

Form **990-PF****Return of Private Foundation**  
or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

**2017**Department of the Treasury  
Internal Revenue Service

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

Open to Public Inspection

For calendar year 2017 or tax year beginning

, and ending

Name of foundation <b>THE GHH CHARITABLE FOUNDATION</b>		A Employer identification number <b>32-0048907</b>						
Number and street (or P.O. box number if mail is not delivered to street address) <b>113 WEST PUBLIC SQUARE, SUITE 200</b>	Room/suite	B Telephone number (see instructions) <b>270-651-9302</b>						
City or town, state or province, country, and ZIP or foreign postal code <b>GLASGOW KY 42141</b>		C If exemption application is pending, check here <input type="checkbox"/>						
G Check all that apply: <table border="0"> <tr> <td><input type="checkbox"/> Initial return</td> <td><input type="checkbox"/> Initial return of a former public charity</td> </tr> <tr> <td><input type="checkbox"/> Final return</td> <td><input type="checkbox"/> Amended return</td> </tr> <tr> <td><input type="checkbox"/> Address change</td> <td><input type="checkbox"/> Name change</td> </tr> </table>		<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return	<input type="checkbox"/> Address change	<input type="checkbox"/> Name change	D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity							
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return							
<input type="checkbox"/> Address change	<input type="checkbox"/> Name change							
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>						
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ <b>463,645</b>	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>						

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	104,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	39	39		
	4 Dividends and interest from securities	10,001	10,001		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	72,062			
	b Gross sales price for all assets on line 6a <b>241,082</b>				
	7 Capital gain net income (from Part IV, line 2)		72,062		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	186,102	82,102	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule) <b>STMT 1</b>	1,800			
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) <b>STMT 2</b>	657			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (att sch) <b>STMT 3</b>	21,063	21,048		
	24 Total operating and administrative expenses. Add lines 13 through 23	23,520	21,048	0	0
	25 Contributions, gifts, grants paid	395,700			395,700
26 Total expenses and disbursements. Add lines 24 and 25	419,220	21,048	0	395,700	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-233,118				
b Net investment income (if negative, enter -0-)		61,054			
c Adjusted net income (if negative, enter -0-)			0		

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2017)

<b>Part II Balance Sheets</b> 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
<b>Assets</b>	<b>1</b> Cash – non-interest-bearing	<b>54,638</b>	<b>1,702</b>	<b>1,702</b>
	<b>2</b> Savings and temporary cash investments	<b>182</b>		
	<b>3</b> Accounts receivable ▶ Less: allowance for doubtful accounts ▶			
	<b>4</b> Pledges receivable ▶ Less: allowance for doubtful accounts ▶			
	<b>5</b> Grants receivable			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ Less: allowance for doubtful accounts ▶	<b>0</b>		
	<b>8</b> Inventories for sale or use			
	<b>9</b> Prepaid expenses and deferred charges			
	<b>10a</b> Investments – U.S. and state government obligations (attach schedule)			
	<b>b</b> Investments – corporate stock (attach schedule) <b>SEE STMT 4</b>	<b>395,909</b>	<b>225,755</b>	<b>418,974</b>
	<b>c</b> Investments – corporate bonds (attach schedule)			
	<b>11</b> Investments – land, buildings, and equipment basis ▶ Less: accumulated depreciation (attach schedule) ▶			
	<b>12</b> Investments – mortgage loans			
	<b>13</b> Investments – other (attach schedule) <b>SEE STATEMENT 5</b>	<b>564</b>	<b>-9,282</b>	<b>42,969</b>
	<b>14</b> Land, buildings, and equipment basis ▶ Less: accumulated depreciation (attach schedule) ▶			
<b>15</b> Other assets (describe ▶)				
<b>16</b> <b>Total assets</b> (to be completed by all filers – see the instructions. Also, see page 1, item I)	<b>451,293</b>	<b>218,175</b>	<b>463,645</b>	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses			
	<b>18</b> Grants payable			
	<b>19</b> Deferred revenue			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule)			
	<b>22</b> Other liabilities (describe ▶)			
	<b>23</b> <b>Total liabilities</b> (add lines 17 through 22)	<b>0</b>	<b>0</b>	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.</b> ▶ <input type="checkbox"/>			
	<b>24</b> Unrestricted			
	<b>25</b> Temporarily restricted			
	<b>26</b> Permanently restricted			
	<b>Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.</b> ▶ <input checked="" type="checkbox"/>			
	<b>27</b> Capital stock, trust principal, or current funds			
	<b>28</b> Paid-in or capital surplus, or land, bldg., and equipment fund			
	<b>29</b> Retained earnings, accumulated income, endowment, or other funds	<b>451,293</b>	<b>218,175</b>	
	<b>30</b> <b>Total net assets or fund balances</b> (see instructions)	<b>451,293</b>	<b>218,175</b>	
	<b>31</b> <b>Total liabilities and net assets/fund balances</b> (see instructions)	<b>451,293</b>	<b>218,175</b>	

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> 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)	<b>1</b>	<b>451,293</b>
<b>2</b> Enter amount from Part I, line 27a	<b>2</b>	<b>-233,118</b>
<b>3</b> Other increases not included in line 2 (itemize) ▶	<b>3</b>	
<b>4</b> Add lines 1, 2, and 3	<b>4</b>	<b>218,175</b>
<b>5</b> Decreases not included in line 2 (itemize) ▶	<b>5</b>	
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	<b>6</b>	<b>218,175</b>

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (for example, 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.)
<b>1a SEE WORKSHEET</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				

  

(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))
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss)	<div style="border: 1px solid black; padding: 2px; display: inline-block;">           If gain, also enter in Part I, line 7            If (loss), enter -0- in Part I, line 7         </div>	<b>2</b>	<b>72,062</b>
<b>3</b> 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	<div style="border: 1px solid black; padding: 2px; display: inline-block;">           If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8         </div>	<b>3</b>	<b>38,221</b>

**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 the 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	408,343	894,287	0.456613
2015	269,163	1,196,701	0.224921
2014	293,450	1,189,142	0.246775
2013	212,050	896,087	0.236640
2012	95,600	743,351	0.128607

  

<b>2</b> Total of line 1, column (d)	<b>2</b>	<b>1.293556</b>
<b>3</b> Average distribution ratio for the 5-year base period – divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	<b>0.258711</b>
<b>4</b> Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	<b>4</b>	<b>601,717</b>
<b>5</b> Multiply line 4 by line 3	<b>5</b>	<b>155,671</b>
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	<b>611</b>
<b>7</b> Add lines 5 and 6	<b>7</b>	<b>156,282</b>
<b>8</b> Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.	<b>8</b>	<b>395,700</b>

**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	611
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	0
3	Add lines 1 and 2	3	611
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	0
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	5	611
6	<b>Credits/Payments</b>		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	
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	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	19
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	9	630
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	10	
11	Enter the amount of line 10 to be: <b>Credited to 2018 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input checked="" type="checkbox"/>	11	

**Part VII-A Statements Regarding Activities**

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	Yes	No
1a			X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the Instructions for the definition. 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		X
1b			X
c	Did the foundation file <b>Form 1120-POL</b> for this year?		X
1c			X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ (2) On foundation managers. \$		
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? If "Yes," attach a detailed description of the activities	2	X
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? If "Yes," attach a conformed copy of the changes	3	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.	5	X
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	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. <b>KY</b>		
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 <i>General Instruction G</i> ? If "No," attach explanation	8b	X
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. If "Yes," complete Part XIV	9	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	X

**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
- 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
- 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address **► N/A**

	Yes	No
11		<b>X</b>
12		<b>X</b>
13	<b>X</b>	

- 14 The books are in care of **► DEBBIE RUSSELL**  
**113 WEST PUBLIC SQUARE, SUITE 200**

Telephone no. **► 270-651-9302**Located at **► GLASGOW**

KY

ZIP+4 **► 42141**

- 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here 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?  
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country **►**

	Yes	No
16		<b>X</b>

**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):
- (1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No
- (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No
- (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No
- (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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)? ☐ Yes ☒ 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) ☐ Yes ☒ 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 Organizations relying on a current notice regarding disaster assistance, check here **► N/A**
- 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? **► N/A**
- 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? ☐ Yes ☒ 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) **► N/A**
- c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here **► 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? ☐ Yes ☒ 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.) **► N/A**
- 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
- 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?

	Yes	No
1b		
1c		
2b		
3b		
4a		<b>X</b>
4b		<b>X</b>

**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))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions ☐ Yes ☒ 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? ☐ Yes ☒ 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. Organizations relying on a current notice regarding disaster assistance, check here **N/A** ☒ **5b**

**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? **N/A** ☐ Yes ☐ No  
If "Yes," attach the statement required by Regulations section 53.4945–5(d)

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal 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 shelter transaction? ☐ Yes ☒ No

**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? **N/A** **7b**

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
WAYNE GAUNCE 212 WEST BROWN STREET GLASGOW KY 42141	CO-TRUSTEE 0.00	0	0	0
CHAPATCHA GAUNCE 212 WEST BROWN STREET GLASGOW KY 42141	CO-TRUSTEE 0.00	0	0	0
NELL HOUCHEMS 100 LONGHUNTER TRAIL GLASGOW KY 42141	CO-TRUSTEE 0.00	0	0	0
JEAN HUNSAKER 770 DELONG ROAD LEXINGTON KY 40515	CO-TRUSTEE 0.00	0	0	0

**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	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 **0**

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***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
<b>1</b> N/A	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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
<b>1</b> N/A	
<b>2</b>	
All other program-related investments. See instructions. <b>3</b>	

Total. Add lines 1 through 3 ▶

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	582,623
<b>b</b>	Average of monthly cash balances	<b>1b</b>	28,257
<b>c</b>	Fair market value of all other assets (see instructions)	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	610,880
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	610,880
<b>4</b>	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions)	<b>4</b>	9,163
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	601,717
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	30,086

**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.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	30,086
<b>2a</b>	Tax on investment income for 2017 from Part VI, line 5	<b>2a</b>	611
<b>b</b>	Income tax for 2017 (This does not include the tax from Part VI)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	611
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	29,475
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b>	Add lines 3 and 4	<b>5</b>	29,475
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	29,475

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	<b>1a</b>	395,700
<b>b</b>	Program-related investments – total from Part IX-B	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	395,700
<b>5</b>	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	<b>5</b>	611
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	395,089

**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
<b>1</b> Distributable amount for 2017 from Part XI, line 7				<b>29,475</b>
<b>2</b> Undistributed income, if any, as of the end of 2017:				
<b>a</b> Enter amount for 2016 only				
<b>b</b> Total for prior years: 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2017:				
<b>a</b> From 2012	<b>58,793</b>			
<b>b</b> From 2013	<b>169,546</b>			
<b>c</b> From 2014	<b>233,993</b>			
<b>d</b> From 2015	<b>209,402</b>			
<b>e</b> From 2016	<b>364,943</b>			
<b>f</b> Total of lines 3a through e	<b>1,036,677</b>			
<b>4</b> Qualifying distributions for 2017 from Part XII, line 4: ► \$ <b>395,700</b>				
<b>a</b> Applied to 2016, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)				
<b>c</b> Treated as distributions out of corpus (Election required – see instructions)				
<b>d</b> Applied to 2017 distributable amount				<b>29,475</b>
<b>e</b> Remaining amount distributed out of corpus	<b>366,225</b>			
<b>5</b> Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	<b>1,402,902</b>			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b				
<b>c</b> 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				
<b>d</b> Subtract line 6c from line 6b. Taxable amount – see instructions				
<b>e</b> Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount – see instructions				
<b>f</b> Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018				<b>0</b>
<b>7</b> 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)				
<b>8</b> Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)	<b>58,793</b>			
<b>9</b> Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	<b>1,344,109</b>			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2013	<b>169,546</b>			
<b>b</b> Excess from 2014	<b>233,993</b>			
<b>c</b> Excess from 2015	<b>209,402</b>			
<b>d</b> Excess from 2016	<b>364,943</b>			
<b>e</b> Excess from 2017	<b>366,225</b>			

Form **990-PF** (2017)

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

Recipient Name and address (home or business)	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
<b>a</b> Paid during the year <b>SEE STATEMENT 7</b>				<b>395,700</b>
<b>Total</b>			<b>▶ 3a</b>	<b>395,700</b>
<b>b</b> Approved for future payment <b>N/A</b>				
<b>Total</b>			<b>▶ 3b</b>	





**Schedule of Contributors**

OMB No 1545-0047

**2017**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

Name of the organization

Employer identification number

**THE GHH CHARITABLE FOUNDATION**

**32-0048907**

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

- ☐ 501(c)( ) (enter number) organization
- ☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- ☐ 527 political organization

Form 990-PF

- ☒ 501(c)(3) exempt private foundation
- ☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
- ☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**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.

**General Rule**

- ☒ 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 property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions

**Special Rules**

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% 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
- ☐ 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 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III
- ☐ 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 *exclusively* 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 *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$

**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 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

THE GHH CHARITABLE FOUNDATION

Employer identification number

32-0048907

**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	WAYNE GAUNCE 113 WEST PUBLIC SQU SUITE 200 GLASGOW KY 42141	\$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
2	PATRICK GAUNCE 113 W PUBLIC SQU SUITE 200 GLASGOW KY 42141	\$ 84,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Form <b>990-PF</b>	<b>Capital Gains and Losses for Tax on Investment Income</b>	<b>2017</b>
For calendar year 2017, or tax year beginning _____, and ending _____		

Name <b>THE GHH CHARITABLE FOUNDATION</b>	Employer Identification Number <b>32-0048907</b>
--	---

(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) CAPITAL GAIN DISTRIBUTIONS WELLS FAR	P		
(2) PASS TRHU VIA ENT PROD K-1	P		
(3) CISCO SYSTEMS	P	VARIOUS	06/06/17
(4) GE	P	VARIOUS	03/31/17
(5) HOME DEPOT	P	VARIOUS	02/03/17
(6) USBANCORP	P	VARIOUS	01/18/17
(7) VALERO	P	VARIOUS	02/03/17
(8) VOYA EMERG	P	VARIOUS	02/03/17
(9) YUM BRANDS	P	VARIOUS	03/31/17
(10) US BANCORP	P	VARIOUS	01/18/17
(11) VALERO ENERGY	P	VARIOUS	02/03/17
(12) YUM BRANDS	P	05/06/16	03/31/17
(13) YUM CHINA	P	05/06/16	03/31/17
(14) CISCO SYSTEMS	P	VARIOUS	06/06/17
(15) GENERAL ELEC	P	VARIOUS	03/31/17

(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)
(1) 55			55
(2)		512	-512
(3) 576		577	-1
(4) 373		397	-24
(5) 41,706		39,775	1,931
(6) 319		297	22
(7) 522		487	35
(8) 926		858	68
(9) 274		268	6
(10) 319		267	52
(11) 26,321		25,593	728
(12) 120		106	14
(13) 49		46	3
(14) 16,765		12,479	4,286
(15) 2,976		2,777	199

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(1)			55
(2)			-512
(3)			-1
(4)			-24
(5)			1,931
(6)			22
(7)			35
(8)			68
(9)			6
(10)			52
(11)			728
(12)			14
(13)			3
(14)			4,286
(15)			199



Form <b>990-PF</b>	Capital Gains and Losses for Tax on Investment Income	2017
For calendar year 2017, or tax year beginning , and ending		

Name <b>THE GHH CHARITABLE FOUNDATION</b>	Employer Identification Number <b>32-0048907</b>
--	---

(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) <b>PAYPAL HOLDINGS</b>	<b>P</b>	<b>12/01/15</b>	<b>02/03/17</b>
(2) <b>VOYA EMERG MKTS</b>	<b>P</b>	<b>VARIOUS</b>	<b>02/03/17</b>
(3) <b>ENTERPRISE PRODUCTS PTRS</b>	<b>P</b>	<b>09/08/00</b>	<b>06/06/17</b>
(4) <b>PUBLIC STORAGE INC</b>	<b>P</b>	<b>05/02/84</b>	<b>06/06/17</b>
(5) <b>US BANCORP</b>	<b>P</b>	<b>VARIOUS</b>	<b>01/18/17</b>
(6) <b>YUM BRANDS</b>	<b>P</b>	<b>VARIOUS</b>	<b>03/31/17</b>
(7) <b>YUM CHINA HOLDINGS</b>	<b>P</b>	<b>VARIOUS</b>	<b>03/31/17</b>
(8)			
(9)			
(10)			
(11)			
(12)			
(13)			
(14)			
(15)			

(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)
(1) <b>19,665</b>		<b>17,685</b>	<b>1,980</b>
(2) <b>7,786</b>		<b>10,583</b>	<b>-2,797</b>
(3) <b>27,323</b>		<b>14,658</b>	<b>12,665</b>
(4) <b>39,390</b>		<b>20,194</b>	<b>19,196</b>
(5) <b>26,177</b>		<b>6,353</b>	<b>19,824</b>
(6) <b>20,876</b>		<b>10,553</b>	<b>10,323</b>
(7) <b>8,564</b>		<b>4,555</b>	<b>4,009</b>
(8)			
(9)			
(10)			
(11)			
(12)			
(13)			
(14)			
(15)			

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) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
(1)			<b>1,980</b>
(2)			<b>-2,797</b>
(3)			<b>12,665</b>
(4)			<b>19,196</b>
(5)			<b>19,824</b>
(6)			<b>10,323</b>
(7)			<b>4,009</b>
(8)			
(9)			
(10)			
(11)			
(12)			
(13)			
(14)			
(15)			

## Federal Statements

Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
ACCOUNTING SERVICES	\$ 1,800	\$	\$	\$
TOTAL	\$ 1,800	\$ 0	\$ 0	\$ 0

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

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
NET INVEST INCOME TAX	\$ 657	\$	\$	\$
TOTAL	\$ 657	\$ 0	\$ 0	\$ 0

Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
EXPENSES	\$	\$	\$	\$
BANK CHARGES	15			
LOSS ON PASS THRU ENTR PROD	21,048	21,048		
TOTAL	\$ 21,063	\$ 21,048	\$ 0	\$ 0

Statement 4 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
WELLS FARGO INVESTMENTS	\$ 395,909	\$ 225,755	COST	\$ 418,974
TOTAL	\$ 395,909	\$ 225,755		\$ 418,974

## Federal Statements

Statement 5 - Form 990-PF, Part II, Line 13 - Other Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
ENTERPRISE PRODUCT PARTNES K-1	\$ 564	\$ -9,282	COST	\$ 42,969
TOTAL	\$ 564	\$ -9,282		\$ 42,969

**Statement 6 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000**

<u>Name of Manager</u>	<u>Amount</u>
WAYNE GAUNCE	\$ 20,000
PATRICK GAUNCE	84,000
TOTAL	<u>\$ 104,000</u>

## Federal Statements

Statement 7 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year

Name		Address		Relationship	Status	Purpose	Amount
Address							
COMMUNITY MEDICAL CARE GLASGOW KY 42141	NONE	200 S RACE STREET NC				COMMUNITY HEALTH CARE SERVICES	22,200
CARLISLE-NICHOLAS CO TOURISM INC CARLISLE KY 40311	NONE	108 WEST MAIN STREET NC				SUPPORT OF TOURISM EFFORTS	7,500
IMMANUAL BAPTIST CHURCH GLASGOW KY 42141	NONE	104 WESTERN HILLS RD NC				OPERATING SUPPORT FOR RELIGIOUS ORG	10,000
SHEPHERDS HAVE OF REST MINISTRIES ARLINGTON TN 38002	NONE	5525 CHESTER STREET NC				OPERATING SUPPORT FOR ACTIVITIES	10,000
PASTORS DISCIPLESHIP NETWORK OXNARD CA 93031-5773	NONE	PO BOX 5773 NC				OPER SUPPORT FOR MISSIONARY	45,000
KOSAIR CHARITIES LOUISVILLE KY 40217	NONE	982 EASTERN PARKWAY NC				OPERATING SUPPORT HEALTHCARE	5,000
MISSION 615 NASHVILLE TN 37209	NONE	304 4TH AVE N NC				OPERATING SUPPORT FOR HOMELESS SHELTER	80,000
FELLOWSHIP OF CHRISTIAN ATHLETES KANSAS CITY MO 64129	NONE	8701 LEEDS RD NC				OPERATING SUPPORT YOUTH SPORTS MINIST	10,000
GLASGOW BAPTIST CHURCH GLASGOW KY 42141	NONE	401 S GREEN STREET NC				OPERATING SUPPORT FOR RELIGIOUS ORG	10,000
GLASGOW BOYS & GIRLS CLUB GLASGOW KY 42141	NONE	301 BUNCH AVENUE NC				OPERATING SUPPORT FOR CHILD DEVL ORG	25,000
HILLTOPPER ATHLETIC FOUNDATION BOWLING GREEN KY 42101	NONE	1605 AVENUE OF CHAMPIONS NC				SUPPORT FOR UNIVERSITY ATH PROGRAM	40,000
NEW BEGINNINGS FOUNDATION INC LOUISVILLE KY 40222	NONE	8151 LAGRANGE RD NC				FAMILY AND PARENTING RESOURCE SUPPORT	10,000
DISABLED AMERICAN VETERANS CHAP 20 GLASGOW KY 42141	NONE	615 FINNEY ROAD NC				OPERATING SUPPORT FOR MILITARY SERV	2,000
CROSSROADS PREGNANCY CENTER GLASGOW KY 42141	NONE	101 MALLORY DRIVE NC				OPERATING SUPPORT	10,000
TODD TRAVIS SCHOLARSHIP FUND GLASGOW KY 42141	NONE	WINGATE AVE NC				EDUCATIONAL SUPPORT	5,000
FORTIFY MINISTRIES INC ALAMO TX 78516	NONE	PO BOX 475 NC				SUPPORT FOR SOCIAL AND RELIGIOUS MIN	10,000
AUSTIN TRACY VFD AUSTIN TRACY KY 42123	NONE	2452 AUSTON TRACY RD NC				SUPPORT FOR OPER AND EQUIP	3,000
CAVE CITY VFD CAVE CITY KY 42127	NONE	FIRST AND DUKE ST NC				SUPPORT FOR OPER AND EQUIP	3,000
EAST BARREN VFD GLASGOW KY 42142	NONE	HOLLIS THOMS RD NC				OPER AND EQUIP SUPPORT	3,000

## Federal Statements

**Statement 7 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the  
Year (continued)**

Name		Address		Relationship	Status	Purpose	Amount
Address							
HAYWOOD VFD		100 GRAHAM RD				OPER AND EQUIP SUPPORT	3,000
GLASGOW KY 42141	NONE	NC					
HISEVILLE VFD		39 E HISEVILLE MAIN ST				OPER AND EQUIP SUPPORT	3,000
HISEVILLE KY 42141	NONE	NC					
TEMPLE HILL VFD		8537 TOMPKINSVILLE RD				OPER AND EQUIP SUPPORT	3,000
GLASGOW KY 42141	NONE	NC					
PARK CITY VFD		US 31W				OPER AND EQUIP SUPPORT	3,000
PARK CITY KY 42160	NONE	NC					
SOUTH BARREN VFD		197 STEAM MILL RD				OPER AND EQUIP SUPPORT	3,000
GLASGOW KY 42141	NONE	NC					
MID AMERICAN SEMINARY		2095 APPLING ROAD				OPERATONG SUPPORT	15,000
CORDOVA TN 38016	NONE	NC					
THE WAY CHURCH		107 E MAIN STREET				OPER SUPPORT FOR RELIGIOUS ORG	25,000
HORSE CAVE KY 42749	NONE	NC					
B.A.S.I.S. TRAINING		PO BOX 13				OPER SUPPORT FOR MINISTRY ACTIVITIES	15,000
HARDIN KY 42048-0013	NONE	NC					
TJ COMMUNITY MISSION FOUNDATION		1301 N RACE STREET				OPER SUPPORT HEALTHCARE ACTIVITIES	15,000
GLASGOW KY 42141	NONE	NC					
TOTAL							395,700