




Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1 Cash—non-interest-bearing	20	20	20		
	2 Savings and temporary cash investments	112,259	306,916	306,916		
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	5 Grants receivable					
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)					
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____					
	8 Inventories for sale or use					
	9 Prepaid expenses and deferred charges					
	10a Investments—U S and state government obligations (attach schedule)	410,285	460,215	454,604		
	b Investments—corporate stock (attach schedule)	5,862,688	6,053,341	8,922,236		
	c Investments—corporate bonds (attach schedule)	1,936,934	1,936,278	1,908,769		
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	12 Investments—mortgage loans					
	13 Investments—other (attach schedule)					
	14 Land, buildings, and equipment basis ▶ _____ 26,014 Less accumulated depreciation (attach schedule) ▶ 26,014					
15 Other assets (describe ▶ _____)	 1					
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	8,322,187	8,756,770	11,592,545			
Liabilities	17 Accounts payable and accrued expenses	2,732	2,779			
	18 Grants payable					
	19 Deferred revenue					
	20 Loans from officers, directors, trustees, and other disqualified persons					
	21 Mortgages and other notes payable (attach schedule)					
	22 Other liabilities (describe ▶ _____)	 1				
	23 Total liabilities (add lines 17 through 22)	2,732	2,780			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24 Unrestricted					
	25 Temporarily restricted					
	26 Permanently restricted					
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.					
	27 Capital stock, trust principal, or current funds					
	28 Paid-in or capital surplus, or land, bldg , and equipment fund					
	29 Retained earnings, accumulated income, endowment, or other funds	8,319,455	8,753,990			
30 Total net assets or fund balances (see instructions)	8,319,455	8,753,990				
31 Total liabilities and net assets/fund balances (see instructions) .	8,322,187	8,756,770				

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	8,319,455
2 Enter amount from Part I, line 27a	2	434,533
3 Other increases not included in line 2 (itemize) ▶ _____ 	3	2
4 Add lines 1, 2, and 3	4	8,753,990
5 Decreases not included in line 2 (itemize) ▶ _____	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	8,753,990

Part IV Capital Gains and Losses for Tax on Investment Income

(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)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a US BANK ACCT 3525	P	2001-01-01	2017-01-01
b HILLIARD LYONS	P	2001-01-01	2017-01-01
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 340,846		291,365	49,481
b 1,099,939		955,317	144,622
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			49,481
b			144,622
c			
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	194,103
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions 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 assets	(d) Distribution ratio (col (b) divided by col (c))
2016	433,800	9,744,101	0 04452
2015	402,821	9,288,620	0 04337
2014	461,496	9,202,432	0 05015
2013	337,510	8,520,635	0 03961
2012	355,011	7,806,031	0 04548

2 Total of line 1, column (d)	2	0 223125
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 044625
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	10,551,428
5 Multiply line 4 by line 3	5	470,857
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	4,398
7 Add lines 5 and 6	7	475,255
8 Enter qualifying distributions from Part XII, line 4	8	498,879

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	4,398
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	4,398
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	4,398
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	8,000
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	8,000
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	3,602
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ 3,602 Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
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 ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	Yes
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	No
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ KY _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part VII-A 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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	13	Yes	
14	The books are in care of ► <u>ANDERSON JONES CPAs PSC</u> Telephone no ► <u>(606) 564-6260</u>			

Located at ► 1 WEST MCDONALD PKWY MAYSVILLE KY MAYSVILLE KY ZIP+4 ► 41056

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here	<input type="checkbox"/>		
	and enter the amount of tax-exempt interest received or accrued during the year	► 15		
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 financial account in a foreign country?	16	Yes	No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," enter the name of the foreign country ►			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
	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 2017?	1c		No
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?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	If "Yes," list the years ► 20____, 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)	2b		No
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	If "Yes," did it have excess business holdings in 2017 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 2017).	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2017?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?		5b	No
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	No
	<i>If "Yes" to 6b, file Form 8870</i>			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

Total number of other employees paid over \$50,000. ▶

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		

Total number of others receiving over \$50,000 for professional services. ▶

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 DONATIONS TO LOCAL CHARITIES	287,792
2 SCHOLARSHIPS	169,928
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	10,486,785
b	Average of monthly cash balances.	1b	225,325
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	10,712,110
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	10,712,110
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	160,682
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	10,551,428
6	Minimum investment return. Enter 5% of line 5.	6	527,571

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	527,571
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	4,398
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	4,398
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	523,173
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	523,173
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	523,173

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.	1a	498,879
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	498,879
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	4,398
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	494,481

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				523,173
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			94,081	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2017				
a From 2012.				
b From 2013.				
c From 2014.				
d From 2015.				
e From 2016.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ <u>498,879</u>				
a Applied to 2016, but not more than line 2a			94,081	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2017 distributable amount.				404,798
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2017 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
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.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
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				118,375
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2013.				
b Excess from 2014.				
c Excess from 2015.				
d Excess from 2016.				
e Excess from 2017.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on 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 Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:	
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here <input type="checkbox"/> if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d	
a The name, address, and telephone number or email address of the person to whom applications should be addressed	
See Additional Data Table	
b The form in which applications should be submitted and information and materials they should include	
See Additional Data Table	
c Any submission deadlines	
See Additional Data Table	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors	
See Additional Data Table	

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	457,720
b <i>Approved for future payment</i>				
Total			3b	

Enter gross amounts unless otherwise indicated

Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
Enter gross amounts unless otherwise indicated				
1 Program service revenue				
a _____				
b _____				
c _____				
d _____				
e _____				
f _____				
g Fees and contracts from government agencies				
2 Membership dues and assessments.				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities.				305,224
5 Net rental income or (loss) from real estate				
a Debt-financed property.				
b Not debt-financed property.				
6 Net rental income or (loss) from personal property				
7 Other investment income.				
8 Gain or (loss) from sales of assets other than inventory				194,103
9 Net income or (loss) from special events				
10 Gross profit or (loss) from sales of inventory				
11 Other revenue a _____				
b _____				
c _____				
d _____				
e _____				
12 Subtotal Add columns (b), (d), and (e). . .				499,327
13 Total. Add line 12, columns (b), (d), and (e).				499,327

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes[illegible]

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a 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 ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I 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 preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2018-07-11	*****
	Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
--

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	MARSHA JONES				P01202748
	Firm's name ▶ ANDERSON JONES CPAS PSC				Firm's EIN ▶ 45-3717908
Firm's address ▶ 1 West McDonald Pkwy 3-B Maysville, KY 41056					Phone no (606) 564-6260

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JAMES DOWNING	Director 0 00	0		
1020 CHETFORD DRIVE LEXINGTON, KY 40509				
MICHAEL CLARKE	President 0 00	0		
119 SUTTON STREET MAYSVILLE, KY 41056				
JOHN HUTCHINGS	Secretary 0 00	0		
PO BOX 86 MAYSLICK, KY 41055				
KAREN RAVENCRAFT	Treasurer 0 00	0		
3182 MINERVA TUCKAHOE ROAD DOVER, KY 41034				
JOHN G PARKER	Director 0 00	0		
41 HACKETT RIDGE BROOKSVILLE, KY 41004				
ROBERT CANADA	Director 0 00	0		
6493 KY 419 MAYSLICK, KY 41055				
KIRK TOLLE	Director 0 00	0		
658 HILLCREST ROAD MAYSVILLE, KY 41056				
ANN TOMLIN	Director 0 00	0		
289 SHANNON LANE MAYSVILLE, KY 41056				
DOUGLAS HENDRICKSON	Vice President 0 00	0		
180 EDMONT ROAD MAYSVILLE, KY 41056				
CINDY ORME	Director 0 00	0		
904 RIDGEWOOD DRIVE MAYSVILLE, KY 41056				
KATHLEEN LOFTON	Director 0 00	0		
1625 MARTHA ANN DRIVE MAYSVILLE, KY 41056				
CJ HUNTER	Director 0 00	0		
PO BOX 203 WASHINGTON, KY 41096				
PETER CHAMNESS	Director 0 00	0		
1745 FRIENDSHIP RD ABERDEEN, OH 45101				
RONALD RICE	Director 0 00	0		
8020 MARSHALL DRIVE MAYSVILLE, KY 41056				
LLOYD SCHILTZ	Executive Direc 25 00	31,744		
ONE W MCDONALD PKWY MAYSVILLE, KY 41056				

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
<div data-bbox="24 595 1485 720">DR JOSHUA OWENS</div> <div data-bbox="24 720 1485 953">2303 GLENDALE DRIVE MAYSVILLE, KY 41056</div>	Director 0 00	0		

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

- a** The name, address, and telephone number of the person to whom applications should be addressed

HAYSWOOD FOUNDATION
ONE W MCDONALD PKWY
MAYSVILLE, KY 41056
(606) 563-9333

- b** The form in which applications should be submitted and information and materials they should include

REQUEST BY CALLING THE OFFICE AT (606) 563-9333

- c** Any submission deadlines

AUGUST 1ST

- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

GRANTS ARE ONLY AWARDED TO ORGANIZATIONS RECOGNIZED BY THE IRS AS ABLE TO RECEIVE TAX-DEDUCTIBLE CONTRIBUTIONS FROM INDIVIDUALS PREFERENCE IS GIVEN TO THOSE QUALIFYING UNDER SECTION 501(C)(3) GRANTS MAY BE MADE TO NON-PROFIT ORGANIZATIONS IN A SEVEN COUNTY AREA INCLUDING BRACKEN, FLEMING, LEWIS, MASON & ROBERTSON COUNTIES IN KENTUCKY AND ADAMS AND BROWN COUNTIES IN OHIO

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

- a** The name, address, and telephone number of the person to whom applications should be addressed

HAYSWOOD FOUNDATION INC
ONE W MCDONALD PKWY SUITE 3A
MAYSVILLE, KY 41056
(606) 563-9333

- b** The form in which applications should be submitted and information and materials they should include

AVAILABLE BY CONTACTING THE OFFICE AT (606) 563-9333

- c** Any submission deadlines

APRIL 26TH

- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

THE SELECTION PROCESS IS BASED ON FINANCIAL NEED, ACADEMICS AND EXTRA-CURRICULAR ACTIVITIES TO BE CONSIDERED, A 2.50 CUMULATIVE GRADE POINT AVERAGE OR BETTER IS REQUIRED

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

- a** The name, address, and telephone number of the person to whom applications should be addressed

HAYSWOOD FOUNDATION INC
ONE W MCDONALD PKWY SUITE 3A
MAYSVILLE, KY 41056
(606) 563-9333

- b** The form in which applications should be submitted and information and materials they should include
REQUEST BY CALLING THE OFFICE AT (606) 563-9333

- c** Any submission deadlines
APRIL 26TH

- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

YOU MUST BE UNDER AGE 25 AT THE TIME OF THE INITIAL APPLICATION SCHOLARSHIPS ARE NOT AWARDED FOR POST-GRADUATE STUDIES MUST BE A MEMBER OF THE CURRENT GRADUATING CLASS AT MASON COUNTY HIGH SCHOOL SCHOLARSHIP MAY BE RENEWED FOR UP TO THREE ADDITIONAL YEARS APPLICANTS MUST BE PLANNING TO ATTEND AN ACCREDITED US COLLEGE OR UNIVERSITY AS A FULL-TIME STUDENT SELECTION IS BASED ON ACADEMICS, EXTRA-CURRICULAR ACTIVITIES AND COMMUNITY INVOLVEMENT APPLICANTS MUST HAVE A WEIGHTED CUMMULATIVE GRADE POINT AVERAGE OF 3.5 OR HIGHER AND AN ACT SCORE OF 25 OR HIGHER TO BE CONSIDERED RECIPIENTS IN COLLEGE MUST MAINTAIN A GRADE POINT AVERAGE OF 3.0 OR HIGHER TO RETAIN

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

- a** The name, address, and telephone number of the person to whom applications should be addressed

HAYSWOOD FOUNDATION INC
ONE W MCDONALD PKWY SUITE 3A
MAYSVILLE, KY 41056
(606) 563-9333

- b** The form in which applications should be submitted and information and materials they should include
REQUEST BY CALLING THE OFFICE AT (606) 563-9333

- c** Any submission deadlines
APRIL 26TH

- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
APPLICANT OR APPLICANT'S PARENTS MUST HAVE A PRINCIPAL RESIDENCE IN MASON COUNTY THE SELECTION PROCESS IS BASED ON FINANCIAL NEED, ACADEMICS AND EXTRA-CURRICULAR ACTIVITIES TO BE CONSIDERED, HIGH SCHOOL STUDENTS MUST HAVE A 3.0 CUMULATIVE GRADE POINT AVERAGE OR BETTER, COLLEGE APPLICANTS MUST HAVE A 2.50 CUMULATIVE GRADE POINT AVERAGE OR BETTER

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

- a** The name, address, and telephone number of the person to whom applications should be addressed

HAYSWOOD FOUNDATION INC
ONE W MCDONALD PKWY SUITE 3A
MAYSVILLE, KY 41056
(606) 563-9333

- b** The form in which applications should be submitted and information and materials they should include

REQUEST BY CALLING THE OFFICE AT (606) 563-9333

- c** Any submission deadlines

APRIL 26TH

- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

APPLICANTS MUST HAVE GRADUATED FROM AN ACCREDITED HIGH SCHOOL IN MASON COUNTY, KY THE SELECTION PROCESS IS BASED ON FINANCIAL NEED, ACADEMICS AND EXTRA-CURRICULAR ACTIVITIES HIGH SCHOOL APPLICANTS MUST HAVE A 3.0 GRADE POINT AVERAGE OR BETTER

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

- a** The name, address, and telephone number of the person to whom applications should be addressed

HAYSWOOD FOUNDATION INC
ONE W MCDONALD PKWY SUITE 3A
MAYSVILLE, KY 41056
(606) 563-9333

- b** The form in which applications should be submitted and information and materials they should include

REQUEST BY CALLING THE OFFICE AT (606) 563-9333

- c** Any submission deadlines

APRIL 26TH

- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

TO BE ELIGIBLE, APPLICANTS MUST HAVE GRADUATED FROM ST PATRICK'S OR MASON COUNTY HIGH SCHOOL THE SELECTION PROCESS IS BASED ON FINANCIAL NEED, ACADEMICS AND EXTRA-CURRICULAR ACTIVITIES HIGH SCHOOL APPLICANTS MUST HAVE A 2.5 CUMULATIVE GRADE POINT AVERAGE OR BETTER TO BE CONSIDERED

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

- a** The name, address, and telephone number of the person to whom applications should be addressed

HAYSWOOD FOUNDTION INC
ONE W MCDONALD PKWY SUITE 3A
MAYSVILLE, KY 41056
(606) 563-9333

- b** The form in which applications should be submitted and information and materials they should include
REQUEST BY CALLING THE OFFICE AT (606) 563-9333

- c** Any submission deadlines
APRIL 25TH

- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors
APPLICANT MUST BE A CURRENT OR PAST MEMBER OF THE GRADUATING CLASS OF BRACKEN COUNTY HIGH SCHOOL FIRST-TIME RECIPIENTS WILL BE SELECTED FROM THE CURRENT HIGH SCHOOL GRADUATING CLASS APPLICANT MUST BE PLANNING TO ATTEND UNDERGRADUATE COLLEGE OR UNIVERSITY WITHIN KY THE SELECTION PROCESS IS BASED ON FINANCIAL NEED, ACADEMICS AND EXTRA-CURRICULAR ACTIVITIES

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

- a** The name, address, and telephone number of the person to whom applications should be addressed

HAYSWOOD FOUNDATION INC
ONE W MCDONALD PKWY SUITE 3A
MAYSVILLE, KY 41056
(606) 563-9333

- b** The form in which applications should be submitted and information and materials they should include

REQUEST BY CALLING THE OFFICE AT 606-564-9333


- c** Any submission deadlines

APRIL 19TH

- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

INITIALLY THE APPLICANT MUST BE A MEMBER OR THE CURRENT GRADUATING CLASS OF MASON COUNTY HIGH SCHOOL, ST PATRICK'S HIGH SCHOOL, OR RIPLEY-UNION-LEWIS-HUNTINGTON HIGH SCHOOL AFTER INITIAL RECEIPT, THE SCHOLARSHIP MAY BE RENEWED FOR UP TO THREE ADDITIONAL YEARS, FOLLOWING SUBMISSION OF AN APPLICATION FOR CONTINUED RECEIPT APPLICANTS MUST BE PLANNING TO ATTEND AN ACCREDITED COLLEGE OR UNIVERSITY IN THE UNITED STATES THE SELECTION PROCESS IS BASED ON FINANCIAL NEED, ACADEMICS, EXTRA-CURRICULAR AND CO-CURRICULAR ACTIVITIES, AND COMMUNITY SERVICE APPLICANTS MUST HAVE A WEIGHTED CUMMULATIVE GRADE POINT AVERAGE OF 3.0 OR HIGHER MUST MAINTAIN A COLLEGE GPA AVERAGE OF 2.5 OR HIGHER IN ORDER TO RETAIN THE SCHOLARSHIP


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DOWNING VARIOUS SCHOLARSHIP PROGRAM VARIOUS MAYSVILLE, KY 41056	NONE	STUDENTS	EDUCATION	169,928
LIMESTONE FAMILY YMCAUS 68 MAYSVILLE, KY 41056	NONE	501 C 3	COMMUNITY DEVELOPMENT	25,000
MAYSVILLE PLAYERSSECOND STREET MAYSVILLE, KY 41056	NONE	501 C 3	COMMUNITY ACTIVITIES	50,038
OHIO VALLEY ARTIST GUILD ONE W MCDONALD PKWY MAYSVILLE, KY 41056	NONE	501 C 3	COMMUNITY DEVELOPMENT	2,707
TOM BROWNING BOYS AND GIRLS CLUB MAPLE LEAF MAYSVILLE, KY 41056	NONE	501 C 3	YOUTH RECREATION	30,000
Total 				457,720
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MAYSVILLE INITIATIVES600 CLARK ST MAYSVILLE, KY 41056	NONE	501 C 3	COMMUNITY DEVELOPMENT	25,000
LICKING VALLEY COLLEGEUS HWY 68 MAYSVILLE, KY 41056	NONE	501 C 3	EDUCATION	10,000
ST AUGUSTINE SCHOOL 110 E 3RD STREET MAYSVILLE, KY 41056	NONE	501 C 3	EDUCATION	10,900
LIMESTONE MINISTRIES107 E 3RD ST MAYSVILLE, KY 41056	NONE	501 C 3	COMMUNITY DEVELOPMENT	5,000
CANCER FIGHTERS UNITED4209 US 62 MAYSVILLE, KY 41056	NONE	501C3	COMMUNITY HEALTH/WELFARE	2,000
Total ▶ 3a				457,720

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BUFFALO TRACE CHILDRENS ADVOCACY 224 LIMESTONE STREET MAYSVILLE, KY 41056	NONE	501C3	PROTECTION OF YOUTH	6,300
ST PATRICK SCHOOL 318 LIMESTONE STREET MAYSVILLE, KY 41056	NONE	501C3	EDUCATION	14,597
WOMENS CRISIS CENTER 111 E 3RD STREET MAYSVILLE, KY 41056	NONE	501C3	COMMUNITY HEALTH/WELFARE	2,750
MAYSVILLE MASON CO LIBRARY 218 E THIRD STREET MAYSVILLE, KY 41056	NONE	501C3	EDUCATION	25,000
MASON COUNTY CHAPTER 1 W MCDONALD PKWY MAYSVILLE, KY 41056	NONE		COMMUNITY DEVELOPMENT	10,000
Total ► 3a				457,720

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BRACKEN COUNTY HISTORICAL SOCIETY 207 MADISON ST BROOKSVILLE, KY 41004	NONE		COMMUNITY DEVELOPMENT	8,000
WALD PARK INC MAYSVILLE, KY 41056	NONE		Community Development	10,000
AUGUSTA ART GUILD AUGUSTA, KY 41002	NONE		Community Development	10,000
JOHN P PARKER HISTORICAL MAYSVILLE, KY 41056	NONE		COMMUNITY DEVELOPMENT	15,000
PREGNANCY RESOURCE CENTER MAYSVILLE MAYSVILLE, KY 41056	NONE		COMMUNITY HEALTH/WELFARE	5,000
Total  3a				457,720

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TRI COUNTY SHRINE CLUB 1 W MCDONALD PKWY MAYSVILLE, KY 41056	NONE		COMMUNITY DEVELOPMENT	3,000
KY SHAKESPEARE INC 323 W BROADWAY LOUISVILLE, KY 40202	NONE		ARTS	5,000
CIRCLE H INC PLEASANT RIDGE RD MAYSVILLE, KY 41056	NONE		COMMUNITY HEALTH/WELFARE	5,000
KY HUMANITIES COUNCIL 206 E MAXWELL ST LEXINGTON, KY 40508	NONE		HUMANITIES	7,500
Total ▶ 3a				457,720

TY 2017 Accounting Fees Schedule**Name:** HAYSWOOD FOUNDATION INC**EIN:** 23-7345996**Software ID:** 17005038**Software Version:** 2017v2.2**Accounting Fees Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL SERVICES	6,740	0	6,740	0

**TY 2017 Land, Etc.
Schedule****Name:** HAYSWOOD FOUNDATION INC**EIN:** 23-7345996**Software ID:** 17005038**Software Version:** 2017v2.2

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Machinery and Equipment	26,014	26,014		

TY 2017 Other Expenses Schedule**Name:** HAYSWOOD FOUNDATION INC**EIN:** 23-7345996**Software ID:** 17005038**Software Version:** 2017v2.2**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
COPIER MAINTENANCE	653		131	522
INSURANCE	2,063		413	1,650
INTERNET ACCESS	322		64	257
MEETING EXPENSE	625		125	500
SUPPLIES	1,336		267	1,069

TY 2017 Other Increases Schedule**Name:** HAYSWOOD FOUNDATION INC**EIN:** 23-7345996**Software ID:** 17005038**Software Version:** 2017v2.2

Description	Amount
ROUNDING	2

TY 2017 Other Professional Fees Schedule**Name:** HAYSWOOD FOUNDATION INC**EIN:** 23-7345996**Software ID:** 17005038**Software Version:** 2017v2.2

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEE-HILLIARD LYONS	29,364	29,364	0	0
INVESTMENT FEES-US BANK	30,190	30,190	0	0

TY 2017 Taxes Schedule**Name:** HAYSWOOD FOUNDATION INC**EIN:** 23-7345996**Software ID:** 17005038**Software Version:** 2017v2.2

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL INCOME TAX	3,069		3,069	
PAYROLL TAXES	2,459		492	1,967
TAX AND LICENSE	203		203	

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491192003058	
<div>Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small></div>		<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990</div>			<div>OMB No 1545-0047</div> <div>2017</div>
		<div>Name of the organization HAYSWOOD FOUNDATION INC</div>			<div>Employer identification number 23-7345996</div>
<div>Organization type (check one)</div>					
<div>Filers of:Section:</div> <div>Form 990 or 990-EZ<div><input type="checkbox"/> 501(c)() (enter number) organization</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation</div><div><input type="checkbox"/> 527 political organization</div></div> <div>Form 990-PF<div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div><div><input type="checkbox"/> 501(c)(3) taxable private foundation</div></div>					
<div>Check if your organization is covered by the General Rule or a Special Rule.</div> <div>Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions</div>					
<div>General Rule</div> <div><input checked="" type="checkbox"/> For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.</div>					
<div>Special Rules</div> <div><input type="checkbox"/> For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹ 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.</div> <div><input type="checkbox"/> For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.</div> <div><input type="checkbox"/> For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$</div>					
<div>Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).</div>					
<div>For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF</div> <div>Cat No 30613X</div> <div>Schedule B (Form 990, 990-EZ, or 990-PF) (2017)</div>					

Name of organization HAYSWOOD FOUNDATION INC	Employer identification number 23-7345996
--	---

Part I **Contributors** (See instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	VIRGINIA BROWNING 1 W MCDONALD PKWY MAYSVILLE, KY41056	\$ 500,729	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization HAYSWOOD FOUNDATION INC	Employer identification number 23-7345996
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Part II	Noncash Property (See instructions) Use duplicate copies of Part II if additional space is needed
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	7225 SHARES EMERSON STOCK	\$ 500,729	2017-12-27
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Name of organization HAYSWOOD FOUNDATION INC	Employer identification number 23-7345996
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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
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	<div></div> <div></div>	<div></div> <div></div>	