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

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

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf OMB No 1545-0052

For calend	dar year 2015 or tax year beginning		, and ending		
Name of	foundation			A Employer identification	number
KIM	EDWARDS CHARITABLE FOUR	NDATION, INC.		61-1548449	
Number an	nd street (or PO box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number	··· · · · · · · · · · · · · · · · · ·
2929	MONTAVESTA ROAD			(859) 269-	6698
	own, state or province, country, and ZIP or foreign p	nstal code	, /	C if exemption application is po	
	INGTON, KY 40502			a examplion application is pe	oriding, crisck rid o
	all that apply: Initial return	Initial return of a f	ormer public charity	D 1. Foreign organizations	chack boro
G CHECK	'`' 		ormer public charity	1. Foreign organizations	, CHECK HEIE
	Final return	Amended return		Foreign organizations me check here and attach co	eting the 85% test,
	Address change	Name change		check here and attach co	mputation
	type of organization: X Section 501(c)(3) ex			E If private foundation sta	
		Other taxable private found		under section 507(b)(1)	(A), check here
i Fair mai	rket value of all assets at end of year J Accounti	=	Accrual	F If the foundation is in a	60-month termination
		ther (specify)		under section 507(b)(1)	(B), check here
\$	830 , 886 . (Part I, colu	mn (d) must be on cash l	basis)		
Pärt I	(The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	necessarily equal the amounts in column (a).)	expenses per books	income	ıncome	(cash basis only)
1	Contributions, gifts, grants, etc., received		Arrald Ward	A N/A XX	
	Check X if the foundation is not required to attach Sch. B	A 12 (3 24 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	建 的设计。1980年2月15日	STATE OF THE STATE	
3	Interest on savings and temporary cash investments	1,739.	1,739.		STATEMENT 1
4	Dividends and interest from securities	2,734.	2,734.		STATEMENT 2
5a	Gross rents	·	,		TABLES !!
	Net rental income or (loss)				-5-6-000 A-4-1
	Net gain or (loss) from sale of assets not on line 10	8,104.	91 4 5318, 3038, 304		
al "	Gross sales price for all Q 1 0 /		71 2 37 3 10 3 10 3		********
, le			8,104.		
.	Capital gain net income (from Part IV, line 2)		47 47 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	\$/*()?~W.\\JR}###################################	
•	Net short-term capital gain		77 - 178 - 1		
	Income modifications Grose sales less returns		the standard of the standard o	the mass and assessment and advantage of	77137
	and allowances	jt n n n n		7. 人名英格布罗斯德·	
b	Less Cost of goods sold	() programme 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		李马子的第二章	
C	Gross profit or (loss)				HOLE THE STATE OF
11	Other income				
12	Total. Add lines 1 through 11	12,577.	12,577.		10日本の一方では、
13	Compensation of officers, directors, trustees, etc	0.	0.		0.
14	Other employee salaries and wages				<u></u>
15	Pension plans, employee benefits				
% 16a	Legal fees				
Solution 16a	Accounting fees STMT 3	1,021.	0.		0.
	Other professional fees	<u> </u>			
ш ° 9 17		Pi	-		
.21	Taxes STMT 4)의 112.	0.		0.
istra 19	Taxes STMT 4 Depreciation and depletion MAY 25 20	s 10			
ig 20	Occupancy MAY 20 20	(0)			o. see > , /, /, /,
튕.,	Travel, conferences, and meetings				
₩ 21		<u>, 1</u>			
raj _	Printing and publications	· · · · · · · · · · · · · · · · · · ·			
<u>p</u> 23	Other expenses				
ם 24	Total operating and administrative	4 4 5 5	_		_
	expenses. Add lines 13 through 23	1,133.	0.		0.
23	Contributions, gifts, grants paid	41,400.			41,400.
	Total expenses and disbursements.				
	Add lines 24 and 25	42,533.	0.		41,400.
27	Subtract line 26 from line 12:			` _	
a	Excess of revenue over expenses and disbursements	-29,956.		4	
į.	Net investment income (if negative, enter -0-)		12,577.		
ľ	Adjusted net income (if negative, enter -0-)			N/A	
523501 11-24-15	LHA For Paperwork Reduction Act Notice, see i	nstructions.			Form 990-PF (2015)

For	m 99	0-PF (2015) KIM EDWARDS CHARITABLE	FOUNDATION, IN	NC. 61-	-1548449 Page 2
Б	art	II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End (of year
드	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
		Savings and temporary cash investments	653,415.	623,947.	623,947.
	3	Accounts receivable			\$P\$\$P\$第二十十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二
	ŀ	Less: allowance for doubtful accounts			
	4	Pledges receivable -	The second second		
		Less: allowance for doubtful accounts			
	1 -	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	ļ	disqualified persons			
	7	Other notes and loans receivable		1000	
	ŀ	Less: allowance for doubtful accounts			
S.	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ğ	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 6	218,655.	206,939.	206,939.
	c	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
	1	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis		THE CONTRACTOR OF THE	West Committee of the C
	1	Less accumulated depreciation			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	872,070.	830,886.	830,886.
	17	Accounts payable and accrued expenses			440
	18	Grants payable			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Ŋ	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
=	22	Other liabilities (describe)			
	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.			
Ses	24	Unrestricted			
ğ	25	Temporarily restricted			
Ba	26	Permanently restricted			
Ē		Foundations that do not follow SFAS 117, check here			
Net Assets or Fund Balan		and complete lines 27 through 31.		_	14.0
Š	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	872,070.	830,886.] ",
ş	30	Total net assets or fund balances	872,070.	830,886.] '
	31	Total liabilities and net assets/fund balances	872,070.	830,886.	<u> </u>
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
_				····	
		net assets or fund balances at beginning of year - Part II, column (a), line	30		0.000
	•	it agree with end-of-year figure reported on prior year's return)		1	872,070.
		amount from Part I, line 27a		2	-29,956.
_		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3	 ==	4	842,114.
		eases not included in line 2 (itemize)		PATEMENT 5 5	11,228.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	830,886.
522					Form 990-PF (2015)

Part IV Capital Gains	and Losses for				<u>, 1</u>	IVC .	<u> </u>		1-134	3449	Page 3
				Income	I (b)	How a	coured T	/) D-4-		/ N D-4	
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			1,2	- Puro	cquired chase	(c) Date (mo., d	acquired ay, yr.)	(d) Dat (mo., da			
1a CAPITAL GAINS		,			╁	- Don	ation				
b	<u> </u>										
										•	
d		-									
е											
(e) Gross sales price	(f) Depreciation (or allowa		107	st or other basis expense of sale					ain or (loss) s (f) minus (
a 8,104.	-									8	,104.
b											
C											
d											
е											
Complete only for assets showing	ig gain in column (h)	and owned by the		-					ol. (h) gain		
(i) F.M.V. as of 12/31/69	(j) Adjusted as of 12/3			cess of col. (ı) col. (ı), ıf any			CO		ot less than (from col. (i		
a										8	,104.
b											
С											
d											
е					_		, 				
2 Capital gain net income or (net ca		gaın, also enter ın (loss), enter -0- ın			}	2				8 ,	,104.
3 Net short-term capital gain or (los	ss) as defined in secti	ons 1222(5) and (6	6):		١, ١		İ				
If gain, also enter in Part I, line 8,	\ , ,				M		ľ				
If (loss), enter -0- in Part I, line 8 Part V Qualification U		040/o) for Be	ducad	Tay on Not	الر	3	ont Inge	-m-o	N/A		
\$1 C (30300K)							ent ince				
(For optional use by domestic private	toundations subject	to the section 4940	D(a) tax on	net investment in	come.	.)					
If section 4940(d)(2) applies, leave th	nis part blank.										
Was the foundation liable for the sec	tion 4042 tay on the d	ietrihutahla amour	nt of any vo	or in the bace per	1042						X No
if "Yes," the foundation does not qual					iour					res	NO INO
1 Enter the appropriate amount in					ntries.						
(a) Base period years		(b)		,	(c)		·			(d)	
Base periód years Calendar year (or tax year beginnii	na in) Adjustei	d qualifying distrib	utions	Net value of no			use assets		Distribi (col. (b) divi	ùtión ratio ded by col.	(c))
2014		44,	653.			87	8,440		(1111)		0832
2013			650.				5,290				51565
2012		44,	420.			88	3,954			.05	0251
2011		44,	834.			80	1,567	•		. 05	55933
2010		37,	936.			74	3,849	•		. 05	51000
2 Total of line 1, column (d)								2		. 25	9581
3 Average distribution ratio for the	5-year base period - d	ivide the total on li	ne 2 by 5,	or by the number	of yea	ars					
the foundation has been in exister	nce if less than 5 year	S						3		.05	<u> </u>
			_							753	225
4 Enter the net value of noncharitab	le-use assets for 2013	5 from Part X, line	5					4		/53,	<u>,235.</u>
5 A4 Ib .Ib Lac Ab Lac A										2.0	105
5 Multiply line 4 by line 3								5	_		105.
Enter 19/, of not investment incom	o (19) of Part I line ?	17h)									126
6 Enter 1% of net investment incom	is (176 ULFatti, line 2	נטו						6			126.
7 Add lines 5 and 6								7		રવ	231.
r maa iirias o aria u								'		,	, 4, 5, 4, 6
8 Enter qualifying distributions from	•							8		41,	400.
If line 8 is equal to or greater than	line 7, check the box	in Part VI, line 1b,	, and comp	lete that part using	g a 19	% tax r	ate.				
See the Part VI instructions.									_	000	

	n 990-PF (2015) KIM EDWARDS CHARITABLE FOUNDATION, INC. art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),			15484 see inst		Page 4
		UI 49	40 -	See 11151	ruction	<u>s)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		, , , , , ,	1.70 4 0% S		* 1
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		ئئىب	2 33 374	4	26
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	'	1			26.
	of Part I, line 27b			And the second		3
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	' l	<u> </u>		Like It miles	0.
_	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	}	<u>2</u> 3		1	$\frac{0.}{26.}$
3	Add lines 1 and 2 Subtitle A (income) toy (demostic paction 4047(a)(1) trusts and toyable foundations only. Others enter, 0.)	}	4			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	ŀ	5			26.
5 6	Credits/Payments;	}	- J	Access of the Control	nii daaliide	
_	2015 estimated tax payments and 2014 overpayment credited to 2015				70	
	Exempt foreign organizations - tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868) 6c				D	
	Backup withholding erroneously withheld 6d			2.5		
	Total credits and payments. Add lines 6a through 6d		7			0.
, R	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	Ì	- 8			
a	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		1	26.
10	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	ed 🖢	11			
	art 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 in	tervene i	n	7	W Yes	No
	any political campaign?				1a	Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the de	finition)	7		1b	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials pi	ublished	or	A	SK KEEL	1 (1) 2 (1) 20 (4) 2 (1)
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?				1c	X
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. ▶ \$	0.			數個	Fare
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	n		3		
	managers. ► \$ 0 .			20		
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 incorpor	ation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			<u> </u>	3	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a	Х
	If "Yes," has it filed a tax return on Form 990-T for this year?		N	/A _	4b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			 	5	X
_	If "Yes," attach the statement required by General Instruction T			Ĭ,	548 · 64	147
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.			/**		
	By language in the governing instrument, or		l=	1.3		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with t	ne state	iaw	1	6 X	26
-	remain in the governing instrument?					
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 F	Part XV		ļ.	7 X	e2
0-	Fater the states to which the foundation consists or with which it is required (see particulars)					
ъa	Enter the states to which the foundation reports or with which it is registered (see instructions)		-	34	`	
ı.	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				, .	
0					3b X	
n	of each state as required by General Instruction G? If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)	for calca	dar		3b X	
3	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	UI CAICII	uai		9	X
10					10	X
_''	one drift persons become substantial communities during the tax year. If the attach a schedule using their names and addresses				000 DE	

	•		
orn	1990-PF (2015) KIM EDWARDS CHARITABLE FOUNDATION, INC. 61-154	3449	Page 5
Pa	art VII-A Statements Regarding Activities (continued)		
		Yes	s 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 X	Щ.
	Website address ► N/A		
14	The books are in care of ► KIM EDWARDS AND THOMAS CLAYTON Telephone no. ► (859)	269-66	<u> 598</u>
	Located at ► 2929 MONTAVESTA ROAD, LEXINGTON, KY ZIP+4 ►4)502	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	1	ightharpoons
	and enter the amount of tax-exempt interest received or accrued during the year	N/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,	Yes	No
	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	A CONTRACTOR	
	foreign country	22. 2	
Ŗ	artiVIEB 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 Yes	No
1 a	During the year did the foundation (either directly or indirectly):		18 2.6
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	多袋 法	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		22
	a disqualified person?	7 4	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		1355
	(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		1961
	for the benefit or use of a disqualified person)?		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		
	ıf 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.)		1300
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)? N/A	1b	(a 1.000 to 2 1.7 1
	Organizations relying on a current notice regarding disaster assistance check here		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		
	before the first day of the tax year beginning in 2015?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		4.5
	defined in section 4942(j)(3) or 4942(j)(5)):		3 * 1
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	医静	47, 1 to
	before 2015? Yes X No		1.
	If "Yes," list the years	Standay	.] ' [
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	75 pr	
	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.) N/A	2b	1
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		!
_	P	34,4	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	*** ·	
	during the year? Yes X No		1 1
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after		
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	` .	
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.) N/A		
4-	,,	3b	X
44	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1 47

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 2015?

Form 990-PF (2015)

Form 990-PF (2015) KIM EDWARDS CHARITABLE FO			61-15484	49 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4/20 May Be R	equired (contin	ued)	. 1882 m
5a During the year did the foundation pay or incur any amount to:],	
. (1) Carry on propaganda, or otherwise attempt to influence legislation (section	,		es 🗶 No 🤚	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire		1	V4 26 263
any voter registration 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	n described in section			
4945(d)(4)(A)? (see instructions)		Y	es 🗶 No 🌡	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?	,		es 🗶 No 🧍	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the excentions described i			
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ned		
			es 🗀 No 🖁	
expenditure responsibility for the grant?			ES NO	45 45 4
If "Yes," attach the statement required by Regulations section 53 4945	• •			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	PAY PERMUMS ON		🔽 🦠	
a personal benefit contract?		Y	es 🗶 No 💈	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		 	6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b
Part VIII Information About Officers, Directors, Truster Paid Employees, and Contractors	ees, Foundation Mar	nagers, Highly		
List all officers, directors, trustees, foundation managers and their of the second seco	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	nours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
KIM EDWARDS	to position PRESIDENT/TRE	enter -0-)	compensation	allowances
2929 MONTAVESTA RD	LVESIDENI\IVE	ASUKEK		
	0 50	١ ,	۱ ،	
LEXINGTON, KY 40502	0.50	0.	0.	0.
	SECRETARY			1
2929 MONTAVESTA RD	2 25		١ ,	
LEXINGTON, KY 40502	0.25	0.	0.	0.
	<u> </u>			
	1			
	1			
	1			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none, o	enter "NONE."		
	(b) Title and average		(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	1			
				
	1		·	
				
	1			
	1			
	1			
Total number of other employees paid over \$50,000				0

Form 990-PF (2015) KIM EDWARDS CHARITABLE FOUNDATION	ON, INC. 61	-1548449	Page 7
Partiville Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	ation Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter			
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) C(ompensation
NONE	(5) 1,50 0. 00.1100	10,5	
NONE	\dashv		
	_		
	_	1	
Total number of others receiving over \$50,000 for professional services		•	0
Partix A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant stati	stical information such as the	T	
number of organizations and other beneficiaries served, conferences convened, research papers pro		Expens	ses
1 N/A	, , , , , , , , , , , , , , , , , , , ,		
		\dashv	
		Ⅎ	
^			
2		-{	
		4	
			
3	V	-	
		4	
4		4	
		_	
	<u></u>		
PartIX:Bi Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year or	lines 1 and 2.	Amoui	at
1 N/A			
2	-		
		7	
		1	
All other program-related investments. See instructions.		1	
3			
		7	
		┪	
Total. Add lines 1 through 3	•	†	0.

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

3a

3b

Form 990-PF (2015)

41,400.

41,274.

126.

b Cash distribution test (attach the required schedule)

Adjusted qualifying distributions Subtract line 5 from line 4

4940(e) reduction of tax in those years.

income. Enter 1% of Part I, line 27b

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

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 VI	Gorpus 3	PER PROPERTY AND A PER	2014 "%" "",-4;	2013
1 Distributable amount for 2015 from Part XI, line 7				37,536.
2 Undistributed income, if any, as of the end of 2015	O SECRETARIAN SECTION AND ASSESSMENT OF THE PARTY OF THE	2 1 1 March 27 (1944)	,	77,330.
a Enter amount for 2014 only			0.	
b Total for prior years:	770	31177 *34 *** 31 ***		A WAR AND A PARTY
a rotation prior yours.		0.		
3 Excess distributions carryover, if any, to 2015:	24.6 P.	.9s 1 2 6867	1	4 1 2 2
a From 2010 900.			2 2 4 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b From 2011 4,838.				
c From 2012 382.				
d From 2013 1,535.				
e From 2014 925.				
f Total of lines 3a through e	8,580.		The second	
4 Qualifying distributions for 2015 from	4 3 ft (b . 1534)	25.Hit 37.76.310 33.	3 W Glowin Com	P 1 1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
Part XII, line 4: ►\$ 41,400.				
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior			11 A. C. C.	130,200
years (Election required - see instructions)	ya.	0.		
c Treated as distributions out of corpus				45.74次 · · · · · · · · · · · · · · · · · · ·
(Election required - see instructions)	0.		· (本で)/ (\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
d Applied to 2015 distributable amount	T WAR STORMAN	発展がある。	· [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	37,536.
e Remaining amount distributed out of corpus	3,864.	現るような 直流の		
5 Excess distributions carryover applied to 2015	0.	Street Sept.		0.
(If an amount appears in column (d), the same amount must be shown in column (a).)	TANK THE TANK			
6 Enter the net total of each column as				
indicated below:			The state of the s	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	12,444.	i dá sáiri s		
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				1 1 1
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	in the state of th			
4a from line 2a. Taxable amount - see instr.			0.	5.00
f Undistributed income for 2015. Subtract			<i>~</i> ··,	
lines 4d and 5 from line 1. This amount must	's _i			
be distributed in 2016	-	,	* *	0.
7 Amounts treated as distributions out of		,	***	
corpus to satisfy requirements imposed by			**	į.
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)	J			
8 Excess distributions carryover from 2010	900.		3	2
not applied on line 5 or line 7	300.			*
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	11,544.			
10 Analysis of line 9:	11,344.			
a Excess from 2011 4,838.				
b Excess from 2012 382.				
c Excess from 2013 1,535.				
d Excess from 2014 925.				
e Excess from 2015 3,864.				
	·			·

Part XIV Private Operating Fo		STRUCTIONS and Part V		N/A	L548449 Page 10
1, a If the foundation has received a ruling of		• •		N/A	···· -
foundation, and the ruling is effective for			•		
b Check box to indicate whether the found		•	· ·	4942(j)(3) or	4942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1342(J)(0) 01 L	1 10 12())(0)
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for		1 ' '	 		
each year listed					
b 85% of line 2a			· · · · · · · · · · · · · · · · · · ·		
c Qualifying distributions from Part XII,			<u> </u>		
line 4 for each year listed					
d Amounts included in line 2c not			<u> </u>		
used directly for active conduct of			ļ		
exempt activities					
e Qualifying distributions made directly			 		
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			<u> </u>		
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 securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income			_		
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during th	ne year-see insti	ructions.)			<u>. </u>
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who year (but only if they have contributed m			tributions received by th	e foundation before the o	lose of any tax
SEE STATEMENT 7					
 b List any managers of the foundation who other entity) of which the foundation has 			(or an equally large port	tion of the ownership of a	partnership or
NONE					
2 Information Regarding Contribution Check here ► X if the foundation of the foundation makes gifts, grants, etc. (nly makes contributions	to preselected charitable	organizations and does		
	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	. , , ,	
a The name, address, and telephone numb	er or e-man address or	the person to whom appi	ications should be addre	esseu.	
b The form in which applications should be	e submitted and informa	ition and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields	, kınds of ınstitutions, oi	other factors:	

<u>3b</u>

Total

Part: XVI-A : Analysis of income-Producing Activities	Part XVI-A	Analysis of Income-Producing	Activities
---	------------	------------------------------	-------------------

Enter gross amounts unless otherwise indicated.	(a) Business	usiness income (b) Amount	(C) Exclu- sion	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	tonction income
<u> </u>	-		+ +	···	
b	-		+++		
<u> </u>	1 1	-	+		
d			++		
e	-		+		
g Fees and contracts from government agencies	-		+ +		
g Fees and contracts from government agencies 2 Membership dues and assessments	 	-	+ +	-,	
3 Interest on savings and temporary cash			+		
investments			14	1 739	
4 Dividends and interest from securities	-		14	1,739. 2,734.	
5 Net rental income or (loss) from real estate:		The state of the s		2,731.	
a Debt-financed property		**************************************	4.2.1389	SANSON, THE LANGE SANSON STATE OF THE SANSON SANSON	HALF TO ROUGH MEAN PROPERTY - THE PARTY
b Not debt-financed property			 		
6 Net rental income or (loss) from personal			+		
property					
7 Other investment income			1 1		
8 Gain or (loss) from sales of assets other			+		
than inventory			14	8,104.	
9 Net income or (loss) from special events	<u> </u>		+	0,1010	
10 Gross profit or (loss) from sales of inventory		· · · · ·	1 1		
11 Other revenue		1	1		
a			1 1		
b					
c			1 1		•
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	*****	0.	17.19	12,577.	0.
13 Total. Add line 12, columns (b), (d), and (e)					12,577.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accomr	olishment of Ex	emnt P	urnoses	
Line No. Explain below how each activity for which inc			A contribute	ed importantly to the accom	plishment of
▼ the foundation's exempt purposes (other than	n by providing funds	for such purposes).			
				<u>.</u>	
					
					
					
					
					
		·			
					
					
					
				· · · · · · · · · · · · · · · · · · ·	

2a s1	he four	ndation directly or indirectly affiliated with, or related to, or	nné or more tay-eyempt organiza	ations described	· · ·
		501(c) of the Code (other than section 501(c)(3)) or in s	. •	ations described	Yes X No
			GCHOIT JZ7 ·		163 <u></u>
D 11	165, 60	mplete the following schedule. (a) Name of organization	(b) Type of organization	(c) Description of re	lationchin
			(b) Type of organization	(c) Description of re	iationship
		N/A			
		 			
					
		penalties of perjury, I dectare that I have examined this return, including it is true, code or, and complete. Declaration of preparer (other the			May the IRS discuss this
Sign		Vin Il New La			return with the preparer shown below (see instr.)?
Here		MINTERVINAS	15 May 2016	PRESIDENT	_ X Yes No
	Sign	at re of officer or trustee	Date /	Title	
		Print/Type preparer's name / Prepare		Date Check if	PTIN
		\		self- employed	
Paid		M. MELINDA KARNS 🛝 M🗸 ME	LINDA KARNS	NS/11/16	P00743346
Prep		Firm's name ► BLUE & CO., LLC		Firm's EIN ► 3!	5-1178661
Use (Only				
		Firm's address ▶ 250 WEST MAIN ST	REET, SUITE 29	00	
		LEXINGTON, KY 40	507	Phone no. 859	9-253-1100

Form 990-PF (2015)

3 Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor Name and address (home or business) Purpose of grant or contribution recipient	Amount
show any relationship to Foundation Purpose of grant or any foundation manager status of contribution	Amount
Name and address (home or business) or substantial contributor recipient	
EPISCOPAL DIOCESE OF LEXINGTON NONE 501(C)(3) CHARITABLE	
203 E. FOURTH ST.	
LEXINGTON, KY 40508	250.
GODS PANTRY NONE 501(C)(3) CHARITABLE	
1685 JAGGIE FOX WAY	250
LEXINGTON, KY 40511	250.
GOOD SHEPHERD CHURCH NONE 501(C)(3) CHARITABLE 533 EAST MAIN STREET	
LEXINGTON, KY 40508	2,000.
	•
HONORABLE ORDER OF KY COLONELS NONE 501(C)(3) CHARITABLE	
1717 ALLIANT AVENUE SUITE 14	
LOUISVILLE, KY 40299	250.
KENTUCKY HUMANITIES COUNCIL NONE 501(C)(3) CHARITABLE	
206 EAST MAXWELL STREET	
LEXINGTON, KY 40508	1,000.
KENTUCKY WOMENS WRITERS CONFERENCE NONE 501(C)(3) CHARITABLE	
251 WEST SECOND STREET	4 000
LEXINGTON, KY 40517	1,000.
KY SUICIDE PREVENTION GROUP NONE 501(C)(3) CHARITABLE P.O. BOX 23415	
LEXINGTON, KY 40523-3415	250.
NATIONAL DOWN SYNDROME CONGRESS NONE 501(C)(3) CHARITABLE	
30 MANSELL COURT, SUITE 108	
ROSWELL, GA 30076	5,000.
NATIONAL WOMEN'S HALL OF FAME NONE 501(C)(3) CHARITABLE	
76 FALL STREET	
SENECA FALLS, NY 13148	250.
SAYRE SCHOOL NONE 501(C)(3) CHARITABLE	
203 E. FOURTH ST. LEXINGTON, KY 40507	250.
Total from continuation sheets	33,150.

KIM EDWARDS CHARITABLE FOUNDATION, INC.

61-1548449

3 Grants and Contributions Paid During the	-	1		ļ
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
SISTERS OF CHARITY 6301 RIVERDALE AVENUE	NONE	501(C)(3)	CHARITABLE	
BRONX, NY 10471				2,50
,				
ST. AGNES HOUSE	NONE	501(c)(3)	CHARITABLE	
635 MAXWELTON COURT				
LEXINGTON, KY 40508				1,00
SWEET BLESSINGS	NONE	501(C)(3)	CHARITABLE	
P.O. BOX 23972	•			
LEXINGTON, KY 40523-3972				250
THE AUTHOR'S GUILD	NONE	501(C)(3)	CHARITABLE	
31 EAST 32ND STREET, 7TH FLOOR				
NEW YORK, NY 10016				250
THE WELL 533 EAST MAIN STREET	NONE	501(C)(3)	CHARITABLE	
LEXINGTON, KY 40508				17,200
				, , , , , , , , , , , , , , , , , , ,
THISTLE FARMS	NONE	501(C)(3)	CHARITABLE	
5122 CHARLOTTE PIKE				1
NASHVILLE, TN 37209				1,200
WUKY	NONE	501(C)(3)	CHARITABLE	
340 MCVEY HALL LEXINGTON, KY 40506				250
ELAINGION, RI 40300		 	-	250
	-	 	+	
Total from continuation sheets	-			<u> </u>

FORM 990-PF INTEREST ON SA	VINGS A	ND TEMP	ORARY	CASH IN	VESTMENTS	STATEMENT 1	
SOURCE		(A) REVENUE PER BOOKS		(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME	
SAVINGS AND TEMPORARY INVESTMENTS	-,-	1	.,739.		1,739.		
TOTAL TO PART I, LINE 3		1,739.		1,739.			
FORM 990-PF DIVIDE	NDS AND	INTERE	ST FRO	M SECUR	ITIES	STATEMENT 2	
GROSS SOURCE AMOUN'		CAPITAL GAINS VIDENDS	RE	(A) VENUE BOOKS	(B) NET INVES MENT INCO		
MUTUAL FUND	52.		•	252.	25		
					2,48		
FORM 990-PF	AC	COUNTIN	G FEES			STATEMENT 3	
DESCRIPTION	(EXPE		(B NET IN) VEST-	(C) ADJUSTED NET INCOM	(D) CHARITABLE	
ACCOUNTING FEES		1,021.		0.		0.	
TO FORM 990-PF, PG 1, LN 16	В	1,021.		0.		0.	
FORM 990-PF	990-PF TAXES			STATEMENT 4			
DESCRIPTION	EXPE		(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM		
FILING FEE TAXES (PRIOR YEAR TAX DUE)		15. 97.		0.		0.	
TO FORM 990-PF, PG 1, LN 18		112.		0.		0.	

FORM 990-PF OTHER DECREASES IN NET ASSETS OR I	FUND BALANCES	STATEMENT 5
DESCRIPTION		AMOUNT
DECREASE IN FAIR MARKET VALUE OF INVESTMENTS		11,228.
TOTAL TO FORM 990-PF, PART III, LINE 5		11,228.
FORM 990-PF CORPORATE STOCK		STATEMENT 6
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
278.105 SHS BLACKROCK LATIN AMERICA CL A 336.0720 SHS DODGE & COX BALANCED FD 483.4050 SHS DODGE & COX STOCK FUND 917.2060 SHS NICHOLAS FUND 1782.9460 SHS T ROWE PRICE INTL STOCK FUND 347.3730 SHS TCW GROWTH EQUITIES FUND CL N	8,827. 31,732. 78,684. 57,518. 27,243. 2,935.	8,827. 31,732. 78,684. 57,518. 27,243. 2,935.
TOTAL TO FORM 990-PF, PART II, LINE 10B	206,939.	206,939.

FORM 990-PF	PART XV - LINE 1A	STATEMENT 7
	LIST OF FOUNDATION MANAGERS	

NAME OF MANAGER

KIM EDWARDS THOMAS CLAYTON