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Form 990-PF Department of the Treasury Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2018 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.

. !	For c	alen	dar year 2017 or tax year beginning		, and ending				
	Nan	ne of	foundation			A Employer identification	number		
	<u>B</u> .	ÁŔ	BARA JUDY THOMAS MEMORIA	ı	57-6037541				
			nd street (or P O box number if mail is not delivered to street a	Room/suite	B Telephone number				
			HAWTHORNE .VALE		803-767-13	48			
			own, state or province, country, and ZIP or foreign p GELAND,MS 39157	ostal code		C If exemption application is pending, check here			
) [G C	heck	all that apply: Initial return	Initial return of a f	ormer public charity	D 1 Foreign organizations	, check here		
人			Final return	Amended return		2 5	A W - 050/ A4		
V.	_		Address change	Name change		2 Foreign organizations mes check here and attach con	nputation		
/	<u> </u>	-	type of organization: X Section 501(c)(3) ex		CIL	E If private foundation stat			
	<u> </u>			Other taxable private found		under section 507(b)(1)((A), check here		
l			irket value of all assets at end of year J Accounti	=	Accrual	F If the foundation is in a 6			
	()(;		Part II, col. (c), line 16) 0° 0°	ther (specify) nn (d) must be on cash basi	<u></u>	under section 507(b)(1)	(B), check here		
ſ		řť.l	Analysis of Revenue and Expenses	1		(a) Adjusted not	(d) Disbursements		
	2		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment vor income	(c) Adjusted net income	for charitable purposes (cash basis only)		
		1	Contributions, gifts, grants, etc., received		A CONTRACTOR	N/A			
		2	Check if the foundation is not required to attach Sch. B						
	ļ	3	Interest on savings and temporary cash investments						
	ĺ	4	Dividends and interest from securities	4,465.	4,465.		STATEMENT 1		
			Gross rents	Cartenate Real White See See See Straight Line 2	1974 of management of the same	THE PURPOSE AND AND THE WAR THAT IS NOT THE FOR			
		_	Net rental income or (loss)	1875 1875 1875 1875 1875 1875 1875 1875					
	9	62	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 66,692.	32,316.					
TA)	len/	7	assets on line 6a 00,032. Capital gain net income (from Part IV, fine 2)		32,316.				
	Re	, R	Net short-term capital gain		ALCONOMIA SAN	CONTRACTOR OF THE PROPERTY OF			
Z		9	Income modifications						
CANNED		10a	Gross sales less returns				MANAGE TO THE		
U	ĺ	b	Less Cost of goods sold						
Ξ		C	Gross profit or (loss)						
B		11	Other income						
₽.		12	Total Add lines 1 through 11	36,781.	36,781.				
~~		13	Compensation of officers, directors, trustees, etc	0.	0.		0.		
2019	I	14	Other employee salaries and wages						
9	Ŋ		Pension plans, employee benefits Legal fees	<u> </u>		RECEIL	ED_		
	ense		Accounting fees						
	Expe		Other professional fees			18 NOV 21	2018 13		
	e E	17	Interest		-	[6]	<u>æ</u>		
	ativ	18	Taxes			OCDEN	IIT		
	istr	19	Depreciation and depletion			0002	Harris and the second		
	Ē	20	Occupancy						
	Ρ	21	Travel, conferences, and meetings						
	ପା	22	Printing and publications		ļ		<u> </u>		
	in	23	Other expenses						
	erat	24	Total operating and administrative	0.	0.		0		
	Oper	25	expenses. Add lines 13 through 23 Contributions, gifts, grants paid	7,273.			7,273.		
			Total expenses and disbursements.	1,213.	THE PROPERTY OF THE PROPERTY O	ISPANSORATE STATE OF THE STATE OF THE	1,213.		
		20	Add lines 24 and 25	7,273.	0.		7,273.		
-		27	Subtract line 26 from line 12.		THE STATE OF THE STATE OF				
			Excess of revenue over expenses and disbursements	29,508.					
	Ì		Net investment income (if negative, enter -0-)		36,781.	ATTENDED TO THE REAL PROPERTY.			
		C	Adjusted net income (if negative, enter -0-)	计学区域的	AND THE RESIDENCE	N/A			

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions

Form **990-PF** (2017)

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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 1 126, 733. 2 29, 508. 3 0.

5 Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

156,241. Form **990-PF** (2017)

Part IV Capital Gai	ns and Lo	sses for Tax on In	vestment	ncome				
(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 a (mo., da		(d) Date sold (mo., day, yr.)
1a 800 SHS APPL	IED MAT	TERIALS			P	11/2	1/95	02/27/17
b 750 SHS UNUM	b 750 SHS UNUM GROUP				P	08/0	5/99	03/01/17
<u>c</u>								
<u>d</u>								
<u>e</u>			1					<u> </u>
(e) Gross sales price		Depreciation allowed (or allowable)		t or other basis xpense of sale			ain or (loss s (f) minus	(g))
a 29,08				4,438				24,646.
b 37,60	8.		ļ	29,938	3.			7,670.
<u>c</u>					- 			
_d								
Complete only for assets sh	OWING GAID IN	column (h) and owned by t	the foundation	on 12/31/69		(I) Gains (C	ol (h) gan	minus
(i) FMV as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1)	c	òl (k), but r	not less tha (from col. (n -0-) or
a			-	(<i>m</i>				24,646.
b								7,670.
C								
d								
<u>e</u>					_			
2 Capital gain net income or (n	et capital loss	If gain, also enter If (loss), enter -0			}			32,316.
3 Net short-term capital gain o	r (loss) as def							
If gain, also enter in Part I, III	· ,	• •	(0).		}		•-	
If (loss), enter -0- in Part I, li		2040/01/40	Deduced	Tow on Note] 3		N/A	·
Part V Qualification						onie		
(For optional use by domestic pi	rivate foundati	ons subject to the section 4	4940(a) tax on	net investment inc	ome.)			
If section 4940(d)(2) applies, lea	ave this part b	lank.						
Was the foundation liable for the				•	od?			Yes X No
Enter the appropriate amount					tries.			
(a)		(b)			(c)	\top	Dieter	(d)
Base periód years Calendar year (or tax year be	ginning in)	Adjusted qualifying dis	stributions	Net value of no	ncharitable-use asse	ts	(col. (b) dr	bùtión ratio vided by col. (c))
2016			6,905.		159,26	3.		.043356
2015			7,132.		139,07			.051284
2014		<u> </u>	6,716.		145,09			.046286
2013			5,265.		123,27			.042709
2012		<u></u>	5,427.		106,02	4.	 -	.05118
O Tatal of line 1 column (d)							j	.234822
2 Total of line 1, column (d)3 Average distribution ratio for	the Every be	ee paried - divide the total	on line 2 by 5 (or by the number	r of years	2		.234022
the foundation has been in e	-	•	on me 2 by 5.c	, or by the number	i or years	3_		.046964
4 Enter the net value of noncha	arıtable-use as	sets for 2017 from Part X,	line 5			4_		232,470
5 Multiply line 4 by line 3						5		10,918
	(40/ of	Don't Line 07h						368
6 Enter 1% of net investment i	ncome (1% of	Mart I, line 2/D)				6_		-
7 Add lines 5 and 6						7		11,286
8 Enter qualifying distributions					.	_8	L	7,273
If line 8 is equal to or greater See the Part VI instructions.	than line 7, c	heck the box in Part VI, line	e 1b, and comp	lete that part using	g a 1% tax rate.			

	00-PF (2017) BARBARA JUDY THOMAS MEMORIAL F	OUNDATION	57-603		Page 4	
Part	· //·		948 - See	Instructi	ons)	
	empt operating foundations described in section 4940(d)(2), check here 🕒 🔲 and e	ı				
	ite of ruling or determination letter: (attach copy of letter if nec		高級 號	7 (2)		,
	mestic foundations that meet the section 4940(e) requirements in Part V, check here	▶ 🔛 and enter 1%	1 30 5.50 Aug 90	Table 1 inc. one of the	736.	
of	Part I, line 27b				3	
	other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4%					
2 Ta	x under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; oth	hers, enter -0-)	2		<u> </u>	
3 Ac	ld lines 1 and 2	`	3		736.	
4 St	ibtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; of	thers, enter -0-)	4		<u> </u>	
5 Ta	x based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		5		736.	
6 Cr	edits/Payments:					
a 20	17 estimated tax payments and 2016 overpayment credited to 2017	6a 0.				
b Ex	empt foreign organizations - tax withheld at source	6b 0.				
c Ta	x paid with application for extension of time to file (Form 8868)	6c 75.				
d Ba	ckup withholding erroneously withheld			PER WIND		
7 To	ital credits and payments. Add lines 6a through 6d		7		<u>75.</u>	
8 En	iter any $oldsymbol{penalty}$ for underpayment of estimated tax. Check here $[oldsymbol{\widehat{\mathbf{X}}}]$ if Form 2220 is atta	ached	8		1.	
9 Ta	x due If the total of lines 5 and 8 is more than line 7, enter amount owed SE	E STATEMENT 3	9		662.	
10 Ov	rerpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	. ▶	10			
	ter the amount of line 10 to be. Credited to 2018 estimated tax	Refunded ▶	11			
<u>, Parti</u>	VIL AN Statements Regarding Activities					
1a Di	iring the tax year, did the foundation attempt to influence any national, state, or local legis	slation or did it participate or interven	e in	Winds Y	es No	
an	y political campaign?			1a	X	
b Di	d it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses? See the instructions for the defi	nition	1b	X	
lf :	the answer is "Yes" to ${f 1a}$ or ${f 1b}$, attach a detailed description of the activities and copies (of any materials published or				
dis	stributed by the foundation in connection with the activities.	•				
c Di	d the foundation file Form 1120-POL for this year?			1c	X	
d En	ter the amount (if any) of tax on political expenditures (section 4955) imposed during the	year:				
(1) On the foundation. > \$0 (2) On foundation managers	s. ► \$0.	_			
e En	ter the reimbursement (if any) paid by the foundation during the year for political expendi	iture tax imposed on foundation				
m	anagers. ▶ \$ <u>0</u>			17.00		
2 Ha	is the foundation engaged in any activities that have not previously been reported to the If	RS?		2	X	
lf '	"Yes," attach a detailed description of the activities.					
3 Ha	is the foundation made any changes, not previously reported to the IRS, in its governing i	instrument, articles of incorporation,	or	E STATE		
by	laws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	X	
4a Di	d the foundation have unrelated business gross income of \$1,000 or more during the yea	LS.		4a	<u>X</u>	
b If	"Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
	as there a liquidation, termination, dissolution, or substantial contraction during the year?	•		5	<u>X</u>	
1f '	"Yes," attach the statement required by General Instruction T					
6 Ar	e the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied ei	ither:				
•	By language in the governing instrument, or	•				
•	By state legislation that effectively amends the governing instrument so that no mandator	y directions that conflict with the stat	e law	数据 第		
re	main in the governing instrument?			6	X	
7 . Di	d the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	olete Part II, col. (c), and Part XV		7	X	
8a En	iter the states to which the foundation reports or with which it is registered. See instruction	ons. ►				
_5	SC					
b If	the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney General (or designate)				
	each state as required by General Instruction G? If "No," attach explanation			8b	X	_
9 Is	the foundation claiming status as a private operating foundation within the meaning of se	ection 4942(j)(3) or 4942(j)(5) for cal	endar	開發		
	ar 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," com			9	X	L
	d any persons become substantial contributors during the tax year? If "Yes," attach a schedu			10	X	

Pa	irt 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?			
	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 ► DAVID M. THOMAS Telephone no. ► 803-76	7-13	348	
	Located at ► 121 HAWTHORNE VALE, RIDGELAND, MS ZIP+4 ►35	157		
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		/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
_	foreign country	が対象	经	
Бa	art VII-B: Statements Regarding Activities for Which Form 4720 May Be Required	1.020.1		
	File Form 4720 If any Item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			1988
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		意為	1
	a disqualified person?			指表
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		3	
	(5) Transfer any income or assets to a disqualified person (or make any of either available			3
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.) Yes X No			32
D	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	44	Section?	355003
		15	Talk o	24.26
_	organizations raying and surrout notice regarding discussion abstraction, shown note			
U	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1c	W. F. J. F. P.	X
2	before the first day of the tax year beginning in 2017? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	AND THE	金が成	
_	defined in section 4942(j)(3) or 4942(j)(5)):	3		
9	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			機器
	before 2017? Yes X No			
	If "Yes," list the years ▶			
Ь	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	2b	26147	3-3-3
C	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	15.5	1888	400
	•			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			The state of
	during the year?		建筑	翻
b	of "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after			織
	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		1.3	新教
	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,		TANK T	経験
	Form 4720, to determine if the foundation had excess business holdings in 2017.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	透透	設就	認識
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	l	X_

121 HAWTHORNE VALE	Form 990-PF (2017) BARBARA JUDY THOMAS MEMOR			57-60375	11	Page 6
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration dive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an individual for travel, study, or other similar purposes? (5) Provide for any purpose other than religious, charitable, etc., organization described in section 4945(4)(4)(4)) See instructions (5) Provide for any purpose other than religious, charitable, etc., organization described in section 4945(4)(4)) See instructions (6) Provide for any purpose other than religious, charitable, etc., organization described in section 4945(4)(4)) See instructions (7) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals? (8) Provide for any purpose other than extension for the transactions fall to quality under the exceptions described in Regulations section 53.4945 or in a current notice regularity disaster assistance? See instructions (8) Provide for any purpose other than extension for more than tax because it maintained expenditure responsibility for the grant? (9) The answer is Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? (1) Yes X No Yes X No X		orm 4720 May Be Re	equired (continu	ued)	~ V	Na
(1) Carry on progradance, or otherwise sterming to influence segistation (section 495(5))? (2) Influence the outcome of any specific public electron (see section 495(5) or carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an organization other than a chanitable, etc., organization described in section 495(d)(4)(A)? See instructions (4) Provide a grant to an organization other than a chanitable, etc., organization described in section 495(d)(4)(A)? See instructions (5) Provide of or any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? b I lary answer is Yes' to 5(1)-(5), did any of the transactions fail to quality 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 c I the answer is Yes' to question 5a(4) does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If Yes's attach the statement required by Regulations section 53.4945-5(d). 5a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If Yes's to (b, life form 870.) 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes X No 1 Yes X No A Y					Yes	
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a chantable, etc., organization described in section 4945(f)(4)(4)(2) See instructions (5) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals? 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 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? If Yes's, attach the statement required by Regulations section 53.4945-5(d). 5a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 1 Yes (a) No (b) If Yes's (b) the form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part VIII Information About Officiers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (a) Name and address TRUSTEE 71.1 MIDDLEBURT DRIVE, ST 316 COLUMBIA, SC 29206 D. 0. 0. 0. 0. 0. 0. Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Tille, and average hours per week devoted to position expension of the payers are the payers are the payers are the payers are			 _	es [X] No		
(3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(f)(4)(A)(2) See instructions (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals? bit any answers "S'es" to Sq.(1/5), did any of the transactions fall 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 of it the answer is "S'es" to question 53.4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, reserve any funds, directly or indirectly, to pay premiums on a personal benefit contract? 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? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly (a) Name and address TRUSTEE 7 In MIDDLEBURT DRIVE, ST 316 COLUMBIA, SC 29206 0.00 0		r to carry on, directly or indire		г ел ,	* *	32"
49 Provide a grant to an organization other than a charitable, etc., organization described in section 4945(0)(4)(4)/8) See instructions (9) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals? Yes No No No No No No No	, , ,	_			1. 10	1 1
(4) Provide a gracing of a current or an unan a ciral count, etc., or gualization descended in Section (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? b If any answer is "Yes" to \$4(1)-(5), did any of the transactions fail to quality under the exceptions described in Regulations section \$3.4945 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here c If the answer is "Yes" to question 53(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section \$3.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 8b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 9 Li "Yes" to 8b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 9 Li "Yes" to 8b, file Form 8870. 1 List all officers, directors, trustees, and foundation managers and their compensation. (b) Tille, and average foundation. (c) Compensation (d)			Ye	s A No	` .	1: [
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? If the prevention of cruelty to children or animals? If the prevention of cruelty to children or animals? If the prevention of cruelty to children or animals? If the prevention of cruelty to children or animals? If the prevention of cruelty to children or animals? If yes is 54,1945 or in a current notice regarding disaster assistance, check here If the animal or animal o		n described in section	<u> </u>	(TET), ,	`(·
the prevention of cruelly to children or animals? b II any answer is Yes' to 5q11y(5), aid 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 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? 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 brenit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If Yes's to 6b, life Form 6870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If Yes's to 6b, life Form 6870. 1 List all officers, directors, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (a) Name and address TRUSTEE TRUSTEE 1 COLUMBIA, SC 29 20 6 0 . 0 . 0 . 0 . 0 . 0 . 0 . 0 . 0 . 0	* * * * * * * * * * * * * * * * * * * *		- -	es 🔼 No 📙	` .	1
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Part VIII	If "Yes" to 6b, file Form 8870.			1.		1.5
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. (a) Name and address (b) Title, and average hours per week devoted to position Prustee Trustees. TRUSTEE 2711 MIDDLEBURT DRIVE, ST 316 COLUMBIA, SC 29206 0.00 0.0.0.0. DAVID M. THOMAS TRUSTEE 121 HAWTHORNE VALE RIDGELAND, MS 39157 0.00 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0	7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y ₀			1:-
Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (a) Name and address (b) Title, and average hours per week devoted to position (If not paid, enter -0-) (If not paid, enter -0			. 	N/A	7b	<u> </u>
(a) Name and address (b) Title, and average hours per week devoted (If not paid, enter -0-) SARA J. KITCHENS TRUSTEE 2711 MIDDLEBURT DRIVE, ST 316 COLUMBIA, SC 29206 DAVID M. THOMAS TRUSTEE 121 HAWTHORNE VALE RIDGELAND, MS 39157 O.00	Information About Officers, Directors, Truste Paid Employees, and Contractors	es, Foundation Mar	nagers, Highly			
SARA J. KITCHENS 2711 MIDDLEBURT DRIVE, ST 316 COLUMBIA, SC 29206 DAVID M. THOMAS TRUSTEE 121 HAWTHORNE VALE RIDGELAND, MS 39157 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0	1 List all officers, directors, trustees, and foundation managers and the	neir compensation.				
SARA J. KITCHENS 2711 MIDDLEBURT DRIVE, ST 316 COLUMBIA, SC 29206 DAVID M. THOMAS TRUSTEE 121 HAWTHORNE VALE RIDGELAND, MS 39157 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0				(d) Contributions to employee benefit plans	(e) Ex	pense
2711 MIDDLEBURT DRIVE, ST 316 COLUMBIA, SC 29206 DAVID M. THOMAS TRUSTEE 121 HAWTHORNE VALE RIDGELAND, MS 39157 0.00 0.	(a) Name and address			and deferred compensation	allowa	ances
COLUMBIA, SC 29206 DAVID M. THOMAS TRUSTEE 121 HAWTHORNE VALE RIDGELAND, MS 39157 0.00 0.00 0.0.00 0.0.00 0.0.00 0.000 0.000 0.000 0.000 0.000 0.000 0.0000 0.000000	SARA J. KITCHENS	TRUSTEE				
DAVID M. THOMAS 121 HAWTHORNE VALE RIDGELAND, MS 39157 0.00 0.	2711 MIDDLEBURT DRIVE, ST 316					
2 Compensation of five highest-paid employees (other than those included on line 1). 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 account, other allowances	COLUMBIA, SC 29206	0.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those included on line 1). 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 account, other allowances	DAVID M. THOMAS	TRUSTEE				
2 Compensation of five highest-paid employees (other than those included on line 1). 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 account, other allowances	121 HAWTHORNE VALE					
(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 account, other allowances	RIDGELAND, MS 39157	0.00	0.	0.		0.
(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 account, other allowances				-		_
(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 allowances						
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(a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation employee benefit plats account, other allowances	2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	T (a)		
detected to position	(a) Name and address of each employee paid more than \$50,000	` hours per week "	(c) Compensation	employee benefit plans and deferred	accoun	it, other
	NONE	as to to position	1	- companiention	<u> </u>	
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		1	1	[
			 			
		1	1	1	l	
		 	 	 		
		1				
Total number of other employees paid over \$50,000	Total number of other employees paid over \$50,000			•	<u> </u>	

Form 990-PF (2017) BARBARA JUDY THOMAS MEMORIAL FO	UNDATION 57-	6037541 Page 7
Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ent	er "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<u> </u>		
······································		
Total number of others receiving over \$50,000 for professional services Part IX-A: Summary of Direct Charitable Activities		0
		
List the foundation's four largest direct charitable activities during the tax year. Include relevant state number of organizations and other beneficiaries served, conferences convened, research papers pro	tistical information such as the	Expenses
27/2	oudceu, etc.	
1N/A		
3		
<u> </u>		
4	_	
Part IX:B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year of	on lines 1 and 2.	Amount
1N/A		
2		
All ether process related as not one to Co		
All other program-related investments. See instructions.		
3		
		
Total Add lines 1 through 3		0.

Form 990-PF (2017)

Page 8_

P	art X Minimum Investment Return (All domestic foundations must complete this part Fo	reign foundations, see	instructions)
-	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	and a	
-	Average monthly fair market value of securities	1a	210.702.
	Average of monthly cash balances	1b	210,702. 25,308.
	Fair market value of all other assets	10	
	Total (add lines 1a, b, and c)	1d	236,010.
	Reduction claimed for blockage or other factors reported on lines 1a and	17. Tak	
·	1c (attach detailed explanation)	0.	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	236,010.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,540.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	232,470.
6	Minimum investment return. Enter 5% of line 5	6	11,624.
	art XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating fou		
	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	11,624.
2a	Tax on investment income for 2017 from Part VI, line 5	736.	
b	Income tax for 2017 (This does not include the tax from Part VI)	730.	
	Add lines 2a and 2b	2c	<u>7</u> 36
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	10,888.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	10,888.
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	10,888.
4	art XII. Qualifying Distributions (see instructions)		-
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	建 建	
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	7,273.
	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:	₹:3	
a		3a	
Ь		3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	7,273.
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	7,273.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the f	oundation qualifies for the	section
	4940(e) reduction of tax in those years.	•	

Form **990-PF** (2017)

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.				10,888.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			7,273.	
b Total for prior years:		West and the state of the state		
,		~ 0.		
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	0.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ► \$ 7,273.			Light Laber	
a Applied to 2016, but not more than line 2a			7,,273.	
b Applied to undistributed income of prior		-		7477777
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount	建心面侧型型的	的主义的对象的	Character and	0.
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))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of		,		
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed	美国的基础的	0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				•
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				10,888.
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	0.			
9 Excess distributions carryover to 2018				
Subtract lines 7 and 8 from line 6a	Same Brandston Brandston	Pagarina a responsable de la consecución dela consecución de la consecución dela consecución de la consecución de la consecución de la con		Marine International Control of the
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	La la deservación de la companyon de la compan	1. 新加州社会教育工艺。1. 11 11 11 11 11 11 11 11 11 11 11 11 1	CONSTRUCTION OF THE PROPERTY O	HATTHE WAR THE

Form 990-PF (2017) BARBARA	JUDY THOMA	S MEMORIAL 1	FOUNDATION		037541 Page 10
Part XIV. Private Operating Fo	oundations (see in	structions and Part VII	A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	t it is a private operating			
foundation, and the ruling is effective for	r 2017, enter the date of t	the ruling	>		
b Check box to indicate whether the found	l <u>ation is a</u> private operatir	ng foundation described i	section _	4942(j)(3) or	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					T
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	<u> </u>	 			
used directly for active conduct of					
exempt activities		 -			
e Qualifying distributions made directly					
for active conduct of exempt activities.				1	
Subtract line 2d from line 2c					ļ <u>-</u>
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			1		
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public			<u> </u>	-	
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(lii)					
(3) Largest amount of support from					
an exempt organization					
· •		 	 		
(4) Gross investment income Part*XV2 Supplementary Info	rmation (Comple	te this part only i	f the foundation	had \$5 000 or mo	ore in assets
at any time during the			i ine roundation	11.da 40,000 01 11.	or an accord
					_
1 Information Regarding Foundatio	•	u on til tille i			
a List any managers of the foundation why year (but only if they have contributed in	o have contributed more	than 2% of the total conti section 507(d)(2) \	ibutions received by th	e toundation before the ci	ose of any tax
	ποιο τιιαιι ψο,000). (000 σ	001011 507 (0)(2))			
NONE					-
 List any managers of the foundation who other entity) of which the foundation has 	o own 10% or more of th	ie stock of a corporation (or an equally large port	ion of the ownership of a	partnership or
-,	S a 10 % of greater filteres	SI.			
NONE					
2 Information Regarding Contributi			_		
Check here X if the foundation of					uests for funds. If
the foundation makes gifts, grants, etc.,	to individuals or organiza	ations under other condit	ons, complete items 2a	ı, b, c, and d.	
a The name, address, and telephone number	ber or email address of th	ne person to whom applic	ations should be addres	ssed:	
				·	
b The form in which applications should b	e submitted and informa	tion and materials they sl	rould include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields.	kinds of institutions. or	r other factors:	
_ / my ene er mmanene en arrane.	-,, g-og-up/ilo				

Part XV. Supplementary Information				
3 Grants and Contributions Paid During the Yo	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
FRIENDSHIP PLACE	NONE	PC	CHARITABLE PURPOSE	
PO BOX 282				2 (40
GEORGETOWN, SC 29442				3,640.
HARVEST HOPE FOOD BANK	NONE	PC PC	CHARITABLE PURPOSE	
PO BOX 451 COLUMBIA, SC 29202-0451		Ì	,	1,816.
COLUMBIA, SC 29202-0431	 	 		1,010.
		[
MISSISSIPPI FOOD NETWORK	NONE	PC PC	CHARITABLE PURPOSE	
PO BOX 411 JACKSON, MS 39205-0411				1,817.
			 	
		1		
Total			► 3a	7,273.
b Approved for future payment		1		
		}		
NONE				
		 	 	
•				
	 	 	 	
Tatal	<u> </u>	<u> </u>	▶ 3b	0.
Total				

Part XVI-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
-	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue	Business code	Amount	sion	Amount	function income
a			1 1		
b	-		1-1		
			+		
<u> </u>			+-+	· 	
d			+		
e					
f			\perp		
g Fees and contracts from government agencies			_		
Membership dues and assessments					
Interest on savings and temporary cash investments					
Dividends and interest from securities			14	4,465.	
Net rental income or (loss) from real estate.	मा क्षेत्री अवद्भाव			Rayman or a syntaction of	The state of the said for in
	35 - 6 · 1	*, ·	+		10 11 384
a Debt-financed property			+ - 1		
b Not debt-financed property	<u> </u>		+		<u> </u>
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other]]		
than inventory			18	32,316.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
•	İ		1 1		
-	-		+		
· ·					
			+		
d					
e	1/27/20 20 27 27		16	26 701	ļ
Subtotal Add columns (b), (d), and (e)	# 47 T. T.		. K. S.	36,781.	
Total Add line 12, columns (b), (d), and (e)				13	36,781
ee worksheet in line 13 instructions to verify calculations	s.)				
Part XVI-B Relationship of Activitie	s to the Accor	nplishment of E	xempt	Purposes	
ine No Explain below how each activity for which	income is reported in	column (e) of Part XVI	-A contrib	uted importantly to the accord	nplishment of
▼ the foundation's exempt purposes (other t	han by providing fund	is for such purposes).			
					
					· · · · · · · · · · · · · · · · · · ·
					

Form 990					MEMORIAL FOUN		57-60		Pag	je 13
Part 2	XVII∙]			sfers to a	nd Transactions an	d Relationsh	ips With Noncha	ritable		
		Exempt Organ		411 441				Jan. S. Andr.	Yes	No
		·			g with any other organizatio	n described in sec	tion 501(c)	FF 275	5.0VX a	As the
			· ·		to political organizations?			15 m		
a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash										X
(1) Cash (2) Other assets										$\frac{x}{x}$
٠,		assers sactions:						1a(2)	10 mm	
		of assets to a noncharital	hla avamat arganizat	ion				1b(1)	A 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	X
		ases of assets from a noi						1b(1)	1	X
٠.		l of facilities, equipment,	•	i yanızalıdı				1b(3)		X
		oursement arrangements						1b(4)		X
٠,		or loan guarantees						1b(5)		X
		mance of services or me	mbership or fundrais	sina solicitatio	ns			1b(6)		X
		facilities, equipment, ma						1c		X
					dule. Column (b) should alv	wavs show the fair	market value of the good		ets.	
					ed less than fair market valu				•	
) the value of the goods,				-		-		
(a)Line n	o	(b) Amount involved	(c) Name of	f noncharitable	exempt organization	(d) Description	on of transfers, transactions, a	nd sharing arr	angement	s
				N/A						
	_									
										
	+-									
	+-		ļ —————			_				
										
	-		 							
0 1 1 4	<u> </u>									
					or more tax-exempt organi	zations described			T	No
		501(c) (other than section		CHON 527?				Yes	A	טאו נ
<u> </u>	res, co	mplete the following sch (a) Name of org			(b) Type of organization	<u> </u>	(c) Description of relati	onship		
		N/A			(b) Typo or organization		(0) 55551.511.511.511.511.511			
						 				
										
					accompanying schedules and st			May the IRS	discuss th	nis
Sign	and be	flef, it is true, correct, and com	nplete Declaration of pre	parer (other than	taxpayer) is based on all informa	tion of which preparer	has any knowledge	return with the shown below	e prepare	ď
Here		Jun IVI lea	··		1114/18	TRUST	EE	X Yes		No
	Sign	ature of officer or trustee			Date	Title				_
		Print/Type preparer's na	ame	Preparer's s	Ignature	Date	Check If PT	IN		
				1 //	/	1	self- employed		_	
Paid		MARY JO CO		<u> </u>		11/1/18		00147		
Prepa		Firm's name ► SEL	LARS & CO	LÉ, /LL	C		Firm's EIN ► 58-	22927	35	
Use (וחכ									

Phone no. 803-765-0083

Firm's address ▶ 602 MEETING STREET

WEST COLUMBIA, SC 29169-7590

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

Name of the organization

Employer identification number

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

	BA	RBA	RA J	UDY	THOMA	S MEMOI	RIAL	FOUND	OITA	N		57-6	03754	1
Organiz	ation type (check o	ne)												
Filers of	f:	Secti	ion:											
Form 99	0 or 990-EZ		501(c)	()(enter numb	er) organiza	tion							
			4947(a	a)(1) non	exempt ch	arıtable trust	t not trea	ted as a p	orivate fo	undation		`		
			527 pc	olitical o	rganızatıon -							,		
Form 99	00-PF	X	501(c)	(3) exem	npt private t	foundation								
			4947(a	a)(1) non	exempt ch	arıtable trust	t treated a	s a private	e founda	ation				
			501(c)	(3) taxat	ole private f	oundation								
	your organization is nly a section 501(c)		•			-		ie Genera	l Rule ar	nd a Special R	Rule Se	e instru	ctions	
X	For an organization property) from any													oney or
Special	Rules													
	For an organization sections 509(a)(1) any one contribute or (ii) Form 990-EZ	and 170 or, durin	0(b)(1)(A ng the y	۹)(vı), tha ear, tota	at checked al contribut	Schedule A	(Form 99	O or 990-E	EZ), Part	II, line 13, 16a	a, or 16	b, and t	that receiv	ved from
	For an organization year, total contribution of contribution o	itions o	of more	than \$1	,000 exclus	sively for relig	gious, cha	aritable, so						
	For an organization year, contributions is checked, enter he purpose Don't con religious, charitable	exclus nere the mplete	sively fo e total o any of t	or religion contribut the parts	us, charitat tions that w s unless the	ole, etc , purposer received e e General R	poses, bu d during th Rule appli	t no such ne year for es to this o	contribu r an <i>exc</i>	utions totaled clusively religio	more thous, cha	nan \$1,0 antable,	000 If this etc,	s box
but it m	i: An organization thust answer "No" on the organization the organization is a constant of the organization of the organizatio	Part IV	/, line 2	, of its F	orm 990, o	r check the	box on lin	e H of its	Form 99		•			•

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

BARBARA JUDY THOMAS MEMORIAL FOUNDATION

57-6037541

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	DAVID AND MONICA THOMAS 121 HAWTHORNE VALE RIDGELAND, MS 39157	\$ <u>36,600</u> .	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Moncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (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 Oncash Occash (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)

Employer identification number

BARBARA JUDY THOMAS MEMORIAL FOUNDATION

57-6037541

art II	Noncash Property (see instructions) Use duplicate copies of Pa	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_1	750 SHARES UNUM CORPORATION		
		\$\$	02/28/17
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
arti			
		\$	
(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

Employer identification number

t III'	JUDY THOMAS MEMORIAL Exclusively religious, charitable, etc., cont the year from any one contributor. Complete	ributions to organizations described in	57-6037541 n section 501(c)(7), (8), or (10) that total more than \$1,000 fo ying line entry. For organizations						
c	completing Part III, enter the total of exclusively religious	, charitable, etc., contributions of \$1,000 or le	ess for the year (Enter this info once) > \$						
No.	Jse duplicate copies of Part III if addition: (b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
_									
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee						
o. n t l	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
- -									
		(e) Transfer of gift	:						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee						
o. n	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
		(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee						
o. n	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
	(a). dipose of grit	(c) ose of grit	(a, sessinguon of now gift is field						
	(e) Transfer of gift								
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee						
_									

FORM 990-PF	DIVIDENDS	AND	INTEREST	FROM SI	ECUR	ITIES	SI	ATEMENT 1
SOURCE	GROSS AMOUNT	0	APITAL GAINS /IDENDS	(A) REVENT PER BOO	JE	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOME
CHARLES SCHWAB DIV	4,465.		0.	4,	165.	4	,465.	
TO PART I, LINE 4	4,465.		0.	4,4	165.	4	,465.	
FORM 990-PF		COF	RPORATE S	TOCK	<u>——</u>		ST	TATEMENT 2
DESCRIPTION	<u> </u>				воо	K VALUE	FA	IR MARKET VALUE
CHARLES SCHWAB						137,10	6.	228,089
				_				
TOTAL TO FORM 990-PF	, PART II,	LINE	ĭ 10B		-	137,10	6.	228,089
TOTAL TO FORM 990-PF			E 10B AND PENA	LTIES		137,10		228,089
	INTER 90-PF, PART LTY REST	REST		LTIES		137,10		
FORM 990-PF TAX DUE FROM FORM 99 UNDERPAYMENT PENALLATE PAYMENT INTELLATE PAYMENT PENAL	INTER 90-PF, PART LTY REST LTY	REST I VI				137,10	ST	FATEMENT 3 661 1 17 20
FORM 990-PF TAX DUE FROM FORM 9: UNDERPAYMENT PENAL LATE PAYMENT INTEL LATE PAYMENT PENAL TOTAL AMOUNT DUE	INTER 90-PF, PART LTY REST LTY	REST I VI	AND PENA	PENALTY	BAL	137,10	ST	FATEMENT 3 661 17 20 699
FORM 990-PF TAX DUE FROM FORM 99 UNDERPAYMENT PENAL LATE PAYMENT INTEL LATE PAYMENT PENAL TOTAL AMOUNT DUE FORM 990-PF	INTER 90-PF, PART LTY REST LTY 05/1	REST C VI	PAYMENT AMOU	PENALTY	BAL		ST	FATEMENT 3 661 17 20 699 FATEMENT 4 IS PENALTY

BARBARA JUDY THOMAS MEMORIAL FOUNDATION

FORM 990-PF	STATEMENT 5					
DESCRIPTION	DATE	AMOUNT	BALANCE	RATE	DAYS	INTEREST
TAX DUE EXTENSION PAYMENT DATE FILED	05/15/18 05/15/18 11/15/18	736. <75.>	736. 661. 678.	.0500		17.
TOTAL LATE PAYMENT	INTEREST					17.