

# EXTENDED TO APRIL 15, 2019 Return of Private Foundation

1801

Form 990-PF Department of the Treasury Internal Revenue Service		return of Privat or Section 4947(a)(1) Trust Treenter social security numbers of www.irs.gov/Form990PF for ins	ated as Private Foundation this form as it may be	made public	2017
For calendar year 2017	or tax year beginning	JUN 1, 2017	, and ending	MAY 31, 2018	
Name of foundation				A Employer identification	number
SOUTHERN S FOUNDATION	TATES EDUCATI , INC.	ONAL		58-6073809	
	ox number if mail is not delivered t	o street address)	Room/suite	D Tolophone nambol	
P.O. BOX 5	46			(912)232-1	101
	ovince, country, and ZIP or for	reign postal code		C If exemption application is po	ending, check here
SAVANNAH,	GA 31402				
G Check all that apply	Initial return	Initial return of a	former public charity	D 1. Foreign organizations	, check here 🕨 📖
	Final return	Amended return			
	Address change	Name change		2. Foreign organizations me check here and attach coi	eting the 85% test,

G (	Check all that apply Initial return Final return	Amended return	ormer public charity	Foreign organizations recheck here and attach	
	Address change  Check type of organization: X Section 501(c)(3) ex	Name change			
П		Other taxable private founda-	ation 04	E If private foundation s under section 507(b)(	
(fr	air market value of all assets at end of year   J   Accounting	ng method: X Cash her (specify)	Accrual	F If the foundation is in under section 507(b)(	a 60-month termination
	Analysis of Revenue and Expenses (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 income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	200,000.		N/A	1
	2 Check In the foundation is not required to attach Sch. B		····	Ó	
	3 Interest on savings and temporary cash investments	52.	52.		STATEMENT 1
	4 Dividends and interest from securities	3,579.	3,579.	- ·	STATEMENT 2
	5a Gross rents		<u> </u>		
	b Net rental income or (loss)				
	62 Not gave or (locs) from sale of assets not on line 10	45,304.		-	
ıne	b Gross sales price for all 212,166.	10,001			
Revenue	7 Capital gain net income (from Part IV, line 2)		45,304.		
Re	8 Net short-term capital gain		20,000	-	
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				1
	c Gross profit or (loss)				
	11 Other income	_			
	12 Total. Add lines 1 through 11	248,935.	48,935.		
	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
ses	16a Legal fees RECEIVED				
en	b Accounting fees STMT 3 Q	750.	375.		0.
EX	c Other profes hal fees AN 09 2019				
ķ	c Other profets hal fees AN 0 9 2019				
ratı	18 Taxes STMT 4 C	7.	0.		0.
ııst	19 Depreciation and deprecia DEN, UT				
Administrative Expenses	20 Occupancy				
Ad	21 Travel, conferences, and meetings				
and	22 Printing and publications				
- 70	N 23 Other expenses STMT 5	2,128.	2,028.		0.
Operating	24 Total operating and administrative				
per	expenses. Add lines 13 through 23	2,885.	2,403.		0.
O	25 Contributions, gifts, grants paid	180,000.			180,000.
	26 Total expenses and disbursements.				-
	Add lines 24 and 25	182,885.	2,403.		180,000.
	27 Subtract line 26 from line 12;				
	Excess of revenue over expenses and disbursements	66,050.			
	b Net investment income (if negative, enter -0-)		46,532.		1
	1			3T / 3	

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

c Adjusted net income (if negative, enter -0-)

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N/A

SOUTHERN STATES EDUCATIONAL Form 990-PF (2017) 58-6073809 FOUNDATION, INC. Page 2 Beginning of year End of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (c) Fair Market Value (a) Book Value (b) Book Value 37,634 Cash - non-interest-bearing 10,866. 37,634. 2 Savings and temporary cash investments 3 Accounts receivable ▶ Less: allowance for doubtful accounts 4 Pledges receivable ▶ Less; allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less; allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 141,728. 181,010. 183,899. b Investments - corporate stock STMT 6 c Investments - corporate bonds 11 Investments land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 1. 多次的 14 Land, buildings, and equipment basis I Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 152,594 218,644 instructions. Also, see page 1, item I) ,533 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31. or Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted ightharpoonsFoundations that do not follow SFAS 117, check here and complete lines 27 through 31 53,128 53,128 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 99,466. 165,516 29 Retained earnings, accumulated income, endowment, or other funds 152,594. 218,644 30 Total net assets or fund balances 152,594. 218,644 31 Total liabilities and net assets/fund balances Partilli Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
(must agree with end-of-year figure reported on prior year's return)	1	152,594.
2 Enter amount from Part I, line 27a	2	66,050.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	218,644.
5 Decreases not included in line 2 (itemize)	5	/ 0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	218,644.

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Part IV Capital Gains and L	osses for Tax on Inve	stmen	Income						
	(s) of property sold (for example , or common stock, 200 shs Mi		te,	JΈP	How ac - Purc - Dona		(c) Date (mo., d	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a PER ATTACHED SCHEDULE					P				
b PER ATTACHED SCHEI	ULE					P			
С							_		
d				<u> </u>					
				<u>L</u> ,					
(e) Gloss sales price	) Depreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss (f) minus (	(g))
a 50,931.			45,72						<u>5</u> ,203.
b 161,235.			121,13	4.					40,101.
С									
d	<u>.                                    </u>			_					
e			10/01/00						
Complete only for assets showing gain in	<del></del>					(I)	Gains (C	ol (h) gain iot less thai	MINUS
(1) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any		col (k), but not less than -0-) <b>o</b> r Losses (from col. (h))			h))	
a							_		5,203.
<u>b</u>									40,101.
С									
d									
е					-	·			
2 Capital gain net income or (net capital los	$\begin{cases} If gain, also enter in P \\ If (loss), enter -0- in P \end{cases}$	Part I, line Part I, line	7 7	}[	2		_		45,304.
3 Net short-term capital gain or (loss) as de	•								
If gain, also enter in Part I, line 8, column	` ' '	,-		] ]					
If (loss), enter -0- in Part I, line 8				لل	3			N/A	
	Section 4940(e) for Re					nent inc	ome		
(For optional use by domestic private founda	tions subject to the section 4940	)(a) tax on	not invostment in	como	1.)				
If section 4940(d)(2) applies, leave this part l	olank,								
Was the foundation liable for the section 494		t of any yo	or in the bace ner	nod?					Yos X No
If "Yes," the foundation doesn't qualify under									
I Enter the appropriate amount in each col				ntnes	·				<del> </del>
(a)	(b)			(c)			Ī	Distant	(d)
Base periód years Calendar year (or tax year beginning in)	Adjusted qualifying distribu	itions	Net value of no			use assets	] (	col. (b) div	ided by col (c))
2016	10,	000.			17	9,115	•		.055830
2015	25,	000.			18	5,126	•		.135043
2014	20,	000.				8,587			.100712
2013	43,	722.				7,280			.210932
2012	35,	147.			20	7,474	•		.169404
	<u></u>								
2 Total of line 1, column (d)							2		.671921
3 Average distribution ratio for the 5-year b	•	ne 2 by 5.0	), or by the number	er of y	ears/		1 1		
the foundation has been in existence if les	s than 5 years						3		.134384
4 Enter the net value of noncharitable-use a	ssets for 2017 from Part X, line	5					4		200,093.
	,								
5 Multiply line 4 by line 3							5		26,889.
6 Enter 1% of net investment income (1% of	f Part I, line 27b)						6	<u> </u>	465.
7 Add lines 5 and 6							7		27,354.
8 Enter qualifying distributions from Part XI	I, line 4						8		180,000.
If line 8 is equal to or greater than line 7, o	heck the box in Part VI, line 1b,	and comp	lete that part using	g a 19	% tax r	ate.			

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Part VI Excise Tax Based on Investment Income (Section	4940(a), 4940(b), 4940(e), or 4948 -	see instr	uctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here				
Date of ruling or determination letter: (attach copy of lette				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check his	ere 🕨 🗶 and enter 1%		4	65.
of Part I, line 27b				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, e	<u>  </u>			لــِــ
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations of				0.
3 Add lines 1 and 2	3		4	65.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	· · · · · · · · · · · · · · · · · · ·			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter-	0-		4	65.
6 Credits/Payments:				
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a 0.			i
b Exempt foreign organizations - tax withheld at source	6b 0.			i
c Tax paid with application for extension of time to file (Form 8868)	60 0.			l
d Backup withholding erroneously withheld	6d 0.			لب
7 Total credits and payments. Add lines 6a through 6d	7			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220	<del></del>			0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		4	65.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount over	·			
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Part VII-A   Statements Regarding Activities	Refunded ▶ 11			
	al logislation or did it participate or intervione in	<del></del>	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local any political campaign?	ar legislation of tild it participate of intervene in	la 1a	163	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political	nurnoses? See the instructions for the definition	1b	├──	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and c		15	$\vdash$	<u> </u>
distributed by the foundation in connection with the activities.	opies of any materials published of			
c Did the foundation file Form 1120-POL for this year?		1c	<del> </del>	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed dur	ing the year	10		<del></del>
(1) On the foundation $\blacktriangleright$ \$ 0 • (2) On foundation ma				
e Enter the reimbursement (if any) paid by the foundation during the year for political e		Ì		
managers. > \$ 0.	Approximate as impress on reuniquitien			1
2 Has the foundation engaged in any activities that have not previously been reported to	o the IRS?	2	<u> </u>	<u>x</u>
If "Yes," attach a detailed description of the activities.		<u>  -</u>	<del>                                     </del>	<u> </u>
3 Has the foundation made any changes, not previously reported to the IRS, in its gove	erning instrument, articles of incorporation, or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		3	<u> </u>	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during t		4a		Х
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/	/A 4b	$\vdash$	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the		5	$\vdash$	X
If "Yes," attach the statement required by General Instruction T				
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfies	sfied either:			
By language in the governing instrument, or				
By state legislation that effectively amends the governing instrument so that no ma	ndatory 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 ins	tructions			
<u>GA</u>				-
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to	o the Attorney General (or designate)			
of each state as required by General Instruction G2If "No " attach explanation		1 86	l x	1

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 tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV

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

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Part VII-A | Statements Regarding Activities (continued)

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Tary VII-A   Otatements regarding Activities (Continued)				
		<u> </u>	Yes	No
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	and and was are observed.	11		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person h	iad advisory privileges?	12		
If "Yes," attach statement. See instructions  13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application	2	13	Х	X
Website address ► N/A	•		21	<u> </u>
	elephone no. ► (912)	232	-11	01
Located at P.O. BOX 546, SAVANNAH, GA	ZIP+4 ▶31			<del></del>
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			•	$\Box$
and enter the amount of tax-exempt interest received or accrued during the year	<b>▶</b>   15	N	/A	
16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over	a bank,		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		<u></u>		
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Requ	ire <u>d</u>			
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		$\perp$	Yes	No
1a During the year, did the foundation (either directly or indirectly):				
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	Yes X No			
a disqualified person?	Yes X No	1		
<ul><li>(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?</li><li>(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?</li></ul>	Yes X No			
(5) Transfer any income or assets to a disqualified person (or make any of either available	165 <u>_</u> Z 140			
for the benefit or use of a disqualified person)?	Yes X No			
(6) Agree to pay money or property to a government official? (Exception. Check "No"	103 22 100			
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	1 1		
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	N/A	1b		
Organizations relying on a current notice regarding disaster assistance, check here	▶`□			
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not	corrected			
before the first day of the tax year beginning in 2017?		1c		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operatin defined in section 4942(j)(3) or 4942(j)(5))	g foundation			
a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year	ar(s) beginning		1	
before 2017?	Yes X No			
If "Yes," list the years <b>&gt;</b>				
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating	ng to incorrect			
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "I				
statement - see instructions )	N/A	2b		L
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		1 1		. 1
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	_			
during the year?	Yes X No			
b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualific		1 1		
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 49 of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use				i I
Form 4720, to determine if the foundation had excess business holdings in 2017.)	N/A	3b	—	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	IA / IZ	4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its char	itable ouroose that		-	
had not been removed from jeopardy before the first day of the tax year beginning in 2017?	parpood triat	4b		X
	Fo	rm <b>99</b> 0	)-PF	

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:				Ye	s No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗶 No		1 7
(2) Influence the outcome of any specific public election (see section 4955), of		1		1 1	
any voter registration drive?			es X No	1	1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes	Y <sub>1</sub>	es 🗶 No	.	1	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
4945(d)(4)(A)? See instructions		Y	es 🗶 No		1 (
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			ł	-
the prevention of cruelty to children or animals?		Ye	es X No		
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify unit	der the exceptions described i	n Regulations	_ا	_	_ 1
section 53.4945 or in a current notice regarding disaster assistance? See instr	uctions		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check	here			- '	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for	rom the tax because it maintai	ined	_ [	[	1 [
expenditure responsibility for the grant?	N	Γ/A ☐ Ye	es 🔲 No	·	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				ĺ	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				1 1
a personal benefit contract?		Ye	es 🗶 No	_	_ }
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		j -	6b	X
If "Yes" to 6b, file Form 8870			Γ		1
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	<del>                                     </del>
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highl	<del></del>		
Paid Employees, and Contractors	<del> </del>	<del></del>			
1 List all officers, directors, trustees, and foundation managers and t		L (-) Componentian	170		
(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	accou allov	xpense nt, other /ances
F. REED DULANY, III	TRUSTEE				
P.O. BOX 546					
SAVANNAH, GA 31498	1.00	0.	0.		<u> </u>
JOHN DURHAM	TRUSTEE				
P.O. BOX 546					
SAVANNAH, GA 31498	1.00	- 0.	0,		0.
	TRUSTEE				
P.O. BOX 546					
SAVANNAH, GA 31498	1.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those inc		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	accou	xpense nt, other vances
NONE				i	
<u> </u>				1	
	-				
•					<del></del>
<del></del>				]	
				1	
			_		
Total number of other employees paid over \$50,000	<del> </del>				<u> </u>
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly

Paid Employees, and Contractors (continued)	3 ., 3 .	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	<u></u>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	7	
	7	
	7	
	7	
<del>-</del>		
<del>-</del>	1	
Total number of others receiving over \$50,000 for professional services	<u> </u>	▶ 0
Part IX-A Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statisti	cal information such as the	·-··
number of organizations and other beneficiaries served, conforences convened, recearch papers produ	uced, etc.	Expenses
1 N/A		
` <u> </u>		
<u> </u>		
3	<del></del>	
4		
` <u> </u>		
Part IX-B Summary of Program-Related Investments	<u></u>	<del></del>
Describe the two largest program related investments made by the foundation during the tax year on li	nes 1 and 2.	Amount
1 N/A		<del></del>
<del></del>		
?		
All other program-related investments See instructions.	-	<del>-</del>
3		
	<del></del>	
Total Add lines 1 through 3	▶	0.

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1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	178,890.
b	Average of monthly cash balances	1b	24,250.
C	Fair market value of all other assets	1c	-
d	Total (add lines 1a, b, and c)	1d	203,140.
e	Reduction claimed for blockage or other factors reported on lines 1a and		·
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	O.
3	Subtract line 2 from line 1d	3	203,140.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,047.
5	Net value of noncharitable use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	200,093.
6	Minimum investment return Enter 5% of line 5	6	10,005.
ĮP.	art XII Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	nd certain	
_	foreign organizations, check here  and do not complete this part.)	111	10,005.
1	Minimum investment return from Part X, line 6  Tax on investment income for 2017 from Part VI, line 5  2a 465		
2a			
b	Income tax for 2017 (This does not include the tax from Part VI.)  Add lines 2a and 2b	2c	465.
C	Distributable amount before adjustments Subtract line 2c from line 1	3	9,540.
3	Recoveries of amounts treated as qualifying distributions	4	0.
4 5	Add lines 3 and 4	5	9,540.
-	Deduction from distributable amount (see instructions)	6	0.
6 7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	9,540.
		1 ' 1 .	3,3100
P.	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	_180,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		·
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	180,000.
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	465.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	179,535.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualifies for th	e section

Form **990-PF** (2017)

Page 9

Part XIII Undistributed Income (see instructions)

	- (a) Corpus	(b) Years prior to 2016	(c) 2016	( <b>d</b> ) 2017
4. Destributable assessment for 00 47 (see a Dest VI	- Corpus	100.0 p.10. to 20.10	20.10	
1 Distributable amount for 2017 from Part XI, line 7				9,540.
2 Undistributed income, if any, as of the end of 2017	<del>, · · · - · · · · · · · · · · · · · · · </del>		<u> </u>	
a Enter amount for 2016 only			0.	
<b>b</b> Total for prior years:				
b Total for prior years.		0.	-	
3 Excess distributions carryover, if any, to 2017:				
a From 2012 24,979.				
bFrom 2013 33,914.				
c From 2014 10,557.				!
dFrom 2015 15,982.				
eFrom 2016 1,293.				
f Total of lines 3a through e	86,725.			
4 Qualifying distributions for 2017 from				
Part XII, line 4 ► \$ 180,000.		1		
a Applied to 2016, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				9,540.
e Remaining amount distributed out of corpus	170,460.			
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	257,185.			· _
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed	·	0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2016 Subtract line			•	
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2017. Subtract	ſ	1		
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				Q.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by		į		
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	24,979.			
9 Excess distributions carryover to 2018.				•
Subtract lines 7 and 8 from line 6a	232,206.		<del></del>	
0 Analysis of line 9.				
a Excess from 2013 33,914.			i	
b Excess from 2014 10,557.	[	ſ		
c Excess from 2015 15,982.		!		
d Excess from 2016 1,293.				
e Excess from 2017 170, 460.				

SOUTHERN STATES EDUCATIONAL Form 990-PF (2017) FOUNDATION, INC. 58-6073809 Page 10 Part, XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling 4942(1)(3) b Check box to indicate whether the foundation is a private operating foundation described in section or 4942(1)(5) Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (b) 2016 (c) 2015 (d) 2014 (a) 2017 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV | Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here 🕨 🗓 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include.

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

c Any submission deadlines:

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FOUNDATION, INC.

58-6073809

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Part: XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation status of recipient Purpose of grant or contribution Amount any foundation manager or substantial contributor Name and address (home or business) a Paid during the year SAVANNAH CLASSICAL ACADEMY AT ST. GENERAL USE PIUS 705 EAST ANDERSON STREET 180,000. SAVANNAH, GA 31401 Total **▶** 3a 180,000. Approved for future payment NONE 0. Total **▶** 3b

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# . Part'XVI-A Analysis of Income-Producing Activities

	T - Uproloto	Thusiages ingome	T = -		
Enter gross amounts unless otherwise indicated	(a) Business	(b) Amount	(C) Exclu- sion	(d)	(e) Related or exempt
1 Program service revenue.	code	Amount	code	Amount	function income
a					
b					
C					
d					
e		<del></del>			
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash		<u>-</u>			<del>_</del>
investments			14	52.	
4 Dividends and interest from securities	<del>                                     </del>	<del> </del>	14		
5 Net rental income or (loss) from real estate.	-  -			, <del>, , , , , , , , , , , , , , , , , , </del>	===
a Debt-financed property			<del>-</del>		
b Not debt-financed property	<del>                                     </del>	<del></del>	<del>                                     </del>		
	<del>                                     </del>		├─-		
6 Net rental income or (loss) from personal	1 1				
property	<del>  -   -   -   -   -   -   -   -   -   -</del>	·· <del>··</del>			
7 Other investment income	<u> </u>	<del></del>			
8 Gain or (loss) from sales of assets other	1		10	45 204	
than inventory			18	45,304.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a	1		<u> </u>		
b		· <del></del> .			<u> </u>
c		<u> </u>			
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0.		48,935.	<u> </u>
13 Total Add line 12, columns (b), (d), and (e)				13	48,935.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI:B Relationship of Activities to Line No. Explain below how each activity for which income					onlichment of
the foundation's exempt purposes (other than			COILLI	Juled importantly to the accom	ipiisiintent oi
		-			<del></del>
		_			
	<del></del>				. <del></del> _
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		<del></del>		·	
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<del></del>				<del></del>	
<del></del>					<del></del>
	<u>-</u>				

Form 990-PF (2017)

FOUNDATION, INC.

58-6073809 Page 13

Pa		nformation Regarding exempt Organizations		Transactions ar	nd Relationships	With Noncha	ıritable
1	Did the organia	ation directly or indirectly engage	e in any of the following will	th any other organization	n described in section 50	)1(c)	

	•			g with any other organization		טוו טט ו(ט)	1 1763	140
(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?								
a Transfers from the reporting foundation to a noncharitable exempt organization of.							<u> </u>	ئـــا.
(1) Cash							1a(1)	Х
(2) Other assets								X
<b>b</b> Other tra	nsactions;				4			
(1) Sale	s of assets to a noncharital	ble exempt organizat	ion		•		1b(1)	X
(2) Puro	chases of assets from a no	ncharitable exempt o	rganization				1b(2)	X
(3) Rental of facilities, equipment, or other assets								X
(4) Rein	nbursement arrangements						1b(4)	X
	ns or loan guarantees						1b(5)	X
	ormance of services or me	mbership or fundrais	sing solicitatio	ns			1b(6)	X
. ,	of facilities, equipment, ma	·	-				1c	X
-		-		· ·	ways show the fair m	narket value of the goods, of	ــــــــــــــــــــــــــــــــــــــ	
	•	•	•	• •	•	or sharing arrangement, sh	-	
	(d) the value of the goods,			od 1000 tildii idii markot vale	o in any aonoaoaon	or onaring arrangement, si	O	
(a)Line no	(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, and s	haring aganger	nants
(U)Line no	(B)/Amount myored	(b) Namo of	N/A		(a) Description	or unisiers, transactions, and s	arrangen	
			N/A		<del> </del>	<del>_</del>		
<del></del>	<del></del>	_ <del></del>		<del></del>	<del> </del>	<del></del>		
					<del> </del>	<del></del>		
					<u> </u>	<del>_</del>		
	<u> </u>							
		<u> </u>						
1 -								
				<del> </del>		<del>-</del>		
2a Is the for	indation directly or indirect	lly affiliated with, or r	elated to one	or more tax-exempt organi	zations described			
	n 501(c) (other than section	-		or more tax exempt organi	24	Г	Yes 🔀	<b>∑</b> No
	complete the following sch		50011 527				_ 100	
<b>U</b> 11 163, C	(a) Name of org		-	(b) Type of organization		(c) Description of relationsh	ın	<del></del>
	N/A	amzation		(b) Typo of organization	<u> </u>	(v) beser priori or rolations in	<u> </u>	
	N/A				<del></del>			
	<del></del>			<del></del>	<u> </u>			
				g accompanying schedules and n taxpayer) is based on all inform		May	the IRS discuss	this
Sign   L		$\supset \cap$				show	n below? See ii	nstr
Here	100-10			1-2-19	TRUSTE	E	Yes	_ No
Sig	inature of officer or trustee			Date	Title			
	Print/Type preparer's na	me	Preparer's si		Date	Check if PTIN		_
	1		11	2 8 min tinh	<u> </u>	self- employed		
						543726	<u>,                                     </u>	
Preparer Firm's name ► HANCOCK ASKEW & CO., LLP Firm's EIN ► 58-066						62558		
Use Only	Use Only							
•	Firm's address ▶ 10	0 RIVERVI	EW DRI	VE		<del></del>		
		VANNAH, G				Phone no. 912-23	4-824	3
						<del>*                                      </del>	m 990-PF	

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number

SOUTHERN STATES EDUCATIONAL FOUNDATION, 58-6073809 INC. 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 501(c)(3) exempt private foundation Form 990 PF 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** [X] 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 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II. 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, chantable, 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, chantable, 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

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization SOUTHERN STATES EDUCATIONAL FOUNDATION, INC.

Employer identification number

58-6073809

Partill.	Contributors (see instructions) Use duplicate copies of Part I if a	dditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DULANY INDUSTRIES  PO BOX 546  SAVANNAH, GA 31401	\$200,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	-	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II for noncash contributions )
723452 11-01	-17	Schedule B (Form	990, 990-EZ, or 990-PF) (2017)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization SOUTHERN STATES EDUCATIONAL FOUNDATION, INC.

Employer identification number

58-6073809

Part 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
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
723453 11-01-		Schodulo R (Form)	990, 990-EZ, or 990-PF) (201

	B (Form 990, 990-EZ, or 990 PF) (2017)			Page 4						
Name of org				Employer identification number						
	ERN STATES EDUCATIONAL			FO 6053000						
FOUND	ATION, INC. 1 Exclusively religious, charitable, etc., cont	ributions to organizations described in	section 5011/c)(/) (8) o	58-6073809						
Part III	the year from any one contributor. Complete of	columns (a) through (e) and the following	3 line entry, For organization	ns						
	completing Part III, enter the total of exclusively religiou	s, charitable, etc., contributions of \$1,000 or less	s for the year (Enterthis info on	Se) ► \$						
(a) No.	Use duplicate copies of Part III if addition	al space is needed	<del>-</del> 1							
from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held						
Part I			<del></del>							
ľ	<del></del>	<del></del>	-							
	- <del></del> :		_							
			- I <del></del>							
ř	(e) Transfer of gift									
	(-, · · · · · · · · · · · · · · · · · · ·									
L	Transferee's name, address, a	Relationship of tra	ansferor to transferee							
ļ										
				<del></del>						
(a) No	<u> </u>									
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held						
Part I				<del></del>						
1			-							
		<del></del>	_							
	<u> </u>		_							
		(e) Transfer of gift								
ļ		(4)								
L	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee							
ľ		<del></del>   <del></del>		· <del>-</del>						
(a) No.			<del>-                                    </del>							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held						
1 4										
1				· <del>_</del>						
	(e) Transfer of gift									
}	Transferee's name, address, ar	Helationship of tra	ensferor to transferee							
		·		<del></del>						
				·····						
(a) No. from Part I	(L) D	(-M1)		makes of horses the total						
Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held						
Ĵ			_							
			_							
			_							
-										
,	(e) Transfer of gift									
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee									
-	ii ansieree's name, address, ar	1U &IF + 4	neiationship of tra	maier or to u disteree						
			<del>_</del>							

FÓRM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY CA	SH IN	VESTMENTS	STATEMENT 1
SOURCE	(A REVE PER B	NUE N	ET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME	
MONEY MARKET			52.		52.	
TOTAL TO PART I, LI		52.		52.		
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM	SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVE	NUE SOOKS	(B) NET INVES MENT INCO	(C) T- ADJUSTED ME NET INCOME
COMMON STOCKS	3,579	•	0. 3	,579.	3,57	9.
TO PART I, LINE 4	3,579	•	0. 3	,579.	3,57	9.
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT 3
DESCRIPTION	<b></b>	(A) EXPENSES PER BOOKS		ST-	(C) ADJUSTED NET INCOM	CHARITABLE
HANCOCK, ASKEW & CO	•	750.		375.		0.
TO FORM 990-PF, PG	1, LN 16B =	750.		375.		0.
FORM 990-PF		TAX	ES			STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM	
INCOME TAXES		7.		0.		0.
TO FORM 990-PF, PG	1, LN 18	7.		0.		0.

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME				
INVESTMENT FEES MISC	2,028.			0.		
TO FORM 990-PF, PG 1, LN 23	2,128.	2,028	•	0.		
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6		
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE		
CORPORATE STOCKS		<del></del>	181,010.	183,899.		
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		181,010.	183,899.		