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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.

Internal Re	t of the Treasury venue Service	ļ	► Informa	tion about F	orm 9	990-PF and its separate	instructions	is at www.irs	.gov/form990pf.	Open to Public Inspection
For caler	dar year 2015	or tax yea	r beginning]			, and e	nding		
Name of	foundation							<u> </u>	A Employer identificatio	n number
RAY	C MCKI	NLEY	FAMI	LY FOU	MD.	ATION			20-560443	5
Number a	nd street (or PO	oox number	ıf mail is not	delivered to str	eet ad	dress)		Room/suite	B Telephone number	
246	8 CROSS	PARK	DRIV	E					(615)692-	4612
	own, state or pr		-		n pos	tal code			C If exemption application is	pending, check here
<u>MUR</u>	<u>FREESBO</u>	RO,	<u>TN 3</u>	<u>7129 </u>						
G Check	all that apply:		Initial retu			Initial return of a fo	ormer public	charity	D 1 Foreign organization	ns, check here
		<u> </u>	Final retu			Amended return			2. Foreign organizations m	eeting the 85% test
			Address			Name change			2. Foreign organizations m check here and attach o	computation
	type of organiz				_	npt private foundation			E If private foundation st	
	ction 4947(a)(1			ĭ		her taxable private founda	$\overline{}$		under section 507(b)(1)(A), check here
	arket value of al		end of year	J Accou	-	method: X Cash	L Acc	rual	F If the foundation is in a	
	Part II, col (c),		7 270	(Part Lo		r (specify) n (d) must be on cash i	hacie I		under section 507(b)(1)(B), check here
▶\$ Part I	Analysis of R				1				()) () () ()	(d) Disbursements
Parti	(The total of am necessarily equ	ounts in col	umns (b), (c),	and (d) may no	:	(a) Revenue and expenses per books		ome	(c) Adjusted net income	for charitable purposes (cash basis only)
1	Contributions,	gıfts, grai	nts, etc., rec	eived	Ĺ				N/A	
2	Check X			d to attach Sch B						
3	Interest on savin- cash investment	gs and tem; s	oorary							
2 4	Dividends and	ınterest fr	om securiti	es		1,329.		1,329.		STATEMENT 1
5a	Gross rents				<u> </u>					
[7] b	Net rental income	e or (loss)								
် <u>ရ</u> 6a	Net gain or (loss) Gross sales price				- -	644.				
Eg b	assets on line 6a			1,042.	- -					
Revenue 2 9 9 9 4 2 9 9 9 9 4 8	Capital gain net i	ncome (fron	n Part IV, fine	2)	-	<u> </u>		644.		
	Net short-term Income modifi Gross sales less	i capit al- @	PECI	EIVED						
"	Gross sales less	returns	ハーショ					<u> </u>		
10a	and allowances	to)			- 5					
	Less Cost of go	(Inss)	APR 0	4 2016	10					
11	Other income	TI		····	فِ الــ					
12	Total Add line	es 1 throu	GOE	EN, UT		1,973.		1,973.		
13	Compensation o	f officers, di	rectors, truste	es, etc		0.		0.		0.
14	Other employe		-							
<u>"</u> 15	Pension plans	, employe	e benefits							
စ္တို 16a	Legal fees				\vdash		· · · · · · · · · · · · · · · · · · ·			
ē b	Accounting fe			TMT 2	-	600. 2,157.		600. 2,157.		0.
<u></u> 0	Other professi	onal tees	5	тмт 3	\vdash	4,157.		Z,13/.		0.
18 ative	Interest Taxes		Q	TMT 4	\vdash	23.		23.		0.
istra 19	Depreciation a	nd denleti		IIII 4	H	25.		20.		
E 20	Occupancy	ina acpicii	.011				··········			
P 21	Travel, confer	ences, and	l meetings				····	-		
E 22	Printing and p									
g 23	Other expense									
Operating and Administrative Expenses	Total operatin		ministrative)						
ber	expenses Ad	d lines 13	through 23			2,780.		2,780.		0.
0 25	Contributions,				<u> </u>	5,000.	ļ			5,000.
26	Total expense		bursement	s.						
	Add lines 24 a					7,780.		2,780.		5,000.
	Subtract line 2					F 007				
	Excess of revenu				-	-5,807.		0.	<u> </u>	
0	Net investme	iit income	ui negative, e	enter -U-)	<u> </u>			<u> </u>	NT / 3	

523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions

ronn 9		Beginning of year	End of year			
Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		(a) Book Value	(b) Book Value	(c) Fair Market Value		
1	Cash - non-interest-bearing	(4) 500% 14.00	(0) 500 12.50			
	Savings and temporary cash investments	1,825.	6,416.	6,416.		
	Accounts receivable ►					
	Less; allowance for doubtful accounts ▶					
4	Pledges receivable ►					
1	Less: allowance for doubtful accounts ▶					
5	Grants receivable					
6	Receivables due from officers, directors, trustees, and other					
	disqualified persons					
7	Other notes and loans receivable					
	Less: allowance for doubtful accounts ▶			· · · · · · · · · · · · · · · · · · ·		
र्ह्म 8	Inventories for sale or use			· · · · · · · · · · · · · · · · · · ·		
0, 1	Prepaid expenses and deferred charges		11 010			
100	a Investments - U.S. and state government obligations STMT 5	25,341.	14,943.	14,282.		
1	h Investments - corporate stock					
(Investments - corporate bonds					
11	Investments - land, buildings, and equipment basis					
	Less accumulated depreciation					
12	Investments - mortgage loans	40 205	40.205	46 500		
13	Investments - other STMT 6	40,395.	40,395.	46,580.		
14	· _ · · · · · · · · · · · · · · · · · ·					
	Less accumulated depreciation					
- 1	Other assets (describe					
116	Total assets (to be completed by all filers - see the	67,561.	61,754.	67,278.		
17	instructions. Also, see page 1, item I) Accounts payable and accrued expenses	07,301.	01,734.	07,270.		
18						
مداء						
Liabilities 02 1 21 21	ſ		***************************************			
E 21						
اند 22 انت						
23	Total liabilities (add lines 17 through 22)	0.	0.			
	Foundations that follow SFAS 117, check here					
	and complete lines 24 through 26 and lines 30 and 31.					
8 24	Unrestricted					
E 25	Temporarily restricted					
<u>සි</u> 26						
필	Foundations that do not follow SFAS 117, check here					
트	and complete lines 27 through 31		_			
g 27		0.	0.			
Net Assets or Fund Balances 08 6 7 9 6 7 8 6 7 8 7 9 9 7 9 7 9 9 7 9 9 7 9 9 9 9 9 9	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
₹ 29	· · · · · · · · · · · · · · · · · · ·	67,561.	61,754.			
≥ 30	Total net assets or fund balances	67,561.	61,754.			
		67 561	61 751			
	Total liabilities and net assets/fund balances	67,561.	61,754.			
Parl	Analysis of Changes in Net Assets or Fund B	alances				
1 Tota	al net assets or fund balances at beginning of year - Part II, column (a), line	30				
	ist agree with end-of-year figure reported on prior year's return)		1	67,561.		
•	er amount from Part I, line 27a		2	-5,807.		
3 Oth	er increases not included in line 2 (itemize)		3	0.		
	l lines 1, 2, and 3		4	61,754.		
_	reases not included in line 2 (itemize)		5	0.		
6 Tot	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	61,754.		
				Form 990-PF (2015		

6 Enter 1% of net investment income (1% of Part I, line 27b)

7 Add lines 5 and 6

7 3,379.

8 Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions.

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5,000.

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	990-PF (2015)' RAY C MCKINLEY FAMILY FOUNDATT TVI Excise Tax Based on Investment Income (Section 494)	ION 0(a), 4940(b),	4940(e), or 4	20-5 948 - \$	604435 see instru	ction	age 4
	Exempt operating foundations described in section 4940(d)(2), check here and e)				
	Date of ruling or determination letter: (attach copy of letter if nec		tions)				
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here			1			0.
	of Part I, line 27b						
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	6 of Part I, line 12, c	ol. (b).				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. O		. (-,-	2			0.
	Add lines 1 and 2	•		3	'		0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. C	Others enter -0-)		4			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	•		5			0.
	Credits/Payments:						
	2015 estimated tax payments and 2014 overpayment credited to 2015	6a					
	Exempt foreign organizations - tax withheld at source	6b					
	Tax paid with application for extension of time to file (Form 8868)	6c					
	Backup withholding erroneously withheld	6d					
	Total credits and payments. Add lines 6a through 6d	<u> </u>		7			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached		8			
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	.01100	•	9			0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10			
	Enter the amount of line 10 to be: Credited to 2016 estimated tax		Refunded	11			
	t VII-A Statements Regarding Activities		Titeramoca				
	During the tax year, did the foundation attempt to influence any national, state, or local legis	slation or did it partie	cinate or intervene	in		Yes	No
	any political campaign?	signori or ara it parti	sipulo of intervente	***	1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses (see instruction	s for the definition	12	1b		X
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities an				10		71
	distributed by the foundation in connection with the activities	ia copies of arry in	ateriais publicire	, a 0,	·		
	Did the foundation file Form 1120-POL for this year?				10		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	o voar*			10		
	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers		0.				
	Enter the reimbursement (if any) paid by the foundation during the year for political expend			•			
	<u> </u>	inture tax imposed of	Tioundation			}	l
	managers. > \$ 0 . Has the foundation engaged in any activities that have not previously been reported to the I	DC2			2		X_
	If "Yes," attach a detailed description of the activities	no:					Λ_
	Has the foundation made any changes, not previously reported to the IRS, in its governing	inetriimant articlae	of incorporation of	vr.			
			or incorporation, c	,,	3		х
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chang Did the foundation have unrelated business gross income of \$1,000 or more during the yea				4a		X
		ai r		NT /		-	
	If "Yes," has it filed a tax return on Form 990-T for this year?	9		N/	A 4b 5	-	X
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	,					
	If "Yes," attach the statement required by General Instruction T	uthor					1
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e ■ By language in the governing instrument, or	auner.				1	
	 By state legislation that effectively amends the governing instrument so that no mandator 	ry directions that as	after with the state	. law			Į.
		ry unechons marco	miliot with the state	iavv	6	x	
	remain in the governing instrument?	malata Dart II. aal	(a) and Dort VI	,	7	X	
′	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," con	rripiete Part II, coi	(c), and Part Av				<u> </u>
۵,	Enter the states to which the foundation reports or with which it is registered (see instruction	ons) NON	म				
oa	title the states to which the loombatton reports of with which it is registered (see historical	INOIN	<u></u>				
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney General (or	decignate)			}	
	of each state as required by General Instruction G? If "No," attach explanation		E STATEM	ENT	7 8b		x
	·				′ 00	\vdash	
	Is the foundation claiming status as a private operating foundation within the meaning of se year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," o			iiuai			v
	Did any persons become substantial contributors during the tax year? If "yes," attach a schedi				10	 	X
10	שום שווא אינו שריים שביים ווב בעיים ומיווים ביים מיווים שווים ווה נמצ אבמי ל וו "Yes," attach a schedi	uie iisting their names a	nu adoresses		Form 99	0-PF	
						- • •	(=0.0)

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X

3h

4a

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2015)

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

orm 990-PF (2015) RAY C MCKINLEY FAMILY FC	OUNDATION		<u> 20-56044</u>	35	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (continu	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No		•
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire	ectly,			
any voter registration drive?		Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	s?	☐ Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
4945(d)(4)(A)? (see instructions)		☐ Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or t	for			
the prevention of cruelty to children or animals?			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations			1
section 53.4945 or in a current notice regarding disaster assistance (see instri			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check	·				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		ined	, _		ŀ
expenditure responsibility for the grant?			s No		
If "Yes," attach the statement required by Regulations section 53 494		1/22			1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	· ·				1
	pay premiums on		s X No		
a personal benefit contract?	narranal banafit annirontO	L	NO LAJ 85	C.	•
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6ь	X
If "Yes" to 6b, file Form 8870			s X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax		Ye			
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b	Д
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	tees, Foundation Ma	anagers, Highly	/		
					
List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(-) Ev	
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deterred	accoun	pense t, other
	to position	`enter -0-)	compensation	allowa	ances
GREGORY A MCKINLEY	PRESIDENT			İ	
2468 CROSSPARK DRIVE	_				
MURFREESBORO, TN 37129	1.00	0.	0.		0.
PATRICIA S MCKINLEY	TREASURER				
2468 CROSSPARK DRIVE				ł	
MURFREESBORO, TN 37129	1.00	0.	0.		0.
				1	
	7				
2 Compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."			
() No and address of the base of the control of th	(b) Title, and average	4-100	(d) Contributions to employee benefit plans	(e) Ex	pense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account	it, other ances
NONE					
	1				
	1				
				 	
	┪				
			 	 	
	+				
				 	
	-				
	<u> </u>	<u> </u>	<u></u>		
Total number of other employees paid over \$50,000				000 DE	0

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Form 990-PF (2015) RAY C MCKINLEY FAMILY FOUNDATION	20-5	604435 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Man Paid Employees, and Contractors (continued)	agers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	 	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities	·	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informati number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	on such as the	Expenses
1 N/A		
2		
3		
4		
D IV DIO		
Part IX-B Summary of Program-Related Investments		A
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	·	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		<u></u>
3		
v		
Total. Add lines 1 through 3	>	0.
		Form 990-PF (2015)

a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 b Program-related investments - total from Part IX-B

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) **b** Cash distribution test (attach the required schedule)

Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

income, Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4

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

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5,000

5.000

1b

2

3a 3b

4

6

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,				
line 7	_			3,533.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010 125.				
b From 2011 469.				
¢ From 2012				
d From 2013				
e From 2014 218.	010			
f Total of lines 3a through e	812.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$ 5,000.			0.	
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)				
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	U.			3,533.
d Applied to 2015 distributable amount	1,467.			3,333.
e Remaining amount distributed out of corpus	1,407.			0.
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			<u> </u>
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,279.			1
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable		•		
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2016				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	•			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010	105			
not applied on line 5 or line 7	125.			
9 Excess distributions carryover to 2016.	2 15/			
Subtract lines 7 and 8 from line 6a	2,154.			
10 Analysis of line 9: a Excess from 2011 469.				
a Excess from 2011 b Excess from 2012				
c Excess from 2013				
d Excess from 2014 218.				
e Excess from 2015 1, 467.				
		· · · · · · · · · · · · · · · · · · ·		

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Form **990-PF** (2015)

		ILY FOUNDAT:			04435 Page 10
Part XIV Private Operating Fo			A, question 9)	N/A	
1 a If the foundation has received a ruling or	r determination letter that	it is a private operating			
foundation, and the ruling is effective for			▶ ∟		
b Check box to indicate whether the found	lation is a private operatir	ng foundation described in		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		ļ <u>-</u>
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c 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					
·				- 	
e 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:					1
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					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on		<u> </u>			
securities loans (section					
512(a)(5)), or royalties)				-	
(2) Support from general public and 5 or more exempt	İ				
organizations as provided in					
section 4942(j)(3)(B)(iii)		<u></u>			_
(3) Largest amount of support from	•			j	
an exempt organization					
(4) Gross investment income		to this part and a	f the foundation	n had \$5 000 or m	oro in accets
Part XV Supplementary Info	rmation (Comple	ete this part only	ir the foundation	n nau \$5,000 or in	ore in assets
at any time during t	ne year-see insti	ructions.)			
1 Information Regarding Foundation					
a List any managers of the foundation wh	o have contributed more	than 2% of the total conti	ributions received by th	e foundation before the cl	ose of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	section 507(a)(2).)			
NONE				·	
b List any managers of the foundation wh			or an equally large port	ion of the ownership of a	partnership or
other entity) of which the foundation ha	s a 10% or greater intere	st.			
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan	, Scholarship, etc., Pr	ograms:		
Check here ► X if the foundation of	only makes contributions	to preselected charitable	organizations and does	not accept unsolicited rec	uests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indi-	viduals or organizations u	nder other conditions,	complete items 2a, b, c, ar	nd d.
a The name, address, and telephone num	iber or e-mail address of	the person to whom appli	cations should be addr	essed.	
, , , ,		•			
SEE STATEMENT 8					
b The form in which applications should t	oe submitted and informa	ition and materials they sh	nould include:		
c Any submission deadlines:					
	le cuch ac hy accoraches	al areae charitable fields	kinds of institutions or	other factors	
d Any restrictions or limitations on award	s, such as by geographic	ai areas, charnadie neids,	kiilus vi ilistitutions, ol	OMEL IAULUIS.	
523601 11-24-15					Form 990-PF (2015)
020001 1-24-10					

11330319 767246 60280

Supplementary Information (continued)

3 Grants and Contributions Paid During the Y		Payment		·
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				
AMERICAN RED CROSS	NONE	NON-PROFIT	FURTHERANCE OF	
501 MEMORIAL BLVD		ORGANIZATION	ORGANIZATION'S	
MURFREESBORO, TN 37129			PROGRAMS	750
FEEDING AMERICA	NONE	NON-PROFIT	FURTHERANCE OF	
35 EAST WACKER DRIVE, STE 2000		ORGANIZATION	ORGANIZATION'S	
CHICAGO, IL 60601		 	PROGRAMS	500
BOYS & GIRLS CLUB OF RUTHERFORD	NONE	NON-PROFIT	FURTHERANCE OF	
COUNTY		ORGANIZATION	ORGANIZATION'S	
PO BOX 3343			PROGRAMS	
MURFREESBORO, TN 37133			<u> </u>	500
•				
MINDFUL CARE ADULT DAY CARE SERVICES	NONE	NON-PROFIT	FURTHERANCE OF	1
1750 N THOMPSON LANE		ORGANIZATION	ORGANIZATION'S	1
MURFREESBORO, TN 37129			PROGRAMS	1,000
RALSTON UNITED CHURCH OF CHRIST	NONE	RELIGIOUS	FURTHERANCE OF	
7638 MAYWOOD		ORGANIZATION	ORGANIZATION'S	
RALSTON NE 68127			PROGRAMS	1,000
	NTINUATION SHE	ET(S)	▶ 3a	5,000
b Approved for future payment				
NONE				
				-
Total			> 3b	1 0

Part XVI-A	Analysis of Income-Producing Activities
	, and just the modern of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the manner of the m

nter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)	
•	(a)	(b)	(c) Exclu-	(d)	Related or exempt	
1 Program service revenue:	Business code	Amount	sion	Amount	function income	
					· · · · · · · · · · · · · · · · · · ·	
b					· · · · · · · · · · · · · · · · · · ·	
c						
d					 	
	 	 	†··			
e					·	
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments			14			
4 Dividends and interest from securities			14	1,329.		
5 Net rental income or (loss) from real estate:			İ			
a Debt-financed property						
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	523000		. 14	1,042.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory			<u></u>			
11 Other revenue:				1		
a						
b					·	
C						
d						
e						
12 Subtotal. Add columns (b), (d), and (e)		-398		2,371.	0 .	
13 Total. Add line 12, columns (b), (d), and (e)				13	1,973	
(See worksheet in line 13 instructions to verify calculations.)						
Part XVI-B Relationship of Activities to	o the Accon	nplishment of E	xemp	t Purposes		

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).										
ALL	GIFTS AND INVESTMENT INCOME ALL INCLUDED IN ASSETS AVAILABLE FOR										
ALL	MAKING	FU	TURE	GRANTS	•						
	<u> </u>										
	,							•			
					·						
								 -			· · · · · · · · · · · · · · · · · · ·
		-							·		
					<u>-</u>						<u> </u>
			-							- -	
	 										
					<u> </u>						

Sign Here		A M K. L. ature of officer or trustee	preparer (other than taxpayer) is based on all info	PRESI		May the IHS discuss this return with the preparer shown below (see instr.)? X Yes N
Paid Prepa	ırer	Print/Type preparer's name LAWRENCE A. WOLFE Firm's name DO' DONNELL		Date 3/24/20 DIG LLP	self- employed	PTIN P00103921
Use C		Firm's address ► 4815 SOUTH	/	DIG LLP		02)592-3800
						Form 990-PF (20)

Under penalties of periury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge

523622 11-24-15

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation status of show any relationship to Amount any foundation manager Name and address (home or business) recipient or substantial contributor NONE SECOND HARVEST FOOD BANK OF MIDDLE NON-PROFIT FURTHERANCE OF ORGANIZATION'S TENNESSEE ORGANIZATION PROGRAMS 331 GREAT CIRCLE ROAD 500. NASHVILLE TN 37228 SEMPER FI FUND NONE NON-PROFIT FURTHERANCE OF ORGANIZATION'S 825 COLLEGE BLVD, SUITE 102 PMB 609 ORGANIZATION PROGRAMS 750. OCEANSIDE CA 92057 Total from continuation sheets 1 250.

FORM 990-PF	DIVIDENDS	S AND INTER	EST FROM SECUR	RITIES ST	PATEMENT
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	
FEDERATED US GOVT SEC VANGUARD LIFE	233		0. 233.		
STRATEGY	2,138			· ———	· · · · · · · · · · · · · · · · · · ·
TO PART I, LINE 4	2,371	1,04	2. 1,329.	1,329.	
FORM 990-PF		ACCOUNTI	NG FEES	S	TATEMENT
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABL PURPOSES
ACCOUNTANT FEE		600.	600.		0
TO FORM 990-PF, PG	1, LN 16B	600.	600.		0
FORM 990-PF	0.	THER PROFES	SIONAL FEES	S	PATEMENT
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABL PURPOSES
CUSTODIAL ADMIN FEE		2,157.	2,157.		0
TO FORM 990-PF, PG	 1, LN 16C	2,157.	2,157.		0

FORM 990-PF	TAXES				STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOM		
FOREIGN TAX PAID	23.		23.			0.
TO FORM 990-PF, PG 1, LN 18	23.		23.		0.	
FORM 990-PF U.S. AND	STATE/CITY G	OVERNMENT	OBLI	GATIONS	STATEMENT	5
DESCRIPTION	U.S GOV'		вос	OK VALUE	FAIR MARKE VALUE	T
FIXED INCOME MUTUAL FUND		14,943. 14,28		82.		
TOTAL U.S. GOVERNMENT OBLIGA	14,943.	14,282.				
TOTAL STATE AND MUNICIPAL GO	VERNMENT OBL	IGATIONS				
TOTAL TO FORM 990-PF, PART I	·	14,943.	14,2	82.		
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	6
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARKE VALUE	T
EQUITY MUTUAL FUNDS		COST	40,395.		46,580	
TOTAL TO FORM 990-PF, PART I	I, LINE 13	-		40,395.	46,5	80.
FORM 990-PF EXPLANATION C	ONCERNING PA	RT VII-A,	LINE	E 8B	STATEMENT	7

EXPLANATION

NEBRASKA HAS NO FORMAL REQUIREMENT FOR FILING FORM 990-PF WITH STATE AUTHORITIES. INSTEAD, THIS RETURN IS AVAILABLE THROUGH PUBLIC INSPECTION RULES OF NON-PROFIT ORGANIZATIONS. TAXPAYER IS ORGANIZED UNDER THE STATE OF NEBRASKA NOT-FOR-PROFIT STATUTES.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

GREGORY A MCKINLEY 2468 CROSSPARK DRIVE MURFREESBORO, TN 37129

TELEPHONE NUMBER NAME OF GRANT PROGRAM

615-732-6141

NONE

FORM AND CONTENT OF APPLICATIONS

- -NAME, ADDRESS, TELEPHONE NUMBER, IDENTIFICATION NUMBER, AND EXEMPT STATUS.
- -LEGAL STATUS OF ORGANIZATION AND COPY OF PROOF OF EXEMPTION.
- -EXECUTIVE DIRECTOR AND CHAIRMAN OF BOARD.
- -COPY OF LATEST FINANCIAL STATEMENT OR TAX RETURN.
- -BRIEF DESCRIPTION OF NATURE AND ACTIVITIES OF ORGANIZATION.
- -ALL SOURCES OF SUPPORT OTHER THAN THE REQUESTED GRANT.
- -GEOGRAPHIC AREA IN WHICH PROPOSED GRANT RECIPIENT CARRIES ON OR WILL CARRY ON ACTIVITIES.
- -PURPOSE OF PROPOSED GRANT AND WHETHER IT WILL BE UNRESTRICTED OR DESIGNATED TO A PROJECT.
- -LIKELYHOOD OF PROSPECTIVE RECIPIENT REQUESTING GRANT ONE-TIME OR ON A RECURRING BASIS.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE