
KENDALL BUILDERS, LLC 1116 NOTTINGHAM WAY HAMILTON, NJ 08609	CONSTRUCTION MGMT	805,955.
AMERICAN TRUST INVESTMENT ADVISORS ONE COURT STREET, SUITE 350 LEBANON, NH 03766	INVESTMENT MGMT	724,965.
TOWLE & CO. 1610 DES PERES RD, SUITE 250 ST LOUIS, MO 63131	INVESTMENT MGMT	604,494.
LOUIS N. ROTHBERG & SON, INC PO BOX 550, 550 CEDAR AVE MIDDLESEX, NJ 08846	CONSTRUCTION MGMT	455,190.
LIBERTY MECHANICAL SERVICES, INC. PO.BOX 186 NEW EGYPT, NJ 08533	HVAC CONTRACTOR	388,244.
TOTAL COMPENSATI	ON	2,978,848

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
DVENTURE UNLIMITED/DISCOVERY BOUND FOUNDATION	N/A	CHRISTIAN SCIENCE CAMPS	265,000 ¦
CO1 S QUEBEC STREET	PC		!
GREENWOOD VILLAGE, CO 80111			,
ALTA VISTA	N/A	CHRISTIAN SCIENCE OTHER	180,000
325 E FIGUEROA ST	PC		
SANTA BARBARA, CA 93101			
ARDEN WOOD	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	2,058,000
445 WAWONA STREET	PC		1
SAN FRANCISCO, CA 94116			ı
ARM IN ARM	N/A	LOCAL COMMUNITY SUPPORT	2,543
61 NASSAU STREET	PC		,
PRINCETON, NJ 08540			1
			,
ASANTE AFRICA FOUNDATION, INC	N/A	EDUCATION	.70,329
1334 CARLTON PLACE	PC		
LIVERMORE, CA 94550			1
			;
ASSOCIATION OF ORGANIZATIONS FOR CHRISTIAN SCIENCE	N/A	CHRISTIAN SCIENCE OTHER	123,233
C/O THE LEAVES ATT SUSIE WEST	PC		
RICHARDSON, TX 75080			

ATTACHMENT 16

ATTACHMENT 16 (CONT'D)

	AND		1
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	FMOUNT
· · · · · · · · · · · · · · · · · · ·	,		, —
REACON HAVEN	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	, 45,471
200 LONG LAKE RAOD	PC		ì
1230 WEST SPRING VALLEY RD			7
NEW BRIGHTON, MN 55112		·	
BROADVIEW, INC	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	637,500
4570 GRIFFIN AVENUE	PC		
LOS ANGELES, CA 90031			• 1
CAMP BOW-ISLE	N/A	CHRISTIAN SCIENCE CAMPS	, 90,000
871 GREEN ROAD	PC		· ·
BOWEN ISLAND			,
BRITISH COLUMBIA			:
CANADA VON 1G2			,
CAMPS LEELANAU/KOHAHNA FOUNDATION	N/A	CHRISTIAN SCIENCE CAMPS	110,000
1653 PORT ONEIDA ROAD	PC		;
MAPLE CITY, MI 49664			1
CAMPS NEWFOUND AND OWATONNA	N/A	CHRISTIAN SCIENCE CAMPS	135,000
4 CAMP NEWFOUND RD	PC		•
HARRISON, ME 04040-9987			1
CANTERBURY CREST, INC	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	182,500
PO BOX 19147	PC		1
PORTLAND, OR 97280			<b>;</b>

HUGHESVILLE, PA 17737

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

ATTACHMENT 16 (CONT'D)

### RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	THUOMÁ
CEDARS CAMPS	N/A	CHRISTIAN SCIENCE CAMPS	243,700
9772 SUGAR DRIVE	PC		
LEBANON, MO 65536			
CHESTNUT HILL BENEVOLENT ASSOCIATION	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	9,957,800
910 BOYLSTON STREET	PC	,	
CHESTNUT HILL, MA 02467			
CHRISTIAN SCIENCE NURSING NETWORK	N/A	CHRISTIAN SCIENCE PHILANTHROPIC ORGANIZATION	25,000
5103 SHERIDAN RD	PC		
#403			
TULSA, OK 74145			
CLEARVIEW HOME CORPORATION	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	41,000
935 MAIN STREET	PC		
DELAFIELD, WI 53018			
COMMON GROUND COMMITTEE, INC	N/A	CHRISTIAN SCIENCE OTHER	103,000
11 SURREY GLEN	PC		
WILTON, CT 06987			
CRYSTAL LAKE CAMPS	и/а	CHRISTIAN SCIENCE CAMPS	1,300,000
1676 CRYSTAL LAKE ROAD	PC		

ATTACHMĿNT 16

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			ATTACHMENT 16 (CONT'D)
			ì
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
PAYSTAR INC	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	931,300
800 S FLAMINGO ROAD		CHRISTIAN SCIENCE NORSING FACILITIES	,
	PC		
DAVIE, FL 33330			
DESERT VIEW	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	46,000
8390 EAST VIA DE VENTURA, F-110, #249	PC		
SCOTTSDALE, AZ 85258			•
FERN LODGE	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	1,504,000
18457 MADISON AVENUE	PC		-, -, -, -, -, -, -, -, -, -, -, -, -, -
CASTRO VALLEY, CA 94546			
0.02.00 7.02.02.7 0.1 94040			
FIRST CHURCH OF CHRIST, SCIENTIST MANILA	N/A	CHRISTIAN SCIENCE OTHER	3,000
1560 LEON GUINTO, SR STREET	NC		
MANILA			
PHILIPPINES 1000			
FIRST CHURCH OF CHRIST, SCIENTIST, CONCORD	N/A	CHRISTIAN SCIENCE OTHER	1,500,000
33 SCHOOL STREET	PC		
CONCORD, NH 03301			
FIRST CHURCH OF CHRIST, SCIENTIST, PRINCETON	N/A	CHRISTIAN SCIENCE OTHER	534,590
16 BAYARD LANE	PC		
PRINCETON, NJ 08540			

			ATTACHMENT 16 (CONT'D)
			i •
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		:
	AND		,
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	TNUOMA
GLENMONT	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	2,315,000
599 AVERY ROAD	PC	CARISTIAN SCIENCE NORSING FACILITIES	2,313,000
	PC		1
HILLIARD, OH 43026			
HIGH RIDGE HOUSE, INC	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	433,000
5959 INDEPENDENCE AVENUE	PC		
RIVERDALE, NY 10471			:
			÷
HOUSTON ISD FOUNDATION	n/a	DISASTER RELIEF	4,000,000
4400 WEST 18TH STREET	PC		
HOUSTON, TX 77092			
			;
KIPP HOUSTON	N/A	EDUCATION	1,500,000
10711 KIPP WAY	PC/		•
HOUSTON, TX 77099			•
			•
KOSER FAMILY	NONE	DISASTER RELIEF	' 2,000
176 DRAFT HORSE	ĭ		
FISCHER, TX 78623		•	ŧ
			•
LE VERGER	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	200,000
CHEMIN DE LA PRAIRIE 7	NC		,
ROLLE			:
SWITZERLAND 1180			•

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		1
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
			•
LYNN HOUSE OF POTOMAC VALLEY	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	368,500
400 W BRADDOCK ROAD	PC		•
ALEXANDRIA, VA 22304			
MONROE COUNTY EDUCATION FOUNDATION	N/A	DISASTER RELIEF	500,000
241 TRUMBO ROAD	PC		
KEY WEST, FL 33040			
MORNING LIGHT LODGE	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	322,500
PO BOX 7604	PC		
ATLANTA, GA 30357			
NATIONAL FUND FOR CHRISTIAN SCIENCE NURSING	N/A	CHRISTIAN SCIENCE PHILANTHROPIC ORGANIZATION	; 5;000,000
2405 GRAND BLVD, SUITE 1040	PC		1
KANSAS CITY, MO 64108			
NEW HAMPSHIRE HOME FOR CHRISTIAN SCIENTISTS	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	1,160,000
23 RUNDLETT STREET	PC		
CONCORD, NH 03301			
	,		-
OLIVE GLEN FOUNDATION, INC	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	106,000
3025 BECERRA WAY	PC		
SACRAMENTO, CA 95821			1

ATTACHMENT 16 CONT'D)

ATTACHMENT 16 (CONT'D)

#### RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	THUOMA
PASADENA ISD EDUCATION FOUNDATION	N/A	DISASTER RELIEF	1,000,000
	PC	DIGNOTEN NEBIDE	1,000,000
15 CHERRYBROOK LANE	PC		t t
PASADENA, TX 77502			<u>:</u>
, PEACE HAVEN ASSOCIATION	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	, 238,500
12630 ROTT ROAD	PC		r
ST LOUIS, MO 63127			i
			•
PENNINGTON POLICE DEPARTMENT	N/A	LOCAL COMMUNITY SUPPORT	• 250
30 NORTH MAIN STREET	GOV		,
PENNINGTON, NJ 08534-0095			
			•
PRINCETON AREA COMMUNITY FOUNDATION	N/A	LOCAL COMMUNITY SUPPORT	500 `
15 PRINCESS ROAD	PC		i
LAWRENCEVILLE, NJ 08648			•
PRINCETON HIGH SCHOOL	N/A	EDUCATION	3,000
151 MOORE STREET	PC	2200111201:	1
PRINCETON, NJ 08540			
FAIRCEION, NO 00040			
PUERTO RICO EDUCATION FOUNDATION	N/A	EDUCATION	750,000
1500 CALLE ANTONSANTI	PC		1
SAN JUAN, PR 00912			

ATTACHMENT 16 (CONT'D)

#### RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
RAINBOW VALLEY RESOURCE NETWORK, INC	N/A	CHRISTIAN SCIENCE PHILANTHROPIC ORGANIZATION	28,000
O BOX 427	PC		
BUENA VISTA, CO 81211			
SUNLAND HOME FOUNDATION	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	413,000
691 SPARTA DRIVE	PC		
ENCINITAS, CA 92024			
SUNRISE HAVEN	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	51,000
24423 100TH AVE SE	PC		
KENT, WA 98030			
THE BRANCH SCHOOL	N/A	CHRISTIAN SCIENCE BASED SCHOOLS	2,031,000
1424 SHERWOOD FOREST	PC		•
HOUSTON, TX 77043			
THE CAMPERSHIP FUND	N/A	CHRISTIAN SCIENCE CAMPS	100,000
965 GREAT ROAD	PC		
PRINCETON, NJ 08540			
THE COMMISSION	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	341
PO BOX 97813	PC		
0			

RALEIGH, NC 27624

		<del></del>	
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		!
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE FIRST CHURCH OF CHRIST, SCIENTIST	N/A	THE MOTHER CHURCH	5,000,000
0 MASSACHUSETTS AVE	PC		5,000,000
BOSTON, MA 02115			
THE LEAVES	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	1,,296,732
1230 WEST SPRING VALLEY ROAD	PC		
RICHARDSON, TX 75080	•		
		•	:
THE PRINCIPLE FOUNDATION	N/A	CHRISTIAN SCIENCE PHILANTHROPIC ORGANIZATION	306,112
2405 GRAND BLVD STE 1040	PC		
			1
,			
THE WILLOWS FOUNDATION, INC	N/A	CHRISTIAN SCIENCE OTHER	910,000
23871 WILLOWS DRIVE	PC		
LAGUNA HILLS, CA 92653			•
TWELVEACRES	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	1,000,000
286 E HAMILTON AVENUE, SUITE F	PC		r
CAMPBELL, CA 95008			
WIDE HORIZON, INC	N/A	CHRISTIAN SCIENCE NURSING FACILITIES	410,000
8900 W 38TH AVENUE	PC		
WHEAT RIDGE, CO 80033			•

ATTACHMENT 16 (CONT'D)

TENACRE FOUNDATION 2017 FORM 990-PF 21-0577480

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

ATTACHMENT 16 (CONT'D)

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

RECIPIENT NAME AND ADDRESS

FOUNDATION STATUS OF RECIPIENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

YES PREP PUBLIC SCHOOLS

HOUSTON, TX 77033

15 SOUTH LOOP EAST, SUITE B

N/A PC DISASTER RELIEF

1,500,000

TOTAL CONTRIBUTIONS PAID

50,934,401

ATTACHMENT 16

#### ATTACHMENT 17

## FORM 990PF, PART XVI-B - ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE NO.

1

EXPLAIN BELOW HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART XVI-A CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF YOUR EXEMPT PURPOSES (OTHER THAN BY PROVIDING FUNDS FOR SUCH PURPOSES).

TENACRE FOUNDATION MAKES AVAILABLE THE RELIGIOUS MINISTRY

OF CHRISTIAN SCIENCE NURSING FOR THOSE INDIVIDUALS CHOOSING

TO RELY RADICALLY ON GOD FOR HEALING, AS TAUGHT IN

CHRISTIAN SCIENCE, AND BY PROVIDING BENEVOLENCE TO DO SO

WITHOUT REGARD TO THE ABILITY OF THOSE IN NEED TO PAY FOR

THE PROVISION OF SUCH SERVICES

TENACRE ALSO OPERATES A SCHOOL IN ACCORDANCE WITH THE

PRECEPTS OF CHRISTIAN SCIENCE TO HELP PREPARE MEMBERS OF

THE MOTHER CHURCH TO REPRESENT THEMSELVES AS CHRISTIAN

SCIENCE NURSES WHO MAY SERVE INDIVIDUALLY, OR WHO MAY STAFF

THE FACILITIES OF THE CORPORATION AND OTHER CHRISTIAN

SCIENCE ORGANIZATIONS AND FACILITIES

TENACRE MAINTAINS AND OPERATES A RETREAT FACILITIES FOR

CHRISTIAN SCIENTISTS-IN-RESIDENCE IN A COMMUNITY SETTING

WITH A SPIRITUAL FOCUS FOR THOSE WHO AGREE TO AND HAVE THE

QUALIFICATIONS TO PARTICIPATE IN THE SPIRITUAL AND

RELIGIOUS MISSION OF THE CORPORATION AND/OR TO PRACTICE THE

RELIGION OF THE FIRST CHURCH OF CHRIST, SCIENTIST, IN

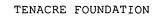
BOSTON, MASSACHUSETTS

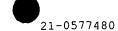


# ATTACHMENT 17 (CONT'D)

## -FORM-990PF, -PART-XVI-B -- ACCOMPLISHMENT OF EXEMPT PURPOSES

TENACRE ALSO PROVIDES FACILITIES, COURSES, WORKSHOPS, AND OTHER EVENTS FOR PRAYERFUL STUDY OF AND RESEARCH INTO RELIGIOUS SUBJECTS RELATED TO CHRISTIAN SCIENCE.





FORM 990-PF - PART IV

		INS AND LOSSES FOR TAX ON INVEST				P Date		Date sold
Kind of Property		Description				Ď	acquired	
_Gross_sale price less	Depreciation — allowed/	- Cost or-	FMV as of	Adj basis as of 12/31/69	-Excess of FMV over adj basis	-	- Gain or (loss)	
expenses of sale	allowable	basis	<u>12/31/69</u>	1 12/3/109	1 au basis	+	(1055)	
		VANGUARD					VAR	VAR
354,081		398,943					-44,862	
		1				1		
		VANGUARD					VAR	VAR
19311877		17103255				2	2,208,622	
. :-		1				-		
		TOWLE					VAR	VAR
24850745		12588029				1	12262716	-
		TOWLE					VAR	VAR
2,067,258		2,868,064.					-800,806	
'		AMERICAN TRU	ST		ľ	1	VAR	VAR
16809631		13692976				3	3,116,655	
							Ĺ	
]		AMERICAN TRU	ST				VAR	VAR
9,177,089		9,221,139					-44,050	
		LAUREL GROVE					VAR	VAR
695,359						ĺ	695,359	
							,	
		LAUREL GROVE					VAR	VAR
		88,115				1	-88,115	
		WELLS FARGO					VAR	VAR
1,096,743						1	,096,743	
		WELLS FARGO					VAR	VAR
		12,568				1	-12,568	
		CTEV NAMIONA	т			1	7.73.0	
668,080		CITY NATIONA	Г				VAR	VAR
000,000							668,080	
		CITY NATIONA	т		ł	1	VAR	777.0
		452,956	ь		ŀ		-452,956	VAR
		432,330			İ		432,930	
		1						,
						1		
TOTAL GAIN(LO	SS)	[ .				-	18604818	
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