

' Department of the Treasury

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

2017

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

Open to Distill Inches

	Internal R	evenue Service	- Go to www.ns.go	WFUIIII330FF IOI IIISUUCU	ions and the latest ini	ormation [0]	en to Rublic Inspection	
	For cale	endar year 2017 or	tax year beginning	, 2017	and ending			
				· · · · · · · · · · · · · · · · · · ·		A Employer identification nu	ımber	
	LEIG	HT M. WILSON	FOUNDATION, INC	23-7015224	-			
	501	WEST MAIN ST,	. STE A		Į.	B Telephone number (see instructions)		
	GLAS	GOW, KY 4214	1			270-651-3013		
			_		. [
						C If exemption application is	s pending, check here 🕒 📙 🛛	
	G Che	ck all that apply	Initial return	Initial return of a form	ner public charity	D 15		
			Final return	Amended return	,	D 1 Foreign organizations, che	eck nere	
			Address change	Name change		2 Foreign organizations mee	eting the 85% test, check	
		al Auga of auganina			a data a A	here and attach computati		
	H Che	ck type of organiza		1(c)(3) exempt private f				
a) nonexempt charitable (E If private foundation statu		
-5		market value of all asset		counting method X C	ash Accrual	under section 507(b)(1)(A	t), check here	
	(troi	n Part II, column (c), line	·	Other (specify)		F If the foundation is in a 6	0-month termination —	
a.fi	►\$	1,288	8,757. (Part I	, column (d) must be or	cash basis)	under section 507(b)(1)(B		
- 1	Rartil	X Analysis of R	evenue and	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Dishursoments	
•			e total of amounts in	expenses per books	income	income	(d) Disbursements for charitable	
		columns (b), (c),	and (d) may not neces-	TARPONICOU POR DOUBLE			purposes	
	'		amounts in column (a)				(cash basis only)	
		(see instructions	• •	25 000	STORY TO A STORY OF STREET STREET	14 th 1 1920 N. Dr. Wales and Sharmon but Vendo	A county subject, restillar and to restrict	
			ants, etc., received (attach schedule)	25,000.	Maria Caracter Carol Maria Caracter Caracter		The state of the s	
		2 Check ► if the f	foundation is not required to attach Sch. B		CHARACTER STATES	译的 [22] [23] 《数据数据》 [23] 数据		
		3 Interest on savings and	f temporary cash investments.			,		
		4 Dividends and interest		25,394.	25, 39	25 204	CARACTER SECTION OF A SECTION O	
		5 a Gross rents		25,394.	25,39	4. 25,394.	AND SECTION OF CONTRACTOR OF C	
		b Net rental income	,	Ziringenzigensterning to use iterate	SPORTER AND SEASONS.	THE COMMITTEE IN COMMITTEE STATE OF THE COMMI	the straight of the control of the c	
	_	or (loss)		新水源的。至1.例如如源水源	FINE CONTRACTOR	The second of th		
	R	b Gross sales price	sale of assets not on line 10	8,476.	Statement 1	THE THE PARTY OF T		
	Ë	assets on line 6a	30,791.		2007年8月8日 福州		THE RESERVE OF THE PARTY OF THE	
			ncome (from Part IV, line 2)	24.6000000000000000000000000000000000000	,	THE SERVED STATES		
	E N U	8 Net short-term cap	•	巴斯兰学的巴巴斯斯州				
	Ĕ	9 Income modification	ons	是中央中央企业公司的	经验证证证		机和现代型和电影	
	_	10 a Gross sales less returns and						
		allowances b Less Cost of		to death of the American marketing of the				
		goods sold						
		C Gross profit or (loss) (attach schedule).		PHAREFARE	1685		
		11 Other income (atta	ach schedule) 📿 🛇				PALL STATE OF THE	
			111110			1		
		12 Total Add lines	1 through 11	58,870.	25,39	4. 25,394.	PERSONAL PROPERTY.	
		13 Compensation of	officers directors, trustees, etc	47,137.	23,56		23,568.	
		14 Other employee s	salaries and wages					
		15 Pension plans en	nployee benefits				_	
~		16 a Legal fees (attach	schedule)					
\sim	Ď	b Accounting fees (a	attach sch)			-	 	
81918	M F	C Other professional fees	ζ	, 			 	
25	3 o N	17 Interest	``````````````````````````````````````		,			
	1 P §	18 Taxes (attach schedule	(See Instrs) See Stm 2	017	01.	3 017	 	
	⇒ R R	1	**	917.	· 91	7. 917.	About the strate in the beauty	
G	NR A A	19 Depreciation (atta schedule) and dep				,		
_ (וֹ וֱמַ	20 Occupancy					5 miles de la company de la co	
K	ılg Ě	21 Travel, conference	es, and meetings					
37	L _{A F}	22 Printing and publi	•					
ZV ~	N X	23 Other expenses (a					 	
Δi		= 2	See Statement 3	21,905.	18,170	5. 18,176.	3,729.	
	ANE S	24 Total operating a		21, 303.	10,17	10,170.	3,123.	
_	É	expenses Add lir		69,959.	42,662	2. 42,662.	27,297.	
<i>"</i>	Č ,	25 Contributions, gifts, gra	D = 1777	46,700.	restriction of the second	A CANADA A PARA A CARA	46,700.	
3	Ō		nd disbursements	40,700.	I was a free far of the said of the said of the said of	Date - A Land Cappendant A September of September 1	40,700.	
30		Add lines 24 and		116,659.	42,662	42,662.	73,997.	
DS990T K		27 Subtract line 26 fr		110,039.	E PRECISE MARKET S	44,002.	TENECOMITEDENC ADVISOR A	
3		a Excess of revenu						
\mathcal{L}		and disbursemen	•	-57,789.				
		b Net investment in	ncome (if negative, enter -0-)	MILLIAN WATER	~			
			ome (if negative, enter 0)		AND AND THE	75 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	WYVARY INVESTA	

G24

(D)	3112	Balance Sheets column should be for end-of-year amounts only	beginning or year		n year
(F.d.)	इस्ट	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	42,594.	53,132.	53,132.
	2	Savings and temporary cash investments	655,484.		
	3	Accounts receivable			
		Less allowance for doubtful accounts ►		•	
	4	Pledges receivable			
	ŀ	Less allowance for doubtful accounts ▶			
	5	Grants receivable .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)		A CALL STREET	
A		Less allowance for doubtful accounts	L. A. C.		
S	8	Inventories for sale or use		٧	
A S S E T	9	Prepaid expenses and deferred charges			
Š	10 a	a Investments — U.S. and state government obligations (attach schedule)		60,000.	60,361.
	_k	nvestments — corporate stock (attach schedule)		167,157.	804,650.
	ı	: Investments — corporate bonds (attach schedule)		360,000.	370,614.
	1	Investments – land, buildings, and			
	''	equipment basis.			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)		-	
	14	Land, buildings, and equipment basis ►			
		Less accumulated depreciation (attach schedule)		ACTIVITIES AND ACTIVITIES ACTIVITIES	
	15	Other assets (describe >			
	16	Total assets (to be completed by all filers — see the instructions Also, see page 1, item l).	698,078.	640,289.	1,288,757.
Ļ	17	Accounts payable and accrued expenses			
A	18	Grants payable			
В	19	Deferred revenue			
Ŀ	20	Loans from officers, directors, trustees, & other disqualified persons			
I T	21	Mortgages and other notes payable (attach schedule)			
1	22	Other liabilities (describe		- ·	
E S	23	Total liabilities (add lines 17 through 22)	0.	ο.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31.	,		
NF	24	Unrestricted			
E U	25	Temporarily restricted			
D	26	Permanently restricted			
ASSETS		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ĔL	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
O E R S	29	Retained earnings, accumulated income, endowment, or other funds	698,078.	640,289.	
RS	30	Total net assets or fund balances (see instructions)	698,078.	640,289.	
	31	Total liabilities and net assets/fund balances (see instructions)	698,078.	640,289.	
Par	tilli	Analysis of Changes in Net Assets or Fund Balance	es		
1	Tota	I net assets or fund balances at beginning of year — Part II, col of-year figure reported on prior year's return)	umn (a), line 30 (must a	agree with	698,078.
2		er amount from Part I, line 27a		2	-57,789.
3		increases not included in line 2 (itemize).		3	37,703.
4		lines 1, 2, and 3			640,289.
5		ases not included in line 2 (itemize).		5	1 223,233.
_ 6		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b),	line 30 6	640,289.

Parl	(a) List and describe t	osses for Tax on Investmenthe kind(s) of property sold (for examp buse, or common stock, 200 shares	le, real estate,	(b) How acquire P — Purchase D — Donation	(mo , day, yr)	(d) Date sold (mo , day, yr)	
1 a	N/A						
b						·	
С							
d							
e							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or ((e) plus (f) m		
a							
b							
С							
d							
е							
	Complete only for assets show	ing gain in column (h) and owned l	by the foundation on 12/31/	69	(I) Gains (Col	(h)	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any		gain minus col (k), I than -0-) or Losses (f	out not less	
a			• • •		-		
b							
c			<u> </u>				
d							
e							
2	Capital gain net income or (ne		enter in Part I, line 7 ter -0- in Part I, line 7		2		
3	Net short-term capital gain or	(loss) as defined in sections 1222(5	_		-		
	If gain, also enter in Part I, lin in Part I, line 8	e 8, column (c) See instructions li	f (loss), enter -0-	. ;	3		
Par	tV Qualification Unde	r Section 4940(e) for Reduce	ed Tax on Net Investm	ent Incon	ne		
Was If 'Ye	es,' the foundation doesn't qual	ction 4942 tax on the distributable a	omplete this part	·	Yes	X No	
1	Enter the appropriate amount in	each column for each year, see the ir	istructions before making any	entries			
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as:	sets	(d) Distribution ratio (col (b) divided by col (c))		
	2016	46,692.	1,13	1,260.		0.04127	
	2015	46,942.	1,12	2,241.		0.04182	
	2014	45,738.	 	5,922.		0.04173	
	2013	47,283.		2,178.		0.04765	
	2012	48,470.		7,623.		0.05225	
2	Total of line 1, column (d).				2	0.22474	
3	Average distribution ratio for the number of years the foundation	5-year base period – divide the total in has been in existence if less that	on line 2 by 5 0, or by the		3	0.04494	
4	Enter the net value of noncha	ritable-use assets for 2017 from Pa	rt X, line 5		4	1,232,494	
5	Multiply line 4 by line 3				5	55, 399	
6	Enter 1% of net investment in	come (1% of Part I, line 27b)			6		
7	Add lines 5 and 6				7	55,399	
8	Enter qualifying distributions f	rom Part XII, line 4			8	73,997	
	If line 8 is equal to or greater the Part VI instructions	an line 7, check the box in Part VI, lin	e 1b, and complete that part (using a 1% ta	x rate See the		

Parl	Excise Tax Based on Investment Income (Section 4940(a), 494	40(b), 4	4940(e), or 4948 — se	e instruction	ns)	
	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N					
	Date of ruling or determination letter (attach copy of letter if necessary –	see in	structions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		-	_1		0.
	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, Ii	ine 12, d	col. (b)			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			2		0.
3	Add lines 1 and 2			3		0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	ns onl	ly, others, enter -0-)	4		0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter	er -0-		5		0.
6	Credits/Payments					
а	2017 estimated tax pmts and 2016 overpayment credited to 2017	6a				
b	Exempt foreign organizations — tax withheld at source	6 b				
С	Tax paid with application for extension of time to file (Form 8868)	6с				
d	Backup withholding erroneously withheld	6 d				
7	Total credits and payments Add lines 6a through 6d			7		0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 22	220 is	attached	8		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			▶ 9		0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		•	▶ 10		
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax		Refunded	<u>* 11 </u>		
Par	Statements Regarding Activities				Tassas ad	
1 a	During the tax year, did the foundation attempt to influence any national, state, of participate or intervene in any political campaign?	or loca	l legislation or did it		Yes 1 a	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political pulsee the instructions for the definition	ırposes	37		1 b	X
	If the answer is 'Yes' to ${\bf 1a}$ or ${\bf 1b}$, attach a detailed description of the activities and copies or distributed by the foundation in connection with the activities	of any	materials published			
	Did the foundation file Form 1120-POL for this year?				1 c	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed			•	学科主教	
	(1) On the foundation			0.		
·	foundation managers •\$ 0.	20,10.10	TO LOX IMPOSOG ON			
2	Has the foundation engaged in any activities that have not previously been repor	ted to	the IRS?		2	X
	If 'Yes,' attach a detailed description of the activities					28.0
3	Has the foundation made any changes, not previously reported to the IRS, in its govern	nina ins	strument, articles			
	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a confor	rmed o	copy of the changes		3	X
	Did the foundation have unrelated business gross income of \$1,000 or more during	ng the	year?		4 a	X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?					IVA
5	Was thore a liquidation, termination, dissolution, or substantial contraction during the year?	•			5	X R REVADOR
_	If 'Yes,' attach the statement required by General Instruction T		ad authory			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) s	saustie	eu eimer			學學
	By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mand with the state law remain in the governing instrument? 	-			6	X
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II,		•		7 X	1
8 a	Enter the states to which the foundation reports or with which it is registered. Se	e insti	ructions			
	KY		·			
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gen (or designate) of each state as required by <i>General Instruction G</i> 2 If 'No,' attach explanation	ieral			8b X	
9	Is the foundation claiming status as a private operating foundation within the me for calendar year 2017 or the tax year beginning in 2017° See the instructions for	aning or Part	of section 4942(j)(3) XIV If 'Yes,' comple	or 4942(j)(5) ete Part XIV	9	X
10	Did any persons become substantial contributors during the tax year $^{\rm 9}$ If 'Yes,' attach a and addresses	sched	ule listing their names		10	X
BAA				F	orm 990-PF (2	

Pai	WIFA Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule See instructions	11	Yes	No 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		Х
13		13	Х	
3.4	Website address ▶ N/A The books are in care of ▶ GILBERT & GILBERT, CPA'S Telephone no ▶ 270-6	<u>-</u>	013	
14	Located at 501 WEST MAIN ST, STE A GLASGOW KY ZIP + 4 42141	21-2	012	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	N/A	,	
	and enter the amount of tax-exempt interest received or accrued during the year		V	N/A
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other innancial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Pa	तं.VII∄ৠ 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.	No.	Yes	No
1 :	During the year, did the foundation (either directly or indirectly)	200	SERIES	藻製
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		27	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
				4.5
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination			
	of government service, if terminating within 90 days) Yes X No			* 2
!	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 Organizations relying on a current notice regarding disaster assistance, check here	1 b	N.	/A
		×.*	新疆	
	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 2017?	1 t	Site For Tay	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
	a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?			
	If 'Yes,' list the years ► 20, 20, 20			
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.)	2 b	N	/A
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	100	100 M	
	► 20 , 20 , 20 , 20			5.72
3	a 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			
	b If 'Yes,' did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation		37.0	
	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		المُسَادِينَةِ ا	Seal?
	determine if the foundation had excess business holdings in 2017)	3 b	<u> </u>	/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could		经完	1
	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	AL		200
BA		4 b orm 99		(2017)
				· · / /

Part:VII:B Statements Regarding Activitie	es for Which Form	4720 May Be Requ	ired (continued)			
5 a During the year, did the foundation pay or incur an					E	Yes	No
(1) Carry on propaganda, or otherwise attempt	t to influence legislation	r (section 4945(e))?	Yes	X No	TOX		100
(2) -Influence the outcome of any specific publi on, directly or indirectly, any voter registrat	c election (see section tion drive?	4955), or to carry	Yes	X No			
(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes?	Yes	X No			
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charıtable, etc , organız	zation described	Yes	X No			
(5) Provide for any purpose other than religious educational purposes, or for the prevention	is, charitable, scientific n of cruelty to children o	, literary, or or animals?	Yes	X No			
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in a c See instructions	the transactions fail to urrent notice regarding di	qualify under the exceptions assist and exceptions are assistance?	otions	_	5 b	N	/A
Organizations relying on a current notice regar	ding disaster assistanc	e, check here	•			100	
c If the answer is 'Yes' to question 5a(4), does t tax because it maintained expenditure respons	sibility for the grant?		N/A Yes	No			
If 'Yes,' attach the statement required by Regu							
6 a Did the foundation, during the year, receive an on a personal benefit contract?			∐Yes	XNo			
b Did the foundation, during the year, pay premi If 'Yes' to 6b, file Form 8870	ums, directly or indirect	tly, on a personal benef	fit contract?		6 b	20/220	X
7 a At any time during the tax year, was the found			<u> </u>	XNo		200	
b If 'Yes,' did the foundation receive any proceed Part VIII [3] Information About Officers, Di				N/A	7 b		
and Contractors	rectors, Trustees,	rounuation manag	jers, migniy Fait	ı Emp	ioyee:	>,	
1 List all officers, directors, trustees, and found	lation managers and th	eir compensation. See	instructions.		-		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benef plans and deferre compensation	_{it} (e)	Expens other a	e acc liowai	ount, nces
See Statement 4							
		31,200.		0.		15,9	937.
				1			
2 Compensation of five highest-paid employees (of	her than those included	on line 1 – see instructio	ns). If none, enter 'NO	NE.'			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benef plans and deferre compensation	_{it} (e)	Expens other a	se acc	ount, nces
None						-	
				_			_
					-	_	
Total number of other employees paid over \$50,000))	-	•	•			Ō

Part	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter 'NONE.'	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None		
<u> </u>		
Total	number of others receiving over \$50,000 for professional services	0
Part	Summary of Direct Charitable Activities	
List the	foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	N/A	
٠.		
2		
3		
3		
4		
7		
Part	SIX-B Summary of Program-Related Investments (see Instructions)	
Desci	ribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
	N/A	-
·	N/A	
2		
_		
All o	ther program-related investments. See instructions	
3		
Total	. Add lines 1 through 3	0.
PAA		Form 990-PF (2017)

Rart X Minimum Investment Return (All domestic foundations must complete this part see instructions.)	. Foreign fo	oundations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	1 -> \ 2 + \ 3 + \ 4 + \	
a Average monthly fair market value of securities.	1 a	1,184,406.
b Average of monthly cash balances	1 b	66,857.
c Fair market value of all other assets (see instructions)	1 c	·
d Total (add lines 1a, b, and c)	1 d	1,251,263.
e Reduction claimed for blockage or other factors reported on lines 1a and	34.33	
1c (attach detailed explanation).	o.[📆	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	1,251,263.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	18,769.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,232,494.
6 Minimum investment return. Enter 5% of line 5	6	61,625.
Part:XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of and certain foreign organizations, check here ☐ and do not complete this part.		ındatıons
1 Minimum investment return from Part X, line 6	1	61,625.
2 a Tax on investment income for 2017 from Part VI, line 5	- 5%	
b Income tax for 2017 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2 c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	61,625.
4 Recoveries of amounts treated as qualifying distributions	4	<u> </u>
5 Add lines 3 and 4	5	61,625.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	61,625.
Part:XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	73,997.
b Program-related investments — total from Part IX-B	1 b	13, 991.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3 a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<u> </u>	73,997.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b. See instructions	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	73,997.
	ــــــــــــــــــــــــــــــــــــــ	13, 991.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the qualifies for the section 4940(e) reduction of tax in those years	ne toundation	

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
Distributable amount for 2017 from Part XI,				
line 7 2 Undistributed income, if any, as of the end of 2017	MARKET PARTY FOR SOME			61,625.
a Enter amount for 2016 only			0.	
b Total for prior years 20 , 20 , 20		0.		
3 · Excess distributions carryover, if any, to 2017				
a From 2012 2, 188.				
b From 2013				
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e	2,188.			
4 Qualifying distributions for 2017 from Part				
XII, line 4 ► \$ 73, 997.				
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2017 distributable amount		建心的体系在发生效		61,625.
e Remaining amount distributed out of corpus	12,372.			
5 Excess distributions carryover applied to 2017	0.			, 0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as				
Indicated below:	14 560			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	14,560.		The state of the 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 the section 4942(a)		-		
tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount — see instructions	MARKET TO THE TOTAL TO SEE	0.		THE PARTY OF THE P
e Undistributed income for 2016 Subtract line 4a from				
line 2a Taxable amount — see instructions				
f Undistributed income for 2017 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2018.				0.
7 Amounts treated as distributions out of	CONTRACTOR			
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 2012 not				
applied on line 5 or line 7 (see instructions)	2,188.			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	12,372.			
10 Analysis of line 9		THE THE PARTY OF T	A Part of the Part	
a Excess from 2013				
b Excess from 2014				
c Excess from 2015				
d Excess from 2016				
e Excess from 2017 12, 372.	安全影響如果多			

3 Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	t	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year See Statement 6				
			.1	
		!		
			·	
Total			► 3a	46,700.
b Approved for future payment				10,700
,				
Total	<u> </u>		► 3b	

nter gross	amounts unless otherwise indicated	Unrelate	d business income	Excluded by	section 512, 513, or 514	(e)
4 Decem		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions)
	am service revenue			code		
-						
<u></u>						·
ď				1		
e						· · · · · · · · · · · · · · · · · · ·
f						
g Fees	and contracts from government agencies	· ·				
2 Mem	pership dues and assessments					
	t on savings and temporary cash investments					
4 Divide	ends and interest from securities			14	25,394.	
	ental income or (loss) from real estate				, .	
	financed property					
	lebt-financed property					
	ntal income or (loss) from personal property			 	·	
	r investment income	<u></u>				
	r (loss) from sales of assets other than inventory			 		8,476
	ncome or (loss) from special events.					
	s profit or (loss) from sales of inventory			1		-, -
	r revenue			+		•
a b						
ь		-				
ď						
e						
	otal Add columns (b), (d), and (e)			- 	25,394.	8,476
		L	·		13	
ıs lotal	 Add line 12, columns (b), (d), and (e) 				13	33,870
See works	sheet in line 13 instructions to verify calculati				•	33,870
See works	sheet in line 13 instructions to verify calculate IFB Relationship of Activities to the	Accomp			es ·	
See works	sheet in line 13 instructions to verify calculate IFB Relationship of Activities to the	Accomp			es ·	
See works Part XVI Line No.	sheet in line 13 instructions to verify calculati	Accomp			es ·	
See works Part XV	sheet in line 13 instructions to verify calculate IFB Relationship of Activities to the	Accomp			es ·	
See works Part XVI Line No.	sheet in line 13 instructions to verify calculate IFB Relationship of Activities to the	Accomp			es ·	
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See works Part XVI Line No.	sheet in line 13 instructions to verify calculate IFB Relationship of Activities to the	Accomp			es ·	

X

Χ

1 b (4)

1 b (5)

1 b (6)

1 c

(6) Performance of services or membership or fundraising solicitations

(4) Reimbursement arrangements

(5) Loans or loan guarantees

יככ ווווט ד	J-PI (2017) LEIGHI M. WILSON FOUNDATION, INC.	23 7013224	1 0	ige .		
Part:XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations						
			Yes	No		
des	the organization directly or indirectly engage in any of the following with any other organization scribed in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, ating to political organizations?					
a Tra	insfers from the reporting foundation to a noncharitable exempt organization of	Later And Paris Service Servic				
(1)	Cash	1 a (1)		X		
(2)	Other assets	1 a (2)		Х		
b Oth	ner transactions	-				
(1)	Sales of assets to a noncharitable exempt organization	1 b (1)		X		
(2)	Purchases of assets from a noncharitable exempt organization	1 b (2)		Х		
(3)	Rental of facilities, equipment, or other assets	1 b (3)		Х		

 \boldsymbol{c} Sharing of facilities, equipment, mailing lists, other assets, or paid employees

(a) Line no. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2 a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No bif Yes, complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties to perjury, I declare that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true. Sign May the IRS discuss	the goods	swer to any of the a s, other assets, or ser saction or sharing ar	vices given by th	e reporting foundation	on It the toun	dation recei	ved less than	fair market v	alue in	arket value of	
2 a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501 (c) of the Code (other than section 501 (c) of in section 527?	(a) Line no.	(b) Amount involved	(c) Name of	noncharitable exempt or	ganization	(d) Des	scription of trans	sfers, transactio	ns, and sh	arıng arrangements	
2 a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501 (c) of the Code (other than section 501 (c) of in section 527?					-						
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b f 'Yes,' complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship				-							
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b f 'Yes,' complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship		-									
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b f 'Yes,' complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship		-									
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b f 'Yes,' complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship											
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b f 'Yes,' complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship							·- · · · · · · · · · · · · · · · · · ·				
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b f 'Yes,' complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship	-	·									
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b f 'Yes,' complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship											
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b f 'Yes,' complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship											
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No b f 'Yes,' complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship											
Under penalties of perjuny, I declare that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete Declaration of plenater (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS discuss this return with the preparer shown below? See instructions See instructions See instructions No No Print/Type preparer's name Print/Type preparer's name	describe	d in section 501(c) of	of the Code (oth	with, or related to, o ner than section 50	ne or more ta 1(c)(3)) or in	x-exempt or section 52	ganizations 7?			Yes XN	lo
Under penalties of perjury. I declare that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete Declaration of planatir (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS discuss this return with the preparer shown below? See instructions X Yes No	(a)	Name of organizati	on	(b) Type of	organızatıon		(c) Description	of relat	ionship	
Sign Here May the IRS discuss this return with the preparer shown below? Signature of officer or trustee Date Title Treasurer Treasur	N/A										
Sign Here May the IRS discuss this return with the preparer shown below? Signature of officer or trustee Date Title Treasurer Treasur											
Sign Here May the IRS discuss this return with the preparer shown below? Signature of officer or trustee Date Title Treasurer Treasur	-								-		
Sign Here May the IRS discuss this return with the preparer shown below? Signature of officer or trustee Date Title Treasurer Treasur											
Sign Here May the IRS discuss this return with the preparer shown below? Signature of officer or trustee Date Title Treasurer Treasur											
Paid MARCIA THOMPSON MARCIA CHOMPSON Self employed P00057534 Preparer Use Only Print/Type preparer's name Reparer's signature Date Check if PTIN self employed P00057534 Firm's name Gilbert & Gilbert, P.S.C. Firm's address 501 West Main St. Ste. A	Sign Here	Man Ho	re that have examin of plenarar (other th		/12/18	P ▶ Tre		the best of my k ledge	nowledge a	May the IRS discus this return with the preparer shown be See instructions	low?
Preparer Use Only MARCIA THOMPSON Firm's name Gilbert & Gilbert, P.S.C. Firm's address 501 West Main St. Ste. A	1 3		me	. Rreparer's signa	ture /	00 10	ate	Check	_f f		1
Preparer Use Only Firm's address Gilbert & Gilbert, P.S.C. Firm's address Gilbert & Gilbert, P.S.C. Firm's address Firm's address Firm's address	Daid			\ A V	/ I // .	The 1			□	P00057534	
Use Only Firm's address 501 West Main St. Ste. A						<u> </u>	· _/ / _	, 			
	•								<u> </u>	00001	
	ose Only	. –						Phone no	(270)	651-3013	

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Form **990-PF** (2017)

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

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

name of the organization		
LEIGHT M. WILSON FOUNDATION,	INC.	23-7015224
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priva	ate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Gener	al Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10) org	ganization can check boxes for both the General Rule and a S	Special Rule See instructions
General Rule		
X For an organization filing Form 990, 990-E property) from any one contributor Comp	Z, or 990-PF that received, during the year, contributions total lete Parts I and II. See instructions for determining a contribu-	aling \$5,000 or more (in money or itor's total contributions
Special Rules		
\square under sections 509(a)(1) and 170(b)(1)(A)(vi)	i01(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supp., that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, the year, total contributions of the greater of (1) \$5,000 or (2) 90-EZ, line 1 Complete Parts I and II	16a, or 16b, and that
For an organization described in section 5 during the year, total contributions of mor purposes, or for the prevention of cruelty	601(c)(7), (8), or (10) filing Form 990 or 990-EZ that received e than \$1,000 exclusively for religious, charitable, scientific, lit to children or animals. Complete Parts I, II, and III	from any one contributor, iterary, or educational
during the year, contributions exclusively \$1,000 If this box is checked, enter here charitable, etc., purpose Don't complete.	501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received for religious, charitable, etc., purposes, but no such contribution the total contributions that were received during the year for any of the parts unless the General Rule applies to this organable, etc., contributions totaling \$5,000 or more during the year	ions totaled more than an <i>exclusively</i> religious, nization becayse
990-PF) but it must answer 'No' on Part IV	the General Rule and/or the Special Rules doesn't file Schedine 2, of its Form 990, or check the box on line H of its Form e filing requirements of Schedule B (Form 990, 990-EZ, or 99	990-EZ or on its Form 990-PF.

	D		-4		. (D
Schedule B (Form 990, 990-EZ, or 990-PF) (2017)	Page		of	1	of Part
Name of organization	Employer	ıdentıfı	cation nu	mber	
LEIGHT M. WILSON FOUNDATION, INC.	23-70	152	24		
Rart Contributors (see instructions) Use duplicate copies of Part I if additional space is needed			-		

radi C PA	Continuators (see instructions) ose duplicate copies of fact in additional space		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LEIGHT M. WILSON TRUST 501 WEST MAIN ST, STE A GLASGOW, KY 42141	\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ - -	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		.\$	Person Payroll Complete Part II for noncash contributions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Page

1 to

of Part II

Name of organization

Employer identification number

LEIGHT M. WILSON FOUNDATION, INC 23-7015224 Partill Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed (b)
Description of noncash property given (a) No. (c) FMV (or estimate) (d) Date received from Part I (See instructions.) N/A (a) No. (c) FMV (or estimate) (b) (d) from Description of noncash property given Date received Part I (See instructions.) (a) No. from (b)
Description of noncash property given (d) Date received (c) FMV (or estimate) Part I (See instructions.) (a) No. from (b) Description of noncash property given (d) Date received (c) FMV (or estimate) (See instructions.) Part I (a) No. (d) Date received (c) FMV (or estimate) (See instructions.) (b) from Description of noncash property given Part I (a) No. from (b) Description of noncash property given (c) FMV (or estimate) (d) Date received Part I (See instructions.)

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

1 to

of Part III

Name of organization Employer identification number LEIGHT M. WILSON FOUNDATION, INC 23-7015224 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions) Use duplicate copies of Part III if additional space is needed (b) Purpose of gift (a) No. from Part I (c) Use of gift (d)
Description of how gift is held N/A (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (b) (d) Purpose of gift Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

2017	Federal Statements	Page 1	
Client 23701522	LEIGHT M. WILSON FOUNDATION, INC	23-7015224	
11/05/18			08 24AN
Statement 1 Form 990-PF, Part I, Line 6a Net Gain (Loss) from Noninv Assets Not Included in Part I	entory Sales Per Books V		
Description: Date Acquired: How Acquired: Date Sold: To Whom Sold: Gross Sales Price: Cost or Other Basis:	150 KNOWLES CORPORATION 7/25/2000 Purchase 8/11/2017 2,200. 2,315.		
Basis Method:	Cost	Gain (Loss)	-115.
Description: Date Acquired: How Acquired: Date Sold: To Whom Sold: Gross Sales Price: Cost or Other Basis: Basis Method:	KY ST MUN POWER BOND 10/19/2011 Purchase 9/01/2017 20,000. 20,000. Cost		
		Gain (Loss)	0.
Description: Date Acquired: How Acquired: Date Sold: To Whom Sold: Gross Sales Price: Cost or Other Basis:	CAPITAL GAINS FROM DIVIDENDS Various Purchase Various 8,591. 0.		
Basis Method:	Cost	Gain (Loss)	8,591.
		Total 🖺	8,476.

Statement 2				
Form 990-PF,	Part	١,	Line	18
Taxes				

		(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted <u>Net Income</u>	(d) Charitable <u>Purposes</u>
TAXES & LICENSES	Total	\$ 917. \$ 917.	\$ 917. \$ 917.	\$ 917. \$ 917.	\$ 0.

2017	Federal Statements	Page 2
Client 23701522	LEIGHT M. WILSON FOUNDATION, INC.	23-7015224
1/05/18		08 24AN
Statement 3 Form 990-PF, Part I, Line 23 Other Expenses		
	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Incom	
ACCOUNTING ADVERTISING INVESTMENT EXPENSES MEETING EXPENSES SECRETARY EXPENSES SUPPLIES	64. 64. 6 16,953. 13,562. 13,56 1,111. 1,111. 1,11 400. 400. 40	
TREASURER EXPENSES	Total $\frac{800.}{\$ 21,905.} = \frac{800.}{\$ 18,176.} = \frac{820.}{\$ 18,176.}$	0.
Statement 4 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trus	Title and Cont Average Hours Compen- bution	
EVELYN HUDSON 1905 DAKOTA DR NOBLESVILLE, IN 46062	Director \$ 5,200. \$ 5.00	0. \$ 2,124.
ALAN H. WILSON 753 STAVE MILL RD SHEPHERDSVILLE, KY 40165	Treasurer 5,200.	0. 970.
STEPHEN K. WILSON 244 CURTIS FORD TRACE	President 5,200.	0. 1,401.

5.00

5.00

Secretary 5.00

BYRON N. WILSON 600 CR 93

HOUSTON, MS 38851

LEIGHT M. WILSON II 9114 GLOVER LANE LOUISVILLE, KY 40242

NORVIN B. WILSON JR 6081 W RIO GRANDE DR BEVERLY HILLS, FL 34465 Vice President 5,200. 0. 3,433.

5,200.

Total \$ 31,200. \$

Vice President 5,200.

990.

7,019.

15,937.

0.

0.

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Client 23701522	LEIGHT M. WILSON FOUNDATION, INC.	23-7015224

08 24AM

Statement 5 Form 990-PF, Part XV, Line 2a-d Application Submission Information

Name of Grant Program:

LEIGHT M. WILSON FOUNDATION, INC

Name:

11/05/18

Care Of:

Street Address:

9114 GLOVER LANE (MAIL ONLY)

City, State, Zip Code:

LOUISVILLE, KY 40242

Telephone:

E-Mail Address:

Form and Content: Submission Deadlines: Restrictions on Awards: NONE NONE

Statement 6 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
S K WINTERS FAMILY SERVICES P O BOX 1233 WEST POINT MS 39773	NONE	Status	CHARITABLE	\$ 1,200.
WHAS CRUSADE FOR CHILDREN 5326 N. PRESTON WHY SHEPHERSVILLE KY 40165	NONE		CHARITABLE	2,200.
PURDUE FOUNDATION 3000 KENT AVE W. LAFAYETTE IN 47905	NONE		EDUCATIONAL	1,000.
SALVATION ARMY 216 W CHESTNUT ST LOUISVILLE KY 40202	NONE		CHARITABLE	450.
ZONETON FIRE DEPARTMENT 5328 N PRESTON HWY SHEPHERDSVILLE KY 40165	NONE		CHARITABLE	200.
WESTERN KY UNIVERSITY COLLEGE HGTS FOUND 1906 COLLEGE HEIGHTS BLVD BOWLING GREEN KY 42101	NONE		EDUCATIONAL	1,000.
HIGHVIEW BAPTIST CHURCH 7711 FEGENBUSH LANE LOUISVILLE KY 40228	NONE		RELIGIOUS	450.
ASSURANCE FOR LIFE 1517 NICHOLASVILLE RD LEXINGTON KY 40503	NONE		CHARITABLE	100.

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Client 23701522	LEIGHT M. WILSON F	23-7015224		
11/05/18 Statement 6 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				08 24AM
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
BLUEGRASS LEGACY 3294 SNAFFLE RD LEXINGTON KY 40513	NONE		CHARITABLE	\$ 4,750.
HOME OF THE INNOCENTS 1100 E MARKET ST LOUISVILLE KY 40206	NONE		CHARITABLE	650.
PRAIRIE VIEW CHRISTIAN CHURCH 8350 E 141 ST FISHERS IN 46038	NONE		RELIGIOUS	2,300.
FIRST BAPTIST CHURCH 10540 W YULEE DR HOMOSASSA FL 34448	NONE		RELIGIOUS	5,500.
HARVEY BROWNE PRESBYTERIA CHURCH 311 BROWNS LANE LOUISVILLE KY 40207	AN NONE		RELIGIOUS	1,000.
ARBOR GROVE BAPTIST CHUR 883 COUNTY RD 93 HOUSTON MS 38851	CH NONE		RELIGIOUS	4,300.
SUNRISE CHILDRENS'S SERV P O BOX 1429 MT. WASHINGTON KY 40047	ICE NONE		CHARITABLE	5,000.
GO INTERNATIONAL 503 WILDER REYNOLDS RD WILMORE KY 40390	NONE		CHARITABLE	900.
CAVERNA EDUCATION FOUNDATION P O BOX 73 HORSE CAVE KY 42749	NONE		EDUCATIONAL	950.
HILDEGARD HOUSE INC 114 ADAMS ST LOUISVILLE KY 40206	NONE		CHARITABLE	200.
SAND CREEK INTERMEDIATE SCHOOL 11550 E 131ST ST FISHERS IN 46038	NONE		EDUCATIONAL	700.
CUMBERLAND RD ELEMENTARY SCHOOL 13535 CUMBLBERLAND RD FISHER IN 46038	NONE		EDUCATIONAL	700.

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Client 23701522	LEIGHT M. WILSON FO	UNDATION,	INC.		23-7015224
Statement 6 (continued) Form 990-PF, Part XV, Line 3a	,				08 24AM
Recipient Paid During the Year Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant		Amount
ADAMS PANTRY C/O HIGHVIEW BAPTIST CHURCH 7711 FEGENBUSH LANE LOUISVILLE KY 40228	NONE		RELIGIOUS	\$	850.
LONG HOLLOW BAPTIST CHURCH 3031 LONG HOLLOW PIKE HENDERSONVILLE TN 37075	H NONE		RELIGIOUS		250.
MICAH CHRISTIAN SCHOOLE 130 SMITH LANE LOUISVILLE KY 40299	NONE		EDUCATIONAL		400.
WOUNDED WARRIORS INC 4899 BELFORT LN STE 300 JACKSONVILLE FL 32256	NONE		CHARITABLE		500.
NORTHWEST BASEBALL CLUB P O BOX 180790 TALLAHASSEE FL 32318	NONE		CHARITABLE		750.
CRAWFORDSVILLE HIGH SCHOO ONE ATHENIAN DR CRAWFORDSVILLE IN 47933	L NONE		EDUCATIONAL		1,800.
LOUISVILLE PHILHARMONIA P O BOX 7485 LOUISVILLE KY 40257	NONE		CHARITABLE		250.
DISABLED AMERICAN VETERAN 3275 ALEXANDRIA PIKE COLD SPRINGS KY 41076	S NONE		CHARITABLE		100.
GIRL SCOUTS OF AMERICA P O BOX 5046 NEW YORK NY 10087	NONE		CHARITABLE		250.
UNIVERSITY OF KENTUCKY 100 FUNKHOUSER BLDG LEXINGTON KY 40506	NONE		EDUCATIONAL		1,100.
CARD CONNECTION 311 BROWNS LANE LOUISVILLE KY 40207	NONE		CHARITABLE		1,000.
BOYD TAVERN FOUNDATION IN P O BOX 183 BOYDTON VA 23917	C NONE		CHARITABLE		100.

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Client 23701522	LEIGHT M. WILSON FOUNDATION, INC.				23-7015224
11/05/18					08 24AM
Statement 6 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year					
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant		Amount_
CENTRAL RAPPAHANNOCK HERITAGE CENTER 900 BARTON ST FREDRECKSBURG VA 22401	NONE		CHARITABLE	\$	100.
CAVE HILL CEMETERY 701 BAXTER AVE LOUISVILLE KY 40204	NONE		CHARITABLE		200.
CHURCH OF THE SAVIOR 1301 BRANNON RD NICHOLASVILLE KY 40356	NONE		RELIGIOUS		500.
SECOND HELPINGS INC 1121 SOUTHEASTERN AVE INDIANAPOLIS IN 46202	NONE		CHARITABLE		1,000.
SUMARITIANS PURSE P O BOX 3000 BOONE NC 28607	NONE		EDUCATIONAL		2,000.
SOUTH CENTRAL CULTURAL CENTER 200 W WATER ST GLASGOW KY 42141	NONE		EDUCATIONAL		1,000.
HART CO HISTORICAL SOCIETY 109 MAIN ST MUNFORDVILLE KY 42765	NONE		CHARITABLE		1,000.
			To	tal 🕏	46,700.

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