

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

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

▶ **Do not enter social security numbers on this form as it may be made public.**
 ▶ **Go to www.irs.gov/Form990PF for instructions and the latest information.**

OMB No 1545-0052
2018
Open to Public Inspection

For calendar year 2018, or tax year beginning 04-01-2018, and ending 03-31-2019

Name of foundation JOHN C PROCTOR ENDOWMENT		A Employer identification number 37-0662595
Number and street (or P O box number if mail is not delivered to street address) 2724 W RESERVOIR BLVD	Room/suite	B Telephone number (see instructions) (309) 685-6580
City or town, state or province, country, and ZIP or foreign postal code PEORIA, IL 61615		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>26,616,729</u>	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	115,680			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	10,443	10,443	10,443	
	4 Dividends and interest from securities				
	5a Gross rents	686,447	686,447	686,447	
	b Net rental income or (loss)	686,447			
	6a Net gain or (loss) from sale of assets not on line 10	135			
	b Gross sales price for all assets on line 6a	1,000			
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	5,342,055	0	5,342,055		
12 Total. Add lines 1 through 11	6,154,760	696,890	6,038,945		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	283,301	32,070	217,805	65,496
	14 Other employee salaries and wages	3,852,029	18,774	2,852,700	999,329
	15 Pension plans, employee benefits	796,912	14,530	592,945	203,967
	16a Legal fees (attach schedule)	8,255	934	6,347	1,908
	b Accounting fees (attach schedule)	34,015	3,850	26,151	7,864
	c Other professional fees (attach schedule)	50,516	0	37,346	13,170
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	161,413	0	119,333	42,080
	19 Depreciation (attach schedule) and depletion	186,330	1,116	186,330	
	20 Occupancy	467,704	538	345,914	121,790
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	1,390,813	0	1,028,227	362,586
	24 Total operating and administrative expenses. Add lines 13 through 23	7,231,288	71,812	5,413,098	1,818,190
	25 Contributions, gifts, grants paid	0			0
26 Total expenses and disbursements. Add lines 24 and 25	7,231,288	71,812	5,413,098	1,818,190	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	-1,076,528				
b Net investment income (if negative, enter -0-)		625,078			
c Adjusted net income (if negative, enter -0-)			625,847		

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	923,707	1,193,815	1,193,815
	2 Savings and temporary cash investments	187,056	184,890	184,890
	3 Accounts receivable ▶ <u>46,091</u>			
	Less allowance for doubtful accounts ▶ _____	54,669	46,091	46,091
	4 Pledges receivable ▶ _____			
	Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____			
	Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ <u>146,844</u>			
Less accumulated depreciation (attach schedule) ▶ _____	431,443	146,844	24,418,777	
12 Investments—mortgage loans				
13 Investments—other (attach schedule)	60,140	204,276	204,276	
14 Land, buildings, and equipment basis ▶ <u>3,484,039</u>				
Less accumulated depreciation (attach schedule) ▶ <u>2,955,380</u>	703,814	528,659	528,659	
15 Other assets (describe ▶ _____)	28,754	40,221	40,221	
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	2,389,583	2,344,796	26,616,729	
Liabilities	17 Accounts payable and accrued expenses	160,117	375,350	
	18 Grants payable			
	19 Deferred revenue	17,460,040	15,177,326	
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)	5,643	4,447	
	23 Total liabilities (add lines 17 through 22)	17,625,800	15,557,123	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	-17,486,216	-15,462,326	
	25 Temporarily restricted			
	26 Permanently restricted	2,249,999	2,249,999	
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances (see instructions)	-15,236,217	-13,212,327		
31 Total liabilities and net assets/fund balances (see instructions) .	2,389,583	2,344,796		

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 end-of-year figure reported on prior year's return)	1	-15,236,217
2 Enter amount from Part I, line 27a	2	-1,076,528
3 Other increases not included in line 2 (itemize) ▶ _____	3	3,100,418
4 Add lines 1, 2, and 3	4	-13,212,327
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	-13,212,327

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions.
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement See instructions
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A
14 The books are in care of DONNA J MALONE Telephone no (309) 685-6580
Located at 2724 W RESERVOIR BLVD PEORIA IL ZIP+4 61615
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 -check here and enter the amount of tax-exempt interest received or accrued during the year 15
16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes", enter the name of the foreign country

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.
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?
(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?
(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).
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? If "Yes," list the years
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement-see instructions)
c 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 If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of 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 2018).
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year				(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
b 85% of line 2a	0				0
c Qualifying distributions from Part XII, line 4 for each year listed	1,940,872	1,620,729	1,156,289	1,953,853	6,671,743
d Amounts included in line 2c not used directly for active conduct of exempt activities	0	0	0	0	0
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	1,940,872	1,620,729	1,156,289	1,953,853	6,671,743

3 Complete 3a, b, or c for the alternative test relied upon

a "Assets" alternative test—enter

(1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.

	865,467	874,333	872,753	944,033	3,556,586
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c "Support" alternative test—enter

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).

(3) Largest amount of support from an exempt organization

(4) Gross investment income

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

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

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

c Any submission deadlines

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

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Total ▶ 3a				
b <i>Approved for future payment</i>				
Total ▶ 3b				

Form 990FP Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
HARRY C STONE MD 2724 W RESERVOIR BLVD PEORIA, IL 61615	CHAIRMAN 1 00	0	0	0
ARLYN RUBASH 2724 W RESERVOIR BLVD PEORIA, IL 61615	TRUSTEE 1 00	0	0	0
JOHN B WAHLFELD 2724 W RESERVOIR BLVD PEORIA, IL 61615	TRUSTEE 1 00	0	0	0
ANDREW P STONE 2724 W RESERVOIR BLVD PEORIA, IL 61615	TRUSTEE 1 00	0	0	0
DONNA MALONE 2724 W RESERVOIR BLVD PEORIA, IL 61615	PRES/SEC/ASST TREASURER 40 00	198,173	40,475	0
AINDREA BALAGNA 2724 W RESERVOIR BLVD PEORIA, IL 61615	DIR FINANCE/ASST SEC/TREAS 40 00	85,128	27,044	0
SALLY SARA K STONE 2724 W RESERVOIR BLVD PEORIA, IL 61615	TRUSTEE 1 00	0	0	0
MARGARET HANLEY 2724 W RESERVOIR BLVD PEORIA, IL 61615	TRUSTEE 1 00	0	0	0
KEVIN RUBASH 2724 W RESERVOIR BLVD PEORIA, IL 61615	TRUSTEE 1 00	0	0	0

TY 2018 Accounting Fees Schedule**Name:** JOHN C PROCTOR ENDOWMENT**EIN:** 37-0662595

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	34,015	3,850	26,151	7,864

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2018 Gain/Loss from Sale of Other Assets Schedule

Name: JOHN C PROCTOR ENDOWMENT

EIN: 37-0662595

Gain Loss Sale Other Assets Schedule

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
2002 GMC TRUCK	2009-04	PURCHASED	2018-10		1,000	11,374		0	1,000	11,374
PEARL - LCD PROJECTOR	2015-03	PURCHASED	2018-12			863		0	-201	662
PROJECTOR	2018-09	PURCHASED	2018-10			664		0	-664	

TY 2018 General Explanation Attachment**Name:** JOHN C PROCTOR ENDOWMENT**EIN:** 37-0662595**General Explanation Attachment**

Identifier	Return Reference	Explanation	
1	STATEMENT REGARDING SELF DEALING	FORM 990-PF, PART VII-B, LINE 1	COMMERCE BANCSHARES, WHICH MAY BE A DISQUALIFIED PERSON, PROVIDES THE ENDOWMENT, THROUGH ITS WHOLLY-OWNED SUBSIDIARY COMMERCE BANK, WITH CHECKING AND SAVINGS ACCOUNT SERVICES SUCH SERVICES ARE BELIEVED NOT TO BE ACTS OF SELF-DEALING SINCE THEY ARE BELIEVED TO BE GENERAL BANK FUNCTIONS WITHIN THE MEANING OF REGULATION 53 4941(D)-2(C)(4) THE ENDOWMENT COMPENSATES ITS SECRETARY FOR THE PERFORMANCE OF PERSONAL SERVICES SUCH PAYMENT IS NOT AN ACT OF SELF-DEALING UNDER CODE SECTION 4941(D)(2)(E), SINCE THE SERVICES ARE REASONABLE AND NECESSARY TO THE CARRYING OUT OF THE ENDOWMENT'S EXEMPT PURPOSE AND THE COMPENSATION IS NOT EXCESSIVE.

General Explanation Attachment

Identifier	Return Reference	Explanation	
2	STATEMENT REGARDING STATUS AS AN OPERATING FOUNDATION	FORM 990-PF, PART XIV	UNDER THE PROVISION OF SECTION 4942(J)(5) OF THE INTERNAL REVENUE CODE, JOHN C PROCTOR ENDOWMENT QUALIFIES AS A PRIVATE OPERATING FOUNDATION WITH THE ENACTMENT OF SECTION 4942(J)(5) BY THE REVENUE ACT OF 1978, LONG-TERM CARE FACILITIES SUCH AS JOHN C PROCTOR ENDOWMENT ARE NO LONGER REQUIRED TO MEET THE 85% DISTRIBUTION TEST JOHN C PROCTOR ENDOWMENT MEETS THE "ENDOWMENT TEST" REQUIREMENT FOR EXEMPTION, SINCE THE ORGANIZATION DISTRIBUTED AT LEAST 2/3 OF ITS MINIMUM INVESTMENT RETURN

General Explanation Attachment

Identifier	Return Reference	Explanation	
3	STATEMENT REGARDING BUSINESS ACTIVITIES	FORM 990-PF, PART XVI-B	THE JOHN C PROCTOR ENDOWMENT WAS ESTABLISHED SO EXTRAORDINARY CARE COULD BE PROVIDED FOR THE AGED TO ACCOMPLISH THESE OBJECTIVES, THOSE INDIVIDUALS WHO ARE RESIDENTS OF PROCTOR PLACE MUST HELP PROVIDE SOME CAPITAL TO COVER EXPENDITURES THE GROSS RECEIPTS FROM BUSINESS ACTIVITIES, INCOME FROM PROGRAM SERVICES AND MISCELLANEOUS INCOME REPRESENT FUNDS PROVIDED BY RESIDENTS AND THUS CONTRIBUTE IMPORTANTLY TO THE ENDOWMENT'S EXEMPT PURPOSES

TY 2018 Investments - Land Schedule**Name:** JOHN C PROCTOR ENDOWMENT**EIN:** 37-0662595

Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
REAL ESTATE	146,844	0	146,844	24,418,777

TY 2018 Investments - Other Schedule**Name:** JOHN C PROCTOR ENDOWMENT**EIN:** 37-0662595**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
OTHER INVESTMENTS	AT COST	204,276	204,276

**TY 2018 Land, Etc.
Schedule****Name:** JOHN C PROCTOR ENDOWMENT**EIN:** 37-0662595

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
BUILDINGS AND FURNISHINGS	3,484,039	2,955,380	528,659	528,659

TY 2018 Legal Fees Schedule**Name:** JOHN C PROCTOR ENDOWMENT**EIN:** 37-0662595

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	8,255	934	6,347	1,908

TY 2018 Other Assets Schedule**Name:** JOHN C PROCTOR ENDOWMENT**EIN:** 37-0662595**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
INVENTORY OF FARM CROPS	6,754	18,221	18,221
FOOD INVENTORY	22,000	22,000	22,000

TY 2018 Other Expenses Schedule**Name:** JOHN C PROCTOR ENDOWMENT**EIN:** 37-0662595**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOOD	472,583	0	349,381	123,202
MEDICAL AND DENTAL	66,522	0	49,180	17,342
SUPPLIES	141,973	0	104,961	37,012
INSURANCE	185,127	0	136,864	48,263
MISCELLANEOUS	79,010	0	58,412	20,598
TELEPHONE/CABLE/COMPUTERS	52,903	0	39,111	13,792
REPAIRS AND MAINTENANCE	253,681	0	187,546	66,135
DUES & SUBSCRIPTIONS	9,933	0	7,343	2,590
TRAINING	9,485	0	7,012	2,473
DISPOSAL SERVICES	29,241	0	21,618	7,623

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	31,522	0	23,304	8,218
PROPERTY TAXES	1,782	0	1,317	465
SECURITY	20,357	0	15,050	5,307
MARKETING	36,694	0	27,128	9,566

TY 2018 Other Income Schedule**Name:** JOHN C PROCTOR ENDOWMENT**EIN:** 37-0662595**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
GROSS SALES	5,146,075		5,146,075
MISCELLANEOUS INCOME	195,980		195,980

TY 2018 Other Increases Schedule**Name:** JOHN C PROCTOR ENDOWMENT**EIN:** 37-0662595

Description	Amount
TRANSFER FROM RELATED ORGANIZATION	3,100,418

TY 2018 Other Liabilities Schedule**Name:** JOHN C PROCTOR ENDOWMENT**EIN:** 37-0662595

Description	Beginning of Year - Book Value	End of Year - Book Value
LEASE OBLIGATION	5,643	4,447

TY 2018 Other Professional Fees Schedule**Name:** JOHN C PROCTOR ENDOWMENT**EIN:** 37-0662595

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CONSULTING FEES	50,516	0	37,346	13,170

TY 2018 Taxes Schedule**Name:** JOHN C PROCTOR ENDOWMENT**EIN:** 37-0662595

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NURSING HOME TAXES	161,413	0	119,333	42,080

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

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

OMB No 1545-0047
2018

Name of the organization
JOHN C PROCTOR ENDOWMENT

Employer identification number
37-0662595

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

- 501(c)() (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹ 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year ▶ \$ _____

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

Name of organization JOHN C PROCTOR ENDOWMENT	Employer identification number 37-0662595
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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	DOROTHY BLACKBURN BLACKBURN CHARITABLE TRUST	\$ 10,462	Person <input checked="" type="checkbox"/>
	PO BOX 11356		Payroll <input type="checkbox"/>
	CLAYTON, MO 63105		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
2	JEWEL RICHMOND ESTATE	\$ 89,700	Person <input checked="" type="checkbox"/>
	C/O JACK BOOS PC 416 MAIN ST SUITE		Payroll <input type="checkbox"/>
	PEORIA, IL 61602		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
3	DON & PHYLLIS PETERSON	\$ 11,493	Person <input checked="" type="checkbox"/>
	2724 W RESERVOIR BLVD		Payroll <input type="checkbox"/>
	PEORIA, IL 61615		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)

Name of organization JOHN C PROCTOR ENDOWMENT	Employer identification number 37-0662595
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Part II Noncash Property

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

Name of organization JOHN C PROCTOR ENDOWMENT	Employer identification number 37-0662595
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____