## **Federal Electronic Filing Instructions**

Tax Year 2019

## You are responsible for confirming the status of your electronically filed return.

You can confirm the status of your return by going to <u>https://www.taxact.com/ef/efile-center</u>. You will need to enter the entity's EIN, ZIP code and company name.

You do not need to mail any paper signature forms to the IRS. Retain the signed copy of Form 8453-EO along with a copy of your return. The return has been successfully filed once an acceptance from the IRS is received.

Form	99	0-	Ρ	F
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Department of the Treasury

### **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. OMB No. 1545-0047

2019	
Open to Public Inspection	on

		of the Treasury renue Service	► Go to www	<i>v.irs.gov/Form990PF</i> f	or instructions	and the	e latest in	formation.		Open to Public Inspection
			or tax year beginning	08/01/2019	, and ending	07/	31/20	20		
N	ame o	f foundation	_	· · · · ·					er identification numb	per
Th	e 1	Mark and	l Barbara D	enton Family	7 Foundat	ion	Inc	27-02		
N	umbei	r and street (or P.	O. box number if mail is	not delivered to street add	ress)	Room			ne number (see instruc	ctions)
19	162	2 Coffin	berry Blvd					(502)	876-5172	
			/ince, country, and ZIP o	r foreign postal code					tion application is pend	ling, check here 🕨
Fa	ir	view Par	k, OH 4412	6						_
G	Ch	eck all that apply:	Initial return	Initial return of	a former public cha	arity		D 1. Forei	gn organizations, chec	k here 🕨 🗌
			Final return	Amended retur	n			2. Forei	gn organizations meeti	ng the 85% test.
			Address change	Name change					k here and attach comp	
Н	Ch	eck type of organi	zation: X Section 5	01(c)(3) exempt private fou	Indation			E If private	foundation status was	terminated under
	See	ction 4947(a)(1) n	onexempt charitable trus	st Other taxable pr	ivate foundation				507(b)(1)(A), check her	. –
I	Fai	r market value of	all assets at J Acco	ounting method: X Cas	h 🗌 Accrua	al		F If the fou	Indation is in a 60-mon	th termination
	enc	d of year (from Pa	art II, col. (c),	ther (specify)				under se	ection 507(b)(1)(B), che	eck here 💷 🕨 🗌
	line	<u>e</u> 16) ► \$ 2	4,804. (Part I,	column (d), must be on ca	sh basis.)					
Ρ	art I	Analysis of	of Revenue and	Expenses (The total	of (a) Revenue	e and	(b) Net i	nvestment	(c) Adjusted net	(d) Disbursements
		amounts in col	umns (b), (c), and (d) ma	ay not necessarily equal	expense	s per	i i	ncome	income	for charitable purposes
		the amounts in	column (a) (see instruct	ions).)	bool	S				(cash basis only)
	1	Contributions,	gifts, grants, etc., rece	eived (attach schedule)	6,4	<u>150.</u>				
	2	Check 🕨 🔲	if the foundation is not	required to attach Sch.	В					
	3	Interest on sav	ings and temporary ca	ash investments						
	4	Dividends and	interest from securitie	S	·	<u>271.</u>		271.		
	5 a	Gross rents.								
	b	Net rental inco	me or (loss)							
ne	6a	Net gain or (lo	ss) from sale of assets	s not on line 10						
en	b	Gross sales p	rice for all assets on lin	ne 6a						
Revenue	7			/, line 2) .......						
æ	8	Net short-term	capital gain		·					
	9	Income modifi	cations		•					
	10 a	Gross sales le	ss returns and allowar	nces						
	b	Less: Cost of	goods sold							
	C	•	. , .	le)						
	11									
	12					/21.		271.		
	13			trustees, etc						
	14		•							
Sec	15									
ben		0 (	,							
Ă		-	· ,	· · · · · · · · · · · · · · · · · · ·						
ive		•		dule)						
trat	17			· · · · · · · · · · · · · · · · · · ·						
nis	18	,	, ,	tions)		7.				
<u>j</u>	19									
Ă	20									
anc	21									
<b>Operating and Administrative Expenses</b>	22	0 1				60.				
rati	23 24	•	ng and administrativ		·	00.				
be	<b>~</b> 4	-	-	e expenses.		67.				
0	25		•			<u>87.</u> 360.				5,360.
	25 26			ts. Add lines 24 and 25		27.				5,360.
	20		6 from line 12:		,	. 4 / •				5,500.
				and disbursements	1 1	294.				
				re, enter -0-).				271.		
				e, enter -0-).				_, _ •		
			(							

		PF (2019) The Mark and Barbara Denton Fami				213311 Page 2
Ра	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year			of year
			(a) Book Value	(b) Book Valu		(c) Fair Market Value
	1	Cash – non-interest-bearing	6,615			
	2	Savings and temporary cash investments	227.	. 3	94.	394.
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	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				
Assets	8	Inventories for sale or use				
ss	9	Prepaid expenses and deferred charges				
₹	10a	Investments – U.S. and state government obligations (attach schedule)				
	b	Investments – corporate stock (attach schedule).	11,764.	. 11,8	68.	16,772.
	с	Investments – corporate bonds (attach schedule)				
	11	Investments – land, buildings, and equipment: basis				
		Less: accumulated depreciation (attach schedule)				
	12	Investments – mortgage loans				
	13	Investments – other (attach schedule).				
	14	Land, buildings, and equipment: basis			_	
		Less: accumulated depreciation (attach schedule)				
	15	Other assets (describe ►				
	16	Total assets (to be completed by all filers – see the instructions. Also,			- 1	
		see page 1, item I).	18,606	19,9	00.	24,804.
	17	Accounts payable and accrued expenses				
	18	Grants payable				
δil	19					
	20	Loans from officers, directors, trustees, and other disqualified persons				
ab	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe )				
I	23	Total liabilities (add lines 17 through 22).				
	25	Foundations that follow FASB ASC 958, check here				
loces		and complete lines 24, 25, 29, and 30.				
an	24	Net assets without donor restrictions	18,606.	19,9	00	
l v	25	Net assets with donor restrictions	10,000	<u> </u>		
	23	Foundations that do not follow FASB ASC 958, check here				
Fund		and complete lines 26 through 30.				
Ē	26	Capital stock, trust principal, or current funds				
0	26 27					
ا نټ	27	Paid-in or capital surplus, or land, bldg., and equipment fund				
ŝŝ	28	Retained earnings, accumulated income, endowment, or other funds	19 606	10.0		
₹	29	Total net assets or fund balances (see instructions)	18,606.	. 19,9	00.	
et	30	Total liabilities and net assets/fund balances	10 000	10.0	~ ~	
		(see instructions)	18,606	. 19,9	00.	
	art I			ofwar		
1		tal net assets or fund balances at beginning of year – Part II, column (a), line 29		-	4	19 606
~	-	ure reported on prior year's return)		F	1	18,606.
2		ter amount from Part I, line 27a			2	1,294.
3		her increases not included in line 2 (itemize) ►			3	10 000
4		d lines 1, 2, and 3			4	19,900.
5		creases not included in line 2 (itemize) ▶			5	
6				1	6	19,900.

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		<u>and Barbara Dentor</u>			n I	27-0	213311	Page 3
Part		nd Losses for Tax on Investn						4
		kind(s) of property sold (for example, real e ; or common stock, 200 shs. MLC Co.)	state,	(b) How acquired P - Purchase D - Donation		e acquired , day, yr.)	(d) Date sol (mo., day, yr	
1a								
b								
С								
d								
е								
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis bense of sale			n or (loss) (f) minus (g))	
а								
b								
с								
d								
е								
Com	plete only for assets showing g	jain in column (h) and owned by the four	ndation on 12/31	/69.		) Gains (Co	I. (h) gain minus	
	(i) FMV as of 12/31/69	(j) Adjusted basis	(k) Exce	ss of col. (i)			ot less than -0-)	
	()	as of 12/31/69		col. (j), if any		( ),	from col. (h))	
а								
b								
		1 1						
d								
e								
	Capital gain net income or (net	capital loss)	also enter in Pa	urt I, line 7				
-	Capital gain net income of (net	······································	), enter -0- in Pa		2			
3	Net short-term capital gain or (le	oss) as defined in sections 1222(5) and				_		
		8, column (c). See instructions. If (loss)		ı				
			,	}	3			
Part	V Qualification Un	der Section 4940(e) for Redu	red Tay on	Not Investmen	-	00		
Was th		ion 4942 tax on the distributable amount		ne base period?			Yes	X No
1 1	·	y under section 4940(e). Do not complet t in each column for each year; see the i	•	re making any entries				
•	(a)	(b)		(c)	».		(d)	
Cale	Base period years ndar year (or tax year beginning in	Adjusted qualifying distribution	Net value	of noncharitable-use as			vistribution ratio b) divided by col.	(c))
	2018			18,2				
	2017	8,30		17,6				.4745
	2016	16,72		19,9				<u>8391</u>
	2015	8,30		19,9				.4180
	2014	3,50	50.	23,0	48.			.1545
2	Total of line 1, column (d) .				2	2	1.	8861
3	Average distribution ratio for t	the 5-year base period – divide the total	on line 2 by 5.0,	or by the number of				
•		n in existence if less than 5 years			3	3	1.	8861
	-							
4	Enter the net value of noncha	aritable-use assets for 2019 from Part X	line 5		4	<u>.                                    </u>	21,	,291.
5	Multiply line 4 by line 3.				5	;	40,	,158.
6	Enter 1% of net investment in	ncome (1% of Part I, line 27b)			6	j		3.
7						,	40	,161.
8		from Part XII, line 4.					5,	,360.
	If line 8 is equal to or greater See the Part VI instructions.	than line 7, check the box in Part VI, line	e 1b, and comple	ete that part using a 1	1% tax rate	<b>)</b> .		

Form 99	0-PF (2019) The Mark and Barbara Denton Family Foundation I 27-021	331	L P	age <b>4</b>
Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			5.
	here  and enter 1% of Part I, line 27b			
с	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of			
	Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 2			
3	Add lines 1 and 2			5.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 4			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			5.
6	Credits/Payments:			
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a			
b	Exempt foreign organizations - tax withheld at source			
с	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d.			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			5.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0.
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax  Refunded  11			0.
Part	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or		Yes	No
	intervene in any political campaign?	1a		х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the			
	definition	1b		х
	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.			
с	Did the foundation file Form 1120-POL for this year?	1c		х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers.  S			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		х
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?.	4a		х
b	If "Yes," has it filed a tax return on Form 990-T for this year?.	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		х
	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:			
	<ul> <li>By language in the governing instrument, or</li> </ul>			
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict</li> </ul>			
	with the state law remain in the governing instrument?	6	x	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	7	x	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	IN, OH			
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 G? If "No," attach explanation	8b	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for			
	calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	9		х
10	Did any persons become substantial contributors during the tax year?			
	If "Yes," attach a schedule listing their names and addresses	10		х

	0-PF (2019) The Mark and Barbara Denton Family Foundation I 27-021 VII-A Statements Regarding Activities (continued)	331	<u>1</u> F	Page 5
- are			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning			
••	of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person			
	had advisory privileges? If "Yes," attach statement. See instructions	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
	Website address <b>b</b> dentonfamilyfoundation.org			
14	The books are in care of ▶Luke Denton Telephone no.▶ (502)876	-51	72	
	Located at <b>b</b> 19162 Coffinberry Blvd Fairview Park, OH 44126 ZIP+4 <b>b</b> 44126			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		🕽	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2019, 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			
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.		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?			
	(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	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2019?	1c		x
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years ►			
b	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			
	all years listed, answer "No" and attach statement - see instructions.).	2b		x
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> 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			
Ŀ	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10, 15, or 20 year first phase holding period? (Lies Form 4720, Schedula C, to determine if the			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had even a hybrid by 2010.)	<b>2</b> L		
4-	foundation had excess business holdings in 2019.)	3b		<b>v</b>
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20192	4b		v
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	40		X

	O-PF (2019) The Mark and Barbara VII-B Statements Regarding Activities				7-02	1331	<u>1</u> P	Page <b>6</b>
5a	During the year, did the foundation pay or incur any amou			required (con	unueu)		Yes	No
Ja	(1) Carry on propaganda, or otherwise attempt to influence		945(a))2		X No		163	NO
	(2) Influence the outcome of any specific public election	<b>e</b>	( ))		21 110			
	directly or indirectly, any voter registration drive?	. ,	•	Yes	X No			
	(3) Provide a grant to an individual for travel, study, or oth				XNo			
	(4) Provide a grant to an organization other than a charita							
	section 4945(d)(4)(A)? See instructions.	•			X No			
	(5) Provide for any purpose other than religious, charitab							
	purposes, or for the prevention of cruelty to children of				X No			
b	If any answer is "Yes" to $5a(1)$ -(5), did <b>any</b> of the transac							
	Regulations section 53.4945 or in a current notice regard					5b		
	Organizations relying on a current notice regarding disast	•				0.0		
с	If the answer is "Yes" to question 5a(4), does the foundat							
Ŭ	because it maintained expenditure responsibility for the g	•						
	If "Yes," attach the statement required by Regulations see							
6a	Did the foundation, during the year, receive any funds, dir		v premiums					
vu	on a personal benefit contract?				XNo			
b	Did the foundation, during the year, pay premiums, direct					6b		х
D	If "Yes" to 6b, file Form 8870.	ly of indirectly, on a pers				00		<u></u>
7a	At any time during the tax year, was the foundation a part	v to a prohibited tax she	lter transaction?		X No			
b	If "Yes," did the foundation receive any proceeds or have					7b		
8	Is the foundation subject to the section 4960 tax on paym			·····				
0	remuneration or excess parachute payment(s) during the							
Par	t VIII Information About Officers, Dire	ectors Trustees	Foundation Ma	nagers High	ly Paid	Empl	OVee	
r ar	and Contractors				ly i ala	Empi	0,00	,
1	List all officers, directors, trustees, and foundation n	nanagers and their co	mpensation. See in	structions.				
	(a) Name and address		(c) Compensation	(d) Contributions		(e) Expe	ense aco	count,
		hours per week devoted to position	(If not paid, enter -0-)	employee benefit and deferred compe		other	allowar	ices
Bark	oara Denton	President	· · · · ·	•				
3921	Kamilche Point Rd SE Shelton, WA 98584	01.00						
		Vice President						
	White Oak Ct Franklin, IN 46131	01.00						
		Secretary						
	Coffinberry Blvd Fairview Park, OH 44126	02.00						
		Director						
	White Oak Ct Franklin, IN 46131	01.00						
2	Compensation of five highest-paid employees (other			uctions). If none,	enter			
	"NONE."			, .				
(a) Na	ame and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions employee benefit and deferred comp	plans	(e) Expe other	ense aco allowar	
NONE	6							
NONE	8							
NONE	6							
NONE	6							
NONE	E							
Total n	umber of other employees paid over \$50,000			<u> </u>				

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### Form 990-PF (2019)The Mark and Barbara Denton Family Foundation I27-0213311Page 7Part VIIIInformation About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. See instru	ctions. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
NONE		
NONE		
NONE		
NONE		
Total number of others receiving over \$50,000 for professional services	• • • • • • • • • • • • • • • • • • • •	

#### Part IX-A **Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.				Expenses	
	1	Donation to Warner Pacific College (Portland, OR) - The university			
		independently selected three students from the areas of religious studies,		3,000.	
	2	music and education to receive \$1,000 scholarships for 2019-20 academic yr. Donation to Church of God Ministries (Anderson, IN) - The amount donated		5,000.	
	_	will provide one scholarship to students at the Kima International School	r		
		of Theology. The recipient is selected by the school.		1,500.	
	3	Donation to Christians Broadcasting Hope (Anderson, IN) - Sponsored one			
		day of worldwide radio broadcasting.			
				860.	
	4				
Part IX-B Summary of Program-Related Investments (see instructions)					

Fart IX-D Summary of Frogram-Kelated 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	
2	
All other program-related investments. See instructions.	
3	
Fotal. Add lines 1 through 3       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       .       . <td< td=""><td></td></td<>	
JYA	Form <b>990-PF</b> (201

Form 9	90-PF (2019) The Mark and Barbara Denton Family Foundation I 2	7-0	213311 Page 8
Part		gn fo	oundations,
	see instructions.)	_	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	15,675.
b	Average of monthly cash balances	1b	5,940.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c).	1d	21,615.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation).		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d.	3	21,615.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see instructions)	4	324.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	21,291.
6	Minimum investment return. Enter 5% of line 5	6	1,065.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	g foui	ndations
	and certain foreign organizations, check here $\blacktriangleright$ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	1,065.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b		
с	Add lines 2a and 2b	2c	5.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,060.
4	Recoveries of amounts treated as qualifying distributions.	4	0.
5	Add lines 3 and 4	5	1,060.
6	Deduction from distributable amount (see instructions).	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,060.
Dent			
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	5,360.
b	Program-related investments – total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	5,360.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of		
-	Part I, line 27b. See instructions	5	
6	Adjusted gualifying distributions. Subtract line 5 from line 4.	6	5,360.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of the foundati	-	· · · · · ·
	section 4940(e) reduction of tax in those years.	1-	-

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Form **990-PF**(2019)

### Form 990-PF (2019) The Mark and Barbara Denton Family Foundation I 27-0213311 Page 9 Part XIII Undistributed Income (see instructions)

Part	XIII Undistributed Income (see instruction	ns)			
		<b>(a)</b> Corpus	<b>(b)</b> Years prior to 2018	<b>(c)</b> 2018	<b>(d)</b> 2019
1	Distributable amount for 2019 from Part XI, line 7				1,060.
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only.				
b	Total for prior years:				
3	Excess distributions carryover, if any, to 2019:				
а	From 2014				
b	From 2014         2,414.           From 2015         7,375.				
С	From 2016				
d	From 2017				
е	From 2018				
f	Total of lines 3a through e	32,996.			
4	Qualifying distributions for 2019 from Part XII,				
	line 4: ▶ \$ <b>5,360.</b>				
а	Applied to 2018, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election				
_	required - see instructions)				5 262
d	Applied to 2019 distributable amount				5,360.
e	Remaining amount distributed out of corpus.				7
5	Excess distributions carryover applied to 2019				
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a).)				
0	indicated below:				
2	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	32,996.			
b	Prior years' undistributed income. Subtract	527550.			
N N	line 4b from line 2b				
с	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed.				
d	Subtract line 6c from line 6b. Taxable				
	amount - see instructions				
е	Undistributed income for 2018. Subtract line				
	4a from line 2a. Taxable amount - see				
	instructions				
f	Undistributed income for 2019. Subtract lines				
	4d and 5 from line 1. This amount must be				
_	distributed in 2020				-4,300.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section $(72)^{(1)}$ (2.10)				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
0	required - see instructions).				
8	Excess distributions carryover from 2014 not	2 111			
9	applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2020.	2,414.			
9	Subtract lines 7 and 8 from line 6a	30,582.			
10	Analysis of line 9:	50,502.			
a	Excess from 2015				
a b	Excess from 2016				
c	Excess from 2017				
d	Excess from 2018				
e	Excess from 2019				
-					

Form 9	90-PF(2019) The Mark and Ba				<u>I 27-02</u>	<b>13311</b> Page <b>10</b>
Part	XIV Private Operating Foundati	ons (see instruc	tions and Part V	/II-A, question 9)		
1a	If the foundation has received a ruling or dete	ermination letter that it	t is a private operating	g foundation, and		
	the ruling is effective for 2019, enter the date	of the ruling				
b	Check box to indicate whether the foundation	is a private operating	g foundation describe	ed in section	4942(j)(3)	or 4942(j)(5)
2a	Enter the lesser of the adjusted net income	Tax year		Prior 3 years		(e) Total
	from Part I or the minimum investment	<b>(a)</b> 2019	<b>(b)</b> 2018	(c) 2017	<b>(d)</b> 2016	
	return from Part X for each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4,					
	for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly for					
	active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative					
	test relied upon:					
а	"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					
С	"Support" alternative test - enter:					
	(1) Total support other than gross invest-					
	ment 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					
Devi	(4) Gross investment income	(Complete this	nert enly if th	a foundation he		
Part	XV Supplementary Information any time during the year- s	• •	• •	e foundation ha	ia \$5,000 or mo	ore in assets at
1	nformation Regarding Foundation Manage	ers:				
a	ist any managers of the foundation who have	contributed more thar	n 2% of the total cont	ributions received by t	he foundation before	the close of any
	ax year (but only if they have contributed more	than \$5,000). (See s	ection 507(d)(2).)			
	bara Denton					
	ist any managers of the foundation who own 1			(or an equally large po	rtion of the ownership	o of a partnership
	or other entity) of which the foundation has a 10	0% or greater interest	t.			

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

Check here Check

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

 ${\bf b}$  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 (co				
3 Grants and Contributions Paid During the Ye		Jayment	1	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
Narner Pacific College				
2219 SE 68th Ave				
Portland, OR 97215			2019-20 Scholarships	3,000
CBH Viewpoint				
PO Box $2420$				
Anderson, IN 46018-2420		PC		860
Anderson, in 40010-2420		PC	1 Day Radio Sponsorship	000
Church of God Ministries				
PO Box 2420				
Anderson, IN 46018-2420		PC	KIST Scholarship Fund	1,500
				_,
the local sector of the sector				
the second se				
Total	I			5,360
<b>b</b> Approved for future payment				

### Form 990-PF (2019) The Mark and Barbara Denton Family Foundation I 27-0213311 Page 12 Part XVI-A Analysis of Income-Producing Activities

Ente	gross amounts unless otherwise indicated.		isiness income	Excluded by sect	ion 512, 513, or 514	(e)
1	Program service revenue:	<b>(a)</b> Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exempt function income (See instructions.)
	a					
	b					
	c					
	d					
	e					
	f					
	g Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities.			14	271.	
5	Net rental income or (loss) from real estate:				2/10	
5	a Debt-financed property.					
	<b>b</b> Not debt-financed property.					
6	Net rental income or (loss) from personal property					
7	Other investment income.					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory.	_				
11	Other revenue: a					
	b					
	d					
	e					
	Subtotal. Add columns (b), (d), and (e)				271.	
	Total. Add line 12, columns (b), (d), and (e).				13	
	e worksheet in line 13 instructions to verify calculations.)		=			
	rt XVI-B Relationship of Activities to the A					
Lir	e No. Explain below how each activity for which income is	•	. ,		•	omplishment
	of the foundation's exempt purposes (other than by	providing funds	for such purposes	. (See instruction	s.)	
	1					

Form 99 Part	0-PF (2 XVI		Informa	ation	n Rega	ardir	ng Tr												<u>7-02</u> h None			ige <b>13</b>
	Didd		Exempt					•••••	- ( 1)			4	11					1	24 ( - )		Yes	No
1		-	nization di	-		-		-			-	-		-		escribed	i in sec	tion 50	J1(C)		163	NO
	(othe	i indri i	section 501	1(0)(3)	organiz	Zauon	5) 01 11	Sectio	11 527	r, relatil	ng to p	Junicar	orgai	IIZalion	15 !							
а	Trans	sfers fr	om the rep	ortina	founda	tion to	a non	charita	hle er	xemnt c	organia	zation of	f·									
u				-							-									. 1a(1)		х
	• •		ssets																			х
b	• •		actions:																			
	(1) S	Sales o	f assets to	a nono	charitak	ole exe	mpt o	rganiza	ation.											. 1b(1)		х
	(2) F	urcha	ses of asse	ets fror	m a nor	ncharit	able e	xempt	organ	ization										. 1b(2)		Х
	<b>(3)</b> F	Rental	of facilities,	equip	ment, c	or othe	r asse	ts.												. 1b(3)		Х
	(4) F	Reimbu	rsement ar	rrange	ments															. 1b(4)		Х
	<b>(5)</b> L	oans c	or loan guar	rantees	s															. 1b(5)		Х
	<b>(6)</b> F	Perform	nance of se	ervices	or men	nbersł	nip or f	undrai	sing s	solicitat	ions .									. 1b(6)		Х
С	Shari	ng of f	acilities, eq	quipme	ent, mail	ling lis	ts, oth	er ass	ets, o	r paid e	employ	/ees								. 1c		Х
d			er to any of							-			-	-						-		
			s, or service	-	-		-								an fair m	arket va	alue in	any tra	ansactior	n or shar	ing	
			t, show in o																			
<b>(a)</b> Line	e no.	<b>(b)</b> An	nount involve	ed	(c) N	Name o	of nonc	haritabl	e exer	mpt orga	anizatio	on	(	d) Des	scription	of transfe	ers, trar	nsaction	ns, and sl	haring ari	angem	ents
				-	_											_			_			
		- 1	_						10													
		-				-						-	-	_	-		_					
		- 1																	_			
	(othe	r than s	ation direct section 501 nplete the f	1(c)(3)	) or in s	sectior		-		-					anizatio	ns desc	ribed ii	n secti	on 501(d 	;) Yes	1	No
			Name of c			saulo.			(	<b>b)</b> Typ	e of o	rganizat	tion			(c)	Descri	iption o	of relation	nship		
		. ,								, ,,		<u> </u>				. ,						
			nalties of perju nd complete. I															my knov	-			
Sign		oncot, a		Declara	uon or pre	opuror (		in taxpay					WINOI	rpiopulo	i nao any	Ritewieug	0.			RS discuss rer shown		
Here												<u>s</u>	ecı	reta	ary				instruction		_	
	/ s		e of officer c							Date		7 Tit	le								es	No
Paid		Print/	Type prepar	rer's na	ime			Pre	parer's	s signat	ure				Date	•		Check	if	PTIN	_	_
Prepa	irer																	self-er	mployed			
Use C	Dnly	-	s name 🕨	•													Firm's					
		Firm'	s address														Phone	e no.				

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

### **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

2019

Name of the organization		Employer identification number
The Mark and B	arbara Denton Family Foundation Inc	27-0213311
Organization type (che	ck one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a priva	te foundation
	527 political organization	
Form 990-PF	<b>X</b> 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private for	undation
	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<sup>1/3</sup> % 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 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).

Name of o	rganization		Employer identification number
<u>The M</u>	ark and Barbara Denton Family Foundat	ion Inc	27-0213311
Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space	e is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	Barbara Denton 3921 Kamilche Point Rd SE Shelton, WA 98584	\$6,000	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
 (a)	(b)	\$(c)	Person Payroll Noncash (Complete Part II for noncash contributions.)
Nó.	Name, address, and ZIP + 4	Total contributions	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.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Page **2** 

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization En	
Name of organization En	Employer identification number
The Mark and Barbara Denton Family Foundation Inc 2	27-0213311

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
	(b) Description of noncash property given	Description of noncash property given     FMV (or estimate) (See instructions.)       (b)     s       Description of noncash property given     (C)       (c)     FMV (or estimate) (See instructions.)       (c)     FMV (or estimate)       (see instructions.)     (c)       (c)     FMV (or estimate)       (see instructions.)     (c)       (b)     FMV (or estimate)       (See instructions.)     (c)       (b)     FMV (or estimate)       (See instructions.)     (c)       (b)     FMV (or estimate)       (See instructions.)     (c)       (See instructions.)     (see instructions.)

Schedule B	(Form 990, 990-EZ, or 990-PF) (2019)		Page 4						
	rganization		Employer identification number						
The Ma Part III	(10) that total more than \$1,000 fo the following line entry. For organiz	etc., contributions to organiz r the year from any one cont ations completing Part III, ente	<b>Exations described in section 501(c)(7), (8), or</b> <b>Fributor.</b> Complete columns <b>(a)</b> through <b>(e) and</b> for the total of <i>exclusively</i> religious, charitable, etc.,						
	contributions of <b>\$1,000 or less</b> for t Use duplicate copies of Part III if add		n once. See instructions.)						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
-	Transferee's name, address	(e) Transfer of g s, and ZIP + 4	ift 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								
ŀ	Transferee's name, addres	s, 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						
	Transferee's name, addres	(e) Transfer of g s, and ZIP + 4	Relationship of transferor to transferee						

## Form 990-PF Taxes Expenses

Supporting Details for Form 990-PF. Part I, Line 18

(a) Description	(b) Revenue and expenses per books			(e) Disbursement for charitable purpose
990 PF Tax	7.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
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	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.

Ο.

## EFILE COPY

## Form 990-PF Other Expenses

Supporting	Details	for Form	990-PF.	Part I. Line	23
oupporting	Dotano				

(a) Description	(b) Revenue and			(e) Disbursement
	expenses per books	income	income	for charitable purpose
Bank Fees	60.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.

## Form 990-PF Amortization

Supporting Details for Form 990-PF. Part I, Line 23

(a) Description	(b) Date		(d) Deductior	n <b>(e)</b>	(f) Current	(g) Net	(h) Adjusted	(i) Total
	Acquired,	Amortized	for Prior	Amortization	Year	Investment	Net Income	Amount of
	Completed, o	r	Years	Period	Amortization	Income		Amortization
	Expended							
			12/17/20	10:04PM				

 0.	0. 0.00000	0.	0.	0.	0.
 0.	0. 0.00000	0.	0.	0.	0.
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## Form 990-PF Other Expenses

Supporting Details for Form 990-PF. Part II, Line 10a, 10b, and 10c

investments - 0.5. and state government obligations							
(a) Description	US Govt.	Securities	State and Local Govt. Securities				
	(b) End of Year Book Value	<b>(c)</b> End of Year Fair Market	<b>(b)</b> End of Year Book Value	(c) End of Year Fair Market			
	0.	0.	0.	0.			
	0.	0.	0.	0.			
	0.	0.	0.	0.			
	0.	0.	0.	0.			
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	0.	0.	0.	0.			
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	0.	0.	0.	0.			
	0.	0.	0.	0.			
	0.	0.	0.	0.			

### Investments - U.S. and state government obligations

Investments - corporate stock		
(a) Description	<b>(b)</b> End of Year Book Value	(c) End of Year Fair Market
SPDR S&P 500 EFT (SPY)	6,094	9 <b>,</b> 469.
Vanguard Lifestrategy Fund Growth Portfolio (VASGX)	5,774	7,303
	0.	0.
	0.	0.
	0.	0.
	0.	0.
	0.	0.
	0.	0.
	0.	0.
	0.	0.

#### Investments - corporate bonds (b) End of Year (c) End of Year **Book Value** Fair Market (a) Description 0 Ο. 0 0. 0 Ο. 0 Ο. 0 Ο. 0 Ο. 0. Ο. 0. 0. Ο. Ο.

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Form 990 (2019)	
Name of organization	Employer identifying number
The Mark and Barbara Denton Family Foundation Inc	27-0213311

### Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

and Contractors 1 List all officers, directors, trustees, founda	tion managers	and their compe	ensation (see ins	structions).
(a) Name and address of each employee paid more than \$50,000		(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other
5 Susan Denton	Director			
19162 Coffinberry Blvd Fairvi	. 1.00000	0.	0.	0.
6 Doug Denton	Director			
2153 Charles Dr Franklin, IN	1.00000	0.	0.	0.
7 Katie Denton	Director			
2153 Charles Dr Franklin, IN	1.00000	0.	0.	0.
8				
	0.00000	0.	0.	0.
9				
	0.00000	0.	0.	0.
10	0.00000	0.	0.	0.
	0.0000	0.	0.	0.
12				
	0.00000	0.	0.	0.
13				
	0.00000	0.	0.	0.
14				
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15				
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16				

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17				
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18				
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19				
	0.00000	0.	0.	0.
20				
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21				
	0.00000	0.	0.	0.
22				
	0.00000	0.	0.	0.
23				
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24				
	0.00000	0.	0.	0.
25				
	0.00000	0.	0.	0.
26				
	0.0000	0.	0.	0.
27				
	0.00000	0.	0.	0.
28				
	0.00000	0.	0.	0.
29				
	0.00000	0.	0.	0.

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