Department of the Treasury

Return of Private Foundation

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

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

		ndar year 2017 or tax year beginning		, and e	nding		- Sport to 1 dans maposmen
		- 				A Employer identification	number
Name of foundation BETH AND THOMAS A. LUPTON A Employer identification nu							
_ F	'AM	ILY FOUNDATION	26-1284779				
Nu	mber a	and street (or P.O. box number if mail is not delivered to street	address)		Room/suite	B Telephone number	
E	•	O. BOX 250				423/894-34	20
		own, state or province, country, and ZIP or foreign po	ostal code			C If exemption application is pe	nding, check here
		SON, TN 37343					
G (Check	all that apply: Initial return	Initial return of a fo	ormer public o	harity	D 1. Foreign organizations,	check here
		Final return	Amended return			Foreign organizations mee check here and attach cor	eting the 85% test,
	^hool	Address change type of organization: X Section 501(c)(3) ex	Name change				
<u> </u>	_		Other taxable private founda	ation	04	E If private foundation state under section 507(b)(1)(
L E		arket value of all assets at end of year J Accounting		Accr	ual (F If the foundation is in a 6	••
			her (specify)	,,,,,,,,	 (under section 507(b)(1)	
	\$		nn (d) must be on cash basi	s.)			
Pa	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the amounts in column (a)	expenses per books	Inco	ome	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received	117,616.	an light de	- ' '	N/A	The second of the second
	2	Check If the foundation is not required to attach Sch. B. Interest on savings and temporary		•		<u> </u>	***
	3	cash investments		-			
	4	Dividends and interest from securities					
	١.	Gross rents		, ,,			
	i _	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	25		(10.10 (10.10) 1 (10.10) 1 (10.10)
Revenue	b	Gross sales price for all assets on line fo			ş.		3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
e e	7	Capital gain net income (from Part IV, line 2)	المناوف الرارا كالمدورة المنازية		0.		1777 黄生状态形态
æ	8	Net short-term capital gain	分钟初时 在1000000000000000000000000000000000000	1987-7881	\$ 1.18 F		1、1991年中国1860年
	9	Income modifications	書の主なるものなって	去十二年	Modern of	,	"你是我们的一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
	10a	Gross sales less returns and allowances	19 · "是一个	T. T. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	3 -20	,	· January Committee
	b	Less Cost of goods sold	production of the second of the second	6.0	· , ,		THE STATE OF THE S
<u>=</u>	C	Gross profit or (loss)		3 m 1 m			्रिक्षा स्थापित । अस्तु । स्थाप्ता । विकास स्थापित स्थापित स्थापित ।
ui n'y	11	Other income	117 616				
. 	12	Total. Add lines 1 through 11	117,616.		<u>0.</u>		0.
>	13	Compensation of officers, directors, trustees, etc	0.		0.		
<u> </u>	14 15	Other employee salaries and wages Pension plans, employee benefits					
I o	ł	Legal fees STMT 1	1,758.		0.		0.
, ens	١.	A			<u></u>		
Expense	С	Other professional fees CEIVED					
	17	Interest O					
Administrative	18	Taxes 5 FFR 9 9 2019 O			 		
nis	19	Depreciation and depletion					
Ē	20	Occupancy OCOEN III					
Α̈́	21	Travel, conferences, Gand-meetings UT		<u> </u>	· · · · · · · · · · · · · · · · · · ·		
and	22	Printing and publications	111 050				
Operating	23	Other expenses STMT 2	111,952.		0.		0.
era	24	Total operating and administrative expenses Add lines 13 through 23	113,710.		0.		0.
õ	25	Contributions, gifts, grants paid	4,525.	18 2. J. 18			4,525.
		Total expenses and disbursements.	1,525.	A MATERIAL SAM	y war etal	the contract of the state of th	
		Add lines 24 and 25	118,235.		0.		4,525.
-	27	Subtract line 26 from line 12:		3		Pet On the State of the State o	
	a	Excess of revenue over expenses and disbursements	-619.	2.1		1、介绍泰州战。	
	b	Net investment income (if negative, enter -0-)			0.		1,12,1
	C	Adjusted net income (if negative, enter -0-)		<u> </u>	<u> </u>	N/A	+ + 1 / 1

FAMILY FOUNDATION

26-1284779

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Part If Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	of year
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
. 1 Cash - non-interest-bearing	741.	122.	122.
2 Savings and temporary cash investments			
3 Accounts receivable ►			1.5
Less: allowance for doubtful accounts	11	V 45.7	1
A Distance recovering	, , ;		
			\frac{1}{2} \frac\
Less: allowance for doubtful accounts		·	
5 Grants receivable			
6 Receivables due from officers, directors, trustees, and other			
disqualified persons			1
7 Other notes and loans receivable		and the forest	Same Mill Shire &
Less; allowance for doubtful accounts			
9 8 Inventories for sale or use			
9 Prepaid expenses and deferred charges	93,234.	93,234.	93,234.
▼ 10a Investments - U.S. and state government obligations			
b Investments - corporate stock			
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis	AR 1978 1997 1997 1998	The second of the second of	
Less accumulated depreciation	the calculation and the second second second second second second second second	The section of the se	The second secon
12 Investments - mortgage loans			
13 Investments - other			
14 Land, buildings, and equipment; basis			· "他们的各种人的特别的
Less accumulated depreciation	المساخلين المتعالم المتعالم المسائد	ulinearda 2000 eta il responsa e assetta.	Highly and Apply to hand a second
15 Other assets (describe ►			<u> </u>
16 Total assets (to be completed by all filers - see the	93,975.	93,356.	02 256
instructions. Also, see page 1, item I)	93,975.	93,330.	93,356.
17 Accounts payable and accrued expenses			一定主义的
18 Grants payable			
Deferred revenue Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable			
20 Loans from officers, directors, trustees, and other disqualified persons			
21 Mortgages and other notes payable			
T 22 Other liabilities (describe ►)			
		_	
23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow SFAS 117, check here			A STATE OF THE PARTY OF THE PAR
and complete lines 24 through 26, and lines 30 and 31.			A AND MORE THE PARTY OF THE PAR
👸 24 Unrestricted			
25 Temporarily restricted			
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here 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 30 Total net assets or fund balances			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.			
ο 27 Capital stock, trust principal, or current funds	0.	0.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
29 Retained earnings, accumulated income, endowment, or other funds	93,975.	93,356.	
30 Total net assets or fund balances	93,975.	93,356.	"我们是这个人的,我们是一个人的人的人,我们是一个人的人的人,我们就是一个人的人的人,我们就是一个人的人的人,我们就是一个人的人的人,我们就是一个人的人的人,
Z 00 Total net assets of fund balances		33,330.	· 基本的文字的
31 Total liabilities and net assets/fund balances	93,975.	93,356.	
		75,550	1 20 10 1 2 1 1 1 2 2
Part III Analysis of Changes in Net Assets or Fund Ba	alances		
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
(must agree with end-of-year figure reported on prior year's return)		- .	93,975.
		1	_610
2 Enter amount from Part I, line 27a		2	-619.
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ►		3	-619. 0.
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3		3	-619. 0. 93,356.
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶	L (1) L (2)	3	-619.

_		Y FOUNDATION	waatmast	Incomo			26	-1284	4779	Page 3
_		d Losses for Tax on Ir kind(s) of property sold (for exa			(b) Ho	ow acquired Purchase	(c) Date a		(d) Da	
	2-story brick wareho	ouse; or common stock, 200 sh			<u>D</u> -	Donation	` (mo., da	y, yr.)	(mo., d	ay, yr.)
1 <u>a</u>										
b		1			+					
d										
е			.		л,	-				
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				in or (loss) (f) minus (
a			ļ		-					
b						 -				
d										
е										
	Complete only for assets showing ga					(1)) Gains (Co . (k), but no	ol. (h) gain	minus	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (I) col. (J), If any			Losses (from col. (h))	
a									_	
b			1							
d										
e										
2	Capital gain net income or (net capita	I loss) { If gain, also enter -(er in Part I, line O- in Part I, line	7 7 .	}	2				<u> </u>
3	Net short-term capital gain or (loss) a If gain, also enter in Part I, line 8, colu		nd (6):		}					
÷E	If (loss), enter -0- in Part I, line 8 Cart V Qualification Und	ler Section 4940(e) for	r Reduced	Tay on Ne	t Inve	stment Inc	come			
	or optional use by domestic private for	 					-		·	
(1 (or optional use by domestic private for	madions subject to the section	4540(a) tax on	not invosiment		,				
lf s	section 4940(d)(2) applies, leave this p	oart blank.								
	as the foundation liable for the section			•	eriod?				Yes	X No
	Yes," the foundation doesn't qualify ur									
1_	Enter the appropriate amount in each (a)	1	instructions be	fore making any			-		(d)	
	Base period years Calendar year (or tax year beginning ii	(b) n) Adjusted qualifying di	stributions	Net value of n	(c) ionchari	table-use assets	; (Distrib col. (b) div	uitión ratio	L (c))
	2016	11)	4,820.	·		92,96		(5) 411		51847
	2015		5,050.			94,743				53303
	2014		2,900.			96,582				30026
	2013		445.			95,23				04673
	2012	l	10,500.			92,95	} 		1	12958
	Total of line 1, column (d)			0	L f		2	_	. 2	252807
3	Average distribution ratio for the 5-ye the foundation has been in existence		on line 2 by 5.	o, or by the num	iber or y	ears	3		. (50561
4	Enter the net value of noncharitable-u	use assets for 2017 from Part X	, line 5				4		94	1,789.
5	Multiply line 4 by line 3						5		4	793.
6	Enter 1% of net investment income (1% of Part I, line 27b)					6			0.
7	Add lines 5 and 6						7	<u> </u>	4	1,793.
8	Enter qualifying distributions from Pa	•					8		4	1,525.
	If line 8 is equal to or greater than lin See the Part VI instructions.	e 7, check the box in Part VI, lir	ne 1b, and com	plete that part us	ing a 19	% tax rate.				

10

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

Page 5

Part VII-A Statements Regarding Activities (continued)			
		Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
section 512(b)(13)? If "Yes," attach schedule. See instructions	11		_X_
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1		
If "Yes," attach statement. See instructions	12		_X_
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	_X_	
Website address ► N/A			
14 The books are in care of ► MRS. THOMAS A. LUPTON, JR. Telephone no. ► 423/89	4-34	<u>420</u>	
Located at ►P. O. BOX 250, HIXSON, TN ZIP+4 ►37	<u>343</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		<i>,</i> . ►	·
and enter the amount of tax-exempt interest received or accrued during the year		/A	N
At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,	- ,- +	Yes	-
securities, or other financial account in a foreign country?	16	<u> </u>	X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	·:	,	
foreign country ► Part VII-B. Statements Regarding Activities for Which Form 4720 May Be Required	·-÷ .		4, 62 1
	ি ক	Voo	NIO
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1.8.1.	Yes	No
1a During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		Ť A	430_ 1
	#	±.	F-4
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			[** j
a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	J	ţ: .:	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1	· /	[30]
(5) Transfer any income or assets to a disqualified person (or make any of either available	·	. ~	ژند چ اد ماد
for the benefit or use of a disqualified person)?	1 2 3	~*,~;;	
(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		1.4	
termination of government service, if terminating within 90 days.)	14.4	3.00 mg	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			7
section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
Organizations relying on a current notice regarding disaster assistance, check here	• .	1;:	2.5
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	7.	, ,	2
before the first day of the tax year beginning in 2017?	1c		Х
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	3	717 • . •	7
defined in section 4942(j)(3) or 4942(j)(5)):		اً بُ	, ,
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			130
before 2017? Yes X No			
If "Yes," list the years \blacktriangleright ,,,,	2	1	1 2
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	1 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	2.35	ار میگری استفالت	with.
statement - see instructions.) N/A	2b	Fuguety	*********
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	\$ 10 m	• Park	3.00
	ر مورد - ا		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	F 3 7 7	.e.4.	2000 2000
during the year? Yes X No		(4) (3) (4)	1.7
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	533	4	્રસ્ટ ટ્રુંક
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	13.5	7,5,4	4.
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,	1-200	3153	- ' ' '
Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	द्वार्क ः हर	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	1, edite.	7 6/4	1
had not been removed from jeopardy before the first day of the tax year beginning in 2017?	<u> 4b </u> rm 99 0)_DF	(2017)
F0	・・・・・ フンし	,-rr	1201/)

Form 990-PF (2017) FAMILY FOUNDATION			26-12847	79	Page 6
Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be F	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,		1	ŀ
any voter registration drive?		Ye	s X No	1.00	**
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No		ļ.,
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section		5	# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	16.0
4945(d)(4)(A)? See instructions		Ye	es 🗶 No 📑	atu i i i i i i i i i i i i i i i i i i i	1.00
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t	for -	1.5		134
the prevention of cruelty to children or animals?			s 🛛 No 📑		250
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	ın Regulations	2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
section 53.4945 or in a current notice regarding disaster assistance? See instr	uctions		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check l	here		▶ □ [ş	in Hind	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	rom the tax because it mainta	ıned	*		3
expenditure responsibility for the grant?	_ N	1/A 🔲 Ye	es 🔲 No 📳		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				it of exist.	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		P		
a personal benefit contract?		. TY	es 🗶 No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🗶 No 🌉	新教 教教	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	utable to the transaction?			7b	
Partiville Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	ınagers, Highly	/		
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp	pense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0~)	and deferred compensation	ačcount allowa	inces
KIMBRIEL MARLEY LUPTON STRANG	TRUSTEE				
P. O. BOX 250					•
HIXSON, TN 37343	0.00	0.	0.		0.
THOMAS ALLEN LUPTON, III	TRUSTEE				
P. O. BOX 250				:	
HIXSON, TN 37343	0.00	0.	0.		0.
BETH MADDIN LUPTON CRIMMINS	TRUSTEE				
P. O. BOX 250					
HIXSON, TN 37343	0.00	0.	0.		0.
			:		
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "			
	(b) Title, and average	THE HOIL.	(d) Contributions to	(e) Ex	oense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	account allowa	t, other
NONE	devoted to position	· · ·	Compensation	dilovo	11003
110212					
	1				
	1				
	-				
Total number of other employees paid over \$50,000	<u> </u>	<u> </u>			0
State and a state					

BETH AND THOMAS A. LUPTON

Form 990-PF (2017) FAMILY FOUNDATION	26	1284779 Page 7
Part VIII Information About Officers, Directors, Trustees, Fou Paid Employees, and Contractors (continued)	ndation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, or		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	-	
Total number of others receiving over \$50,000 for professional services		▶ 0
PartiX*A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant number of organizations and other beneficiaries served, conferences convened, research papers	statistical information such as the s produced, etc.	Expenses
1N/A		
2		
3		
4		
4		
PartIX:B) Summary of Program-Related Investments		<u> </u>
Describe the two largest program-related investments made by the foundation during the tax ye	ar on lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	. ▶ .	0.

Form **990-PF** (2017)

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign f	oundations, 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	0.
b	Average of monthly cash balances	1b	2,998.
C	Fair market value of all other assets	1c	93,234.
d	Total (add lines 1a, b, and c)	1d	96,232.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	96,232.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,443.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	94,789.
6	Minimum investment return. Enter 5% of line 5	6	4,739.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations foreign organizations, check here and do not complete this part.)	s and certain	
1	Minimum investment return from Part X, line 6	1	4,739.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,739.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	4,739.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	4,739.
P	artixIII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	4,525.
b	Program-related investments - total from Part IX-B	1b	0.
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:		
а	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	4,525.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	4,525.
	Note: The amount on line 6 will be used in Port V, column (b), in subsequent years when calculating whether the foundati	on qualifies for the	coction

Form **990-PF** (2017)

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,	Corpus	10010 prior to 2010	2010	2017
line 7		,	· · · · · · · · · · · · · · · · · · ·	4,739.
2 Undistributed income, if any, as of the end of 2017	,			
a Enter amount for 2016 only			4,442.	
b Total for prior years:	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
	•	0.		
3 Excess distributions carryover, if any, to 2017:	,		· · · · · · · · · · · · · · · · · · ·	~~
a From 2012			, ,	,
b From 2013	, ,		, . 3	, , , , , , , , , , , , , , , , , , , ,
c From 2014		15 5 1 2 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2		
d From 2015	, , , , , , , , , , , , , , , , , , , ,			
e From 2016			3 3 5 5 5 5 5	
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from				1.4
Part XII, line 4: ► \$ 4,525.	, , , , , , , , , , , , , , , , , , , ,			
a Applied to 2016, but not more than line 2a	•		4,442.	
b Applied to undistributed income of prior				, , ,
years (Election required - see instructions)		0.	• • • • • • • • • • • • • • • • • • • •	
c Treated as distributions out of corpus			* * * * * * * * * * * * * * * * * * * *	7
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount		**************************************		83.
e Remaining amount distributed out of corpus	0.			
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))		الله الأربية المتعادية أنتم المجارية	Section of the section of	, , , , , , , , , , , , , , , , , , , ,
6 Enter the net total of each column as		the first of the first of the second	Student Bureau	7
indicated below:			The state of the s	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.	in a marting of the state of th	Charles Charles Control Control	لوي مي مواهدي مواد ما مواد ما مواد الويدي و الوي مواد ما مواد الويدي و الويدي
b Prior years' undistributed income. Subtract) '' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	1, 1, 5
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			الله الله الله الله الله الله الله الله	400
assessed	3	0.		, , , , , , , , , , , , , , , , , ,
d Subtract line 6c from line 6b. Taxable	The state of the s			
amount - see instructions	*	0.	<u> </u>	
e Undistributed income for 2016. Subtract line	, ,			
4a from line 2a. Taxable amount - see instr. f Undistributed income for 2017. Subtract	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	** 21	0.	<u> معالمات کی مختلک می گرید ماه کی ا</u>
lines 4d and 5 from line 1. This amount must	A STATE OF THE STA			
be distributed in 2018		* 11	9	4,656.
7 Amounts treated as distributions out of	C. Saturation of a second	**********		वस्तिक स्वयं विकर्त
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election			ا الله الله الله الله الله الله الله ال	
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012		2x 5 2x 5 2x 5	The state of the s	以下了。 是被心态之
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.			7	THE STATE OF
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:		The state of the s	Strain Strain	
a Excess from 2013				
b Excess from 2014	医神经 经自然需要的			
c Excess from 2015		。		国际的是严重的
d Excess from 2016	_			
e Excess from 2017				[編成大成] <u>(古. ki)</u>

BETH AND THOMAS A. LUPTON Form 990-PF (2017) FAMILY FOUNDATION 26-1284779 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a 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 foundation is a private operating foundation described in section 4942(j)(3) or 4942(1)(5) Prior 3 years 2 a Enter the lesser of the adjusted net Tax year (c) 2015 (a) 2017 (b) 2016 (d) 2014 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c 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 PartXVIII Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) 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. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here 🕨 💹 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., 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: b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines:

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

Part XV

FAMILY FOUNDATION

26-1284779 Page 11

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount any foundation manager status of Name and address (home or business) or substantial contributor recipient a Paid during the year ATHENS ACADEMY NONE CAPITAL FUND PC P. O. BOX 6548 ATHENS GA 30604 100. BAYLOR SCHOOL NONE PC GENERAL USE 171 BAYLOR SCHOOL ROAD CHATTANOOGA, TN 37405 300. BETHEL BIBLE VILLAGE NONE GENERAL USE PC 3001 HAMILL ROAD HIXSON, TN 37343 100. CHAMBLISS CENTER FOR CHILDREN NONE PC GENERAL USE 315 GILLESPIE ROAD CHATTANOOGA TN 37411 100. CHANGED LIVES NONE PC GENERAL USE P. O. BOX 100 CHATTANOOGA TN 37401 50. SEE CONTINUATION SHEET(S) ➤ 3a Total 4.525. b Approved for future payment NONE Total

(e) Related or exempt

Excluded by section 512, 513, or 514

Form 990-PF (2017)

Enter gross amounts unless otherwise indicated.

Part XVI-A	Analysis	of Income-Producing	Activities

Fees and contracts from government agencies Wembership dues and assessments Interest no aswaps and temporary cesh investments Bit the second of the secon	Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
c d d e f f f f f f f f f f f f f f f f f	a	-		-		
d e	· · · · · · · · · · · · · · · · · ·	- 1				
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 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 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue: a b	<u> </u>			-		
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 5 Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property b Not debt-financed property 7 Other investment income or (loss) from personal property 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from sales of inventory 10 Other revenue: a b c d e c d e d e		1		 		
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2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 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 9 Net income or (loss) from sales of inventory 11 Other revenue: a b	Towns and the last of the last	- 		-		
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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 9 Net income or (loss) from sales of inventory 11 Other revenue: a b c d d e e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of			10 12 17 0 - 1 14 1 M	10055	A sentile the took offer offered	100 11 15 3 47 4 15 Page 1
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Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of			••		. 13 _	<u></u>
	Line No. Explain below how each activity for which inc	come is reported in	column (e) of Part XVI-A			mplishment of

Unrelated business income

Part XVII	Information Re			nd Transactio	ns and	d Relationsh		ncharitable
1 . Did the c	Exempt Organ organization directly or indi		of the following	a with any other orac		described to costs	501(a)	Yes No
	ngamzation directly of indi- nan section 501(c)(3) organ					described in Secut	on 50 1(c)	163 140
	s from the reporting found				110113:			
(1) Casi		anon to a nonona na	one exempt or s	gameation of				1a(1) X
	er assets							1a(2) X
b Other tra	insactions:						-	and in all a
(1) Sale	es of assets to a noncharita	ble exempt organizat	เดก					1b(1) X
(2) Puro	chases of assets from a no	ncharitable exempt o	rganization					1b(2) X
=	tal of facilities, equipment,							1b(3) X
. ,	nbursement arrangements					•		1b(4) X
• •	ns or loan guarantees							1b(5) X
	formance of services or me of facilities, equipment, ma		-					1b(6) X 1c X
	swer to any of the above is				uld alwa	 ws show the fair m	arket value of the o	·
	es given by the reporting f			• •				
	(d) the value of the goods,					,		•
(a) Line no	(b) Amount involved	(c) Name of	noncharitable	exempt organization		(d) Description	of transfers, transaction	ons, and sharing arrangements
			N/A					
					_			
								
							 	
						-		
	 							
0 - 1 - 4 - 4 - 4		H 46 (* - 1 - 1 - 1 - 1 - 1 - 1	.1.1.1.1			L		
	undation directly or indirect			or more tax-exempt	organiza	tions described		Yes X No
	n 501(c) (other than section complete the following sch		CHOH 52/7	•				L Yes LA NO
D 11 100, 0	(a) Name of org			(b) Type of organiz	ation		c) Description of re	elationship
	N/A					·	· ·	<u> </u>
	·							
						-		
								
1 1	er penalties of perjury, I declare belief, it as true, correct, and gon	that I have examined this	s return, includin eparer 🗷 ther thai	ig accompanying schedu n taxpayer) is based on a	ites and st ill informat	atements, and to the l tion of which preparer	best of my knowledge has any knowledge	May the IRS discuss this return with the preparer
Sign Here	Sh I Ma	11. 7.11		12/12/		Trush		shown below? See instr
	nature of officer or trustee	sem mysta	(Cur	un 2/14	/&	Title	٠٠.	_ X Yes No
loig	Print/Type preparer's na		Preparer's s	Date	r	Date	Check If	PTIN
	Time type proparet sittle		1 Toparor 3 3	·		2-1/8	self- employed	
Paid	W. KING CO	PLER		(1)		- , , 0		P01065738
Preparer	Firm's name ► CHA		AHNER	& STOPHEL	, P.	C.	Firm's EIN ► 6	2-1674553
Use Only	•	•			-		1	
	Firm's address ► 60	5 CHESTNU	T STRE	ET, SUITE	170	00		
CHATTANOOGA, TN 37450-0019							Phone no. (4	23)756-3000

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.
➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number

	BETH AND THOMAS A. LUPTON FAMILY FOUNDATION	26-1284779
Organization type (chec		
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 private foundation	
	501(c)(3) taxable private foundation	
- -	on is covered by the General Rule or a Special Rule. I (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R	ule. See instructions.
General Rule		
	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributo	
Special Rules		
sections 509(a)(any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% suppor (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a utor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amo EZ, line 1 Complete Parts I and II.	a, or 16b, and that received from
year, total contr	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or edu of cruelty to children or animals Complete Parts I, II, and III.	
year, contribution is checked, enter purpose Don't o	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sons exclusively for religious, charitable, etc., purposes, but no such contributions totaled rer here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it able, etc., contributions totaling \$5,000 or more during the year	more than \$1,000. If this box is, charitable, etc ,
but it must answer "No"	n that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its let the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	, , , , , , , , , , , , , , , , , , , ,
LUA For Denominarly De	adjustion Act Notice and the instructions for Form 000, 000 F7, or 000 DF. Schadule	D (5 000 000 57 000 DE) (0047)

Name of organization

BETH AND THOMAS A. LUPTON

FAMILY FOUNDATION

Employer identification number

26-1284779

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	MRS. THOMAS A. LUPTON, JR P. O. BOX 250 HIXSON, TN 37343	\$\$ 117,616.	Person X Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		*	Person Payroll Noncash Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)					

Name of organization

BETH AND THOMAS A. LUPTON

FAMILY FOUNDATION

Employer identification number 26-1284779

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed. (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) (c) No. (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I

APIN_	ime of organ			Employer identification number		
Part II						
the year from any one contributor. Complets columns (a) through (e) and the following line entry, no operations of section in the year from the year (Entributes better) \$ Solution So		FOUNDATION		26-1284779		
(b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 (e) Transfer of gift (f) Description of how gift is held (e) Transfer of gift (f) Description of how gift is held (g) Transfer of gift (h) Purpose of gift (h) Pu		the year from any one contributor. Complete completing Part III, enter the total of exclusively religiou	columns (a) through (e) and the following l s, charitable, etc , contributions of \$1,000 or less fo	INC CHTCV For organizations		
(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (e) Transfer of gift (f) Description of how gift is held art is held) No.					
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	rom	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
			(e) Transfer of gift			

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	LEGAL	FEES	S'	PATEMENT 1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL AND ACCOUNTING	1,758.	0.		0.
TO FM 990-PF, PG 1, LN 16A	1,758.	0.		0.
FORM 990-PF	OTHER EXPENSES		STATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LIFE INSURANCE PREMIUM SUPPLIES	111,881.	0.		0.
TO FORM 990-PF, PG 1, LN 23	111,952.	0.		0.