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Department of the Treasury Internal Revenue Service For calendar year 2013 or tax year beginning Name of foundation

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

or obtain to thank it makes as i thate i dallatation

OMB No 1545-0052 2013

Open to Public Inspection

▶ Do not enter Social Security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

_			and ending				
Na	ime of fou	undation			A Emplo	yer identification number	
_			_				
		sburg Foundation Incorporate				-0586192	·
		d street (or P O box number if mail is not delivered to street address)	R	oom/suite	1	none number (see instructions	s)
		n, state or province country, and ZIP or foreign postal code			304	4-647-3520	
		sburg WV 24901			C If exer	nption application is pending,	check here
				ht	┥		
	OHECK 6		urn of a former public o	nanty	D 1 Fo	reign organizations check he	re 🕨
		Final return Amended			1	reign organizations meeting th	
		Address change Name ch				% test, check here and attach	computation
$\overline{}$		type of organization 🗶 Section 501(c)(3) exempt privat	e foundation			ate foundation status was term	ninated under
			ole private foundation		section	n 507(b)(1)(A) check here	▶ _
		rket value of all assets at J Accounting method	X Cash Acc	crual	F If the f	oundation is in a 60-month ter	mination
е	nd of ye	ear (from Part II, col. (c), Other (specify)			under	section 507(b)(1)(B), check hi	ere •
	ne 16) !	▶ \$ 0 (Part I, column (d) musi	t be on cash basis)		<u> </u>		
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c) and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	inco		income	purposes
	1	Contributions, gifts, grants, etc , received (attach schedule)	125,723	1			(cash basis only)
	2	Check ► If the foundation is not required to attach Sch B		<u>'</u>			
	3	Interest on savings and temporary cash-investifients	671	 	671	671	
,	4	Dividends and interest from securities EIVEL	6/1	<u> </u>	6/1	6/1	
		Gross rents		 			
	5a	1 1	<u> </u>				
ne	b		7 /	-			
en	6a b		<u> </u>				
Revenue	,"	Gross sales price for all assets on line 6a				************************	
Œ	8	Capital gain net income (from Partily, line-2)			0	0	
	9	Net short-term capital gain				- 0	
	1	Income modifications					
	10a	Gross sales less returns and allowances 1,050 Less Cost of goods sold 530		 			
	b	Less Cost of goods sold 530 Gross profit or (loss) (attach schedule) Stmt	520				
	C	- · · · · ·	14,550			14 550	
	11	,	·		671	14,550	****
_	+	Total Add lines 1 through 11	141,464	1	6/1	15,221	
es	13	Compensation of officers, directors, trustees, etc		<u>'</u>			
penses	14	Other employee salaries and wages					_
be	15	Pension plans, employee benefits					
Ä	16a	Legal fees (attach schedule) Accounting fees (attach schedule) Stmt 2	600				600
Ve Ve	b	Accounting fees (attach schedule) Stmt 2 Other professional fees (attach schedule)		'			800
ati	1 C	Interest					
and Administrative	17			1			
Ë	18	•	<u> </u>	<u>'</u>			
Ε	19	Depreciation (attach schedule) and depletion		 -			
Ac	20	Occupancy Travel conferences and meetings		 			
þ	21	Travel, conferences, and meetings		1			
ā	22	Printing and publications Other expenses (att sch) Stmt 4	42,507	,			42 E05
Operating	23	,	42,50	+			42,507
ati	24	Total operating and administrative expenses.	A2 115		_		AD 115
er Ser	25	Add lines 13 through 23	43,115		0	0	43,115
ō	25	Contributions, gifts, grants paid	<u> </u>	<u> </u>			42 115
_	26	Total expenses and disbursements. Add lines 24 and 25	43,115	<u>'</u>	0	0	43,115
	27	Subtract line 26 from line 12	98,349				
	a	Excess of revenue over expenses and disbursements	90,343	<u>'</u>	671	,	
	b	Net investment income (if negative, enter -0-)		-	6/1	15.221	
	1 C	AUDISTRO DEL MICOME DI DECIZIVE ENTECNIN	i		3	13.2711)

Form 990-PF (2013)

228,276

5 6

5 Decreases not included in line 2 (itemize) ▶

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

DAA

	990-PF (2013) Lewisburg Foundation Incorporated 55-0586192			P	age 4
	Excise Tax, Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)	······································			
1a	Exèmpt 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				
	here ▶ X 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-)	ļ			<u> </u>
3	Add lines 1 and 2				7
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	-			7
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				
6	Credits/Payments				
a	2013 estimated tax payments and 2012 overpayment credited to 2013 Example foreign expandations tox withhold at accuracy.				
b	Exempt foreign organizations – tax withheld at source Tax paid with application for extension of time to file (Farm 8800)				
c d	Tax paid with application for extension of time to file (Form 8868) Backup withholding exceptions withhold				
7	Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d 7				
8	_				
9		 -			7
10	<u> </u>				
11	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ Refunded ▶ 11				
	rt VII-A Statements Regarding Activities	<u> </u>			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	•		Yes	No
	participate or intervene in any political campaign?		1a	103	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				
	Instructions for the definition)?		1b	i	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 \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		_X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4-	4a		X
b -		N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
c	If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(a) (relating to sections 4941 through 4945) activitied other				
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?		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	
8а	Enter the states to which the foundation reports or with which it is registered (see instructions)		-		
	WV				
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 2013 or the taxable year beginning in 2013 (see 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		X
		F	orm 99	0-PF	(2013)

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	990-PF (2013) Lewisburg F			586192			Pa	ige 6
	rt VII-B Statements Regard		<u>n 4720 May Be R</u>	Required (conti	nued)			
5a	During the year did the foundation pay							
	(1) Carry on propaganda, or otherwise	attempt to influence legislation (sectio	n 4945(e))?	Y	es X No			
	(2) Influence the outcome of any spec	fic public election (see section 4955), o	or to carry on,					
	directly or indirectly, any voter regis	stration drive?		Y	es 🛚 No			
	(3) Provide a grant to an individual for	travel, study, or other similar purposes	?	Y	es 🛚 No			
	(4) Provide a grant to an organization	other than a charitable, etc , organization	on described in					
	section 509(a)(1), (2), or (3), or sec	ction 4940(d)(2)? (see instructions)		Y	es X No		1	
	(5) Provide for any purpose other than	religious, charitable, scientific, literary,	or educational	_		.		
	purposes, or for the prevention of o	ruelty to children or animals?			es X No			
b	If any answer is "Yes" to 5a(1)-(5), did		nder the exceptions d	lescribed in	_			
	Regulations section 53 4945 or in a cui				N/A	5b	ľ	
	Organizations relying on a current notice	- · ·			▶ □			
С	If the answer is "Yes" to question 5a(4)	•						
	because it maintained expenditure resp			N/A 🗍 Y	es No			
	If "Yes," attach the statement required			,				
6a	Did the foundation, during the year, red		pay premiums					
	on a personal benefit contract?	the same and the s	pay promisino		es 🗓 No			
b	Did the foundation, during the year, pay	v premiums, directly or indirectly, on a	nersonal benefit conti		C3 28 140	6ь	İ	x
	If "Yes" to 6b, file Form 8870	y premiums, directly of maliectly, off a	personal benefit conti	act,		- 00		
72	At any time during the tax year, was the	a foundation a party to a prohibited tay	chalter transaction?		es X No			
h	If "Yes," did the foundation receive any	, -			N/A	7b	ŀ	
D ₂		Officers, Directors, Trustees, F						
, ,	and Contractors	incers, birectors, Trustees, I	Ouridation Walls	agers, riigiliy	raid Employe	ees,		
1 L	ist all officers, directors, trustees, for	undation managers and their compo	neation (ean instruc	tions)				
	an officers, directors, trustees, for	andation managers and their compe	isation (see instruc	lions)	4.1) Contabutana ta			
	(a) Nama and	l addoor	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Exp	ense ac	count.
	(a) Name and	address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		allowan	
					compensation			
	A Galyean	Lewisburg	President	_				
	Church Street	WV 24901	2.00	0	0			0
	andon Johnson	Lewisburg	Vice Pres.					
	Church St	WV 24901	1.00	0	0			0
	nabelle Galyean	Lewisburg	Treasurer			ļ		
	Church Street	WV 24901	3.00	0	0			0
Ro	ger Holiday	Lewisburg	Secretary					
	Church Street	WV_ 24901	1.00	0	0	<u> </u>		0
2	Compensation of five highest-paid e	mployees (other than those included	d on line 1 – see ins	tructions). If non	e, enter			
	"NONE."			,				
			(b) Title, and average		(d) Contributions to employee benefit	(a) Eva	ense ac	nount
	(a) Name and address of each employe	e paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		allowan	
			devoted to position		compensation			
NO	NE							
_								
Tota	number of other employees paid over S	\$50,000		-				0
	- 				F:	orm 99	0-PF	(2013)

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Part VIII Information About Officers, Directors, Trustees, Foundation Mana		
and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see instructions) If non	e, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		+
		
		Ì
		
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 organizations and other beneficiaries served, conferences convened, research papers produced.	of	Expenses
1 Planting and maintaining flowers and other hortic	cultural	
items in and around Lewisburg.		
		43,115
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		
Total Add lines 1 through 3		

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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5

Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

43,115

Excess from 2013

'Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Purpose of grant or status of Amount contribution recipient Name and address (home or business) a Paid during the year N/A ▶ 3a Total Approved for future payment N/A ▶ 3b **Total**

1 4167/417	Andiyala of income-i founding Ac	IVILIES				
Enter grbss ar	nounts unless otherwise indicated	Unrelate	d business income	Exclude	d by section 512, 513, or 514	4-3
1 Program s	ervice revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
=						
b				<u> </u>		
С						
d				 		
~		— ——		 		-
f				 		
	and contracts from government agencies	···		 		
				-		14 550
	ip dues and assessments					14,550
	savings and temporary cash investments			-		671
	and interest from securities					
	income or (loss) from real estate	ļ				
	nanced property	ļ				
	bt-financed property	-	 			·
	ncome or (loss) from personal property			<u> </u>		
	stment income					
	ss) from sales of assets other than inventory		·			<u>.</u>
	e or (loss) from special events			ļ		· -
	it or (loss) from sales of inventory			ļ		
11 Other reve		ļ				
b						
c			· · · · · · · · · · · · · · · · · · ·			
		1		1 1		
d						
е						· · · · · · · · · · · · · · · · · · ·
е	add columns (b), (d), and (e)		0		0	15,221
e 12 Subtotal A			0		0	15,221 15,221
e	add columns (b), (d), and (e) line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations)				13	
e 12 Subtotal A 13 Total Add	add columns (b), (d), and (e) line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations)	ccomplishm			13	
e	add columns (b), (d), and (e) line 12, columns (b), (d), and (e) at in line 13 instructions to verify calculations) Relationship of Activities to the Acti	is reported in co	ent of Exempt P	urpose A contrib	13	15,221
e	add columns (b), (d), and (e) line 12, columns (b), (d), and (e) at in line 13 instructions to verify calculations) Relationship of Activities to the A	is reported in co	ent of Exempt P	urpose A contrib	13	15,221
e	add columns (b), (d), and (e) line 12, columns (b), (d), and (e) at in line 13 instructions to verify calculations) Relationship of Activities to the Acti	is reported in co	ent of Exempt P	urpose A contrib	13	15,221
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e	add columns (b), (d), and (e) line 12, columns (b), (d), and (e) at in line 13 instructions to verify calculations) Relationship of Activities to the Acti	is reported in co	ent of Exempt P	urpose A contrib	13	15,221

rait	,	Exempt Organiza		ansiers to and	u Transaçtic	ons and Relation	snips wit	п мопслагітар	ıe		
1 D	id the org	anization directly or ind		ge in any of the foll	owing with any	other organization des	scribed			Yes	No
		601(c) of the Code (othe				-					
or	rganizatio	ns?				-	•				ĺ
a Tı	ransfers f	rom the reporting found	lation to a no	oncharitable exemp	ot organization o	of					İ
(1	l) Cash								1a(1)		X
(2	2) Other a	assets							1a(2)		X
b O	ther trans	actions									
(1) Sales	of assets to a noncharit	able exempt	organization					1b(1)		<u>X</u>
		ses of assets from a no			on				1b(2)		X
		of facilities, equipment,		sets					1b(3)		<u>X</u>
		ursement arrangements	3						1b(4)		X
		or loan guarantees							1b(5)		X
		nance of services or mi							1b(6)		X
		facilities, equipment, m				(1.)			1c		X
		er to any of the above i									
		e goods, other assets, o y transaction or sharing									
	Line no	(b) Amount involved		e of noncharitable exemp				nsactions and sharing ar	rangomo	ote	
A/N		(2)/************************************	(0) 110.11	- Control Control Control	or organization	(d) Description	TOI (talisters, trai	isactions and sharing at	angeme	1115	
-,			 					-			
			<u> </u>								
											
						-					
	•										
			ļ				_				
			 	<u> </u>		-					
		 	 								
0- 1-	41 6	d-t	-41: -661 -41			<u> </u>					
		dation directly or indirec					IS			.	١
		n section 501(c) of the mplete the following sc		man section 501(c	(3)) or in section	JII 3277			16	es X	NO
<u> </u>		(a) Name of organization	ileanie	(b) Type of o	rganization		(c) Descripti	ion of relationship			
N/		(4,		(2) 1) μο σι σ	. 9477241011		(e) bescripti	- Clottonomp			
						-					
_			•		_						
-					-						
	Under po	enalties of perjury, I declare th	at I have exami	ined this return, including	g accompanying sch	edules and statements, and	to the best of m	ny knowledge and belief.	it is true	٠,	
	Correct,	and complete Declaration of p	preparer (other)	tnan taxpayer) is based	on all information of	which preparer has any kno	owieage	May the IRS disc	uss this re	eturn	
Sign		•		1.				with the preparer			¬ I
lere	ĺ.	anna helle	\mathcal{L}	4.0		aut.		(see instructions)	² X	Yes	No
		Unnahille	<u>- D.</u>	Lalyean		1-4-14	Treas	surer			
	Sig	nature of officer or trustee			Date	, /	Title				
	Print/	ype preparer's name			Preparer's signatu	9/ /	\neg	Date		Check/	\(\sigma_{\text{if}} \)
aid						-land 1	277	_		self-em	_
repare	Rodn	an G. Lowe			1 10	drutt /	we	05/00			
Jse On	Firm's	name ▶ Lowe			PLLC				1310		
	Firm's	address ▶ 1156			200		-		554		
		Milto	on, WV	25541-12	222				-74	_	
								r	orm 99	10-PF	120131

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.

▶ Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Employer identification number

2013

Lewisburg Foundation	Incorporated	55-0586192

Organization	ype (check one)	
Filers of:	Section:	
Form 990 or	0-EZ	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	rganization is covered by the General Rule or a Special Rule . ection 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See	
General Rul		
	organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or y) from any one contributor. Complete Parts I and II	
Special Rule		
unde the g	ection 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the regulations sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of atter 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 sete Parts I and II	
durin	ection 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, cational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III	
durin not ti year appli	ection 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did al to more than \$1,000. If this box is checked, enter here the total contributions that were received during the ran exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or luring the year.	· \$
990-EZ, or 9	rganization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, i-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 Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

Name of organization
Lewisburg Foundation Incorporated

Employer identification number 55-0586192

<u> </u>		33 0300232
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional sp	ace is needed

	, , , , , , , , , , , , , , , , , , , ,		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	James Peyton Foundation 1559 Virginia St. East Charleston WV 25311	s 100,000	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
2	Jeanne Hamilton P.O. Box 930 Lewisburg WV 24901	\$ 5,000	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
3	Estate of Duke Fouch 29 Webb Ct Stafford VA 22556	\$ 5,000	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
4	Lawson Hamilton, III 213 E. Court St. Lewisburg WV 24901	\$ 5,000	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
į		\$	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)

55-0586192	Federal	Federal Statements		
Sta	Statement 1 - Form 990-PF	- Form 990-PF, Part I, Line 11 - Other	- Other Income	•
Description		Revenue per Books	Net Investment Income	Adjusted Net ' Income
Membership Dues Total		\$ 14,550 \$ 14,550	\$ \$ \$	\$ 14,550
State	Statement 2 - Form 990-PF, P	Part I, Line 16b - Accou	Accounting Fees	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Indirect Accounting Fees Total	009 \$	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	009 \$
	Statement 3 - Form 990-PF,	Part I, Line 18 -	Taxes	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Indirect Taxes/Licenses Total		0 	w w	8 8 8
State	Statement 4 - Form 990-PF, Part I	Part I, Line 23 - Other Expenses	Expenses	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Expenses Office Supplies & Exp Horticulture Projects	2,615 38,471	v ,	ν·	\$ 2,615 38,471
rund Diive Exp Bank & Administrative Fees Total	\$ 42,507	\oldots \text{\rightarrow}	0 0	\$ 42,507
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