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2018

OMB No 1545-0052

# **Return of Private Foundation**

Form 990-PF

Department of the Treasury

Internal Revenue Service

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2018, or tax year beginning 01-01-20	)18 , ar	nd ending 12-31-	2018		
		undation ERT E & JENNY D KIRKLAND		A Employer ide	entification numbe	r	
FC	UNDAT	TON		13-4228589			
		d street (or P O box number if mail is not delivered to street address; LFOOT AVENUE	i i	B Telephone number (see instructions) (615) 310-0648			
		n, state or province, country, and ZIP or foreign postal code /, TN 38261		<b>C</b> If exemption	application is pendin	g, check here	
<b>G</b> CI	neck al	Il that apply	former public charity	<b>2</b> Foreign or test, check	ganizations, check he ganizations meeting k here and attach co	the 85% mputation	
<b>H</b> C	neck ty	$ \sqrt{pe} $ of organization $ \sqrt{2} $ Section 501(c)(3) exempt private	foundation		indation status was t n 507(b)(1)(A), chec		
		1 4947(a)(1) nonexempt charitable trust U Other taxabl	e private foundation				
of	year (f	ket value of all assets at end from Part II, col (c),  ▶\$ 148,775,929  J Accounting method  □ Other (specify) (Part I, column (d) must	Cash L Accru		tion is in a 60-montl 1 507(b)(1)(B), chec		
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc , received (attach schedule)	6,097,092				
	2	Check $\blacktriangleright$ $\square$ if the foundation is <b>not</b> required to attach	3,037,032				
	3	Sch B Interest on savings and temporary cash investments	727,151	727,151			
	4	Dividends and interest from securities	247,518	247,518			
	5a	Gross rents					
	ь	Net rental income or (loss)	-				
Пе	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	b	Gross sales price for all assets on line 6a					
ă	7	Capital gain net income (from Part IV, line 2)					
	8	Net short-term capital gain					
	9	Income modifications					
	10a b	Gross sales less returns and allowances Less Cost of goods sold					
	c c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	10,896,842	10,896,842			
	12	Total. Add lines 1 through 11	17,968,603	11,871,511			
	13	Compensation of officers, directors, trustees, etc	400,000	400,000			
	14	Other employee salaries and wages					
98	15	Pension plans, employee benefits					
Su	16a	Legal fees (attach schedule)					
<u>×</u>	ь	Accounting fees (attach schedule)	44,670	44,670			
and Administrative Expenses	c	Other professional fees (attach schedule)	103,811	103,811			
Ĭ	17	Interest					
stra	18	Taxes (attach schedule) (see instructions)	<b>9</b> 26	26			
Ē	19	Depreciation (attach schedule) and depletion					
Ę	20	Occupancy					
ďΡ	21	Travel, conferences, and meetings	129	129			
a	22	Printing and publications					
<u>j</u>	23	Other expenses (attach schedule)	257,160	257,160			
Operating	24	Total operating and administrative expenses.					
<u>8</u>		Add lines 13 through 23	805,796	805,796		0	
U	25	Contributions, gifts, grants paid	7,274,689			7,274,689	
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	8,080,485	805,796		7,274,689	
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements	9,888,118				
	b	Net investment income (if negative, enter -0-)		11,065,715			
Ea-	C	Adjusted net income (if negative, enter -0-)		C-1 N 41355		000 PE (2015)	
ror	raper	work Reduction Act Notice, see instructions.		Cat No 11289X	. For	m <b>990-PF</b> (2018)	

82.750,654

5,725,353

42,879,836

12,063,010

148,775,929

12,063,010

148,775,929

35,613,000

35,613,000

113,162,929

113,162,929 148.775.929

117,932,621

127,820,739

14,657,810

113,162,929 Form 990-PF (2018)

9,888,118

1

2

3

4

5

6

	3	Accounts receivable				
		Less allowance for doubtful accounts ▶			İ	
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶82,750,654				
		Less allowance for doubtful accounts ▶	87,827,337	<b>%</b> j	82,750,654	
S.	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
&	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)	66,807,719	<b>%</b> }	5,725,353	
	С	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)		<b>*</b>	42,879,836	
	14	Land, buildings, and equipment basis				

\*

3,231,466

38,844,466

117,932,621

117,932,621

156,777,087

### Less accumulated depreciation (attach schedule) ▶ 15 Other assets (describe > \_ 16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I) 156,777,087 17 35,613,000 Accounts payable and accrued expenses . 18 Grants payable Deferred revenue . 19

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

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.

Foundations that do not follow SFAS 117, check here

Capital stock, trust principal, or current funds . . . .

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total liabilities and net assets/fund balances (see instructions) .

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

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

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

Total net assets or fund balances (see instructions) . . .

Liabilities

or Fund Balances

Assets

Net 30

2

3

4 5 20 21

22

23

24

25

26

27 28

29

31 Part III Other liabilities (describe .

Unrestricted

Temporarily restricted Permanently restricted .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3 . . . . . .

Decreases not included in line 2 (itemize) ▶

Ollin	330-F1 (2010)										age <b>c</b>
Pai	rt VIII-B Statements Regard	ding	Activities for Which	Form 4720 May Be	Required (co	ntınue	d)				
<b>5a</b> During the year did the foundation pay of			or incur any amount to							Yes	No
	(1) Carry on propaganda, or otherw	vise a	ttempt to influence legisla	ation (section 4945(e))?	Γ	Yes	~	No			
	(2) Influence the outcome of any sp	pecific	public election (see sect	ion 4955), or to carry							
	on, directly or indirectly, any vo		-		[	Yes	<b>✓</b>	No			
	(3) Provide a grant to an individual	for tr	avel, study, or other sımı	lar purposes?		Yes	<b>✓</b>	No			
	(4) Provide a grant to an organizati			· -							
	in section 4945(d)(4)(A)? See in					Yes	<b>✓</b>	No			
	(5) Provide for any purpose other t										
	educational purposes, or for the	•	•		• •	Yes	✓	No			
b	If any answer is "Yes" to 5a(1)–(5),		•			ed in					
	Regulations section 53 4945 or in a						•		5b		
	Organizations relying on a current n		-			. •					
С	If the answer is "Yes" to question 5			•	_	_	_				
	tax because it maintained expenditu		-			Yes	Ш	No			
_	If "Yes," attach the statement requi		=	* *							
6a	Did the foundation, during the year,				ims on	_	_				
	a personal benefit contract?				•	Yes	✓	No	6.		N
D	Did the foundation, during the year,	, pay	premiums, directly or ind	irectly, on a personal bei	nerit contract?.		•		6b		No
<b>7</b> -	If "Yes" to 6b, file Form 8870	- +b-	foundation a nauty to a n	rabibited toy chalter tron	esetion? =	,	_				
7a	At any time during the tax year, wa				<u> </u>	Yes	✓	No	7b		
8	If yes, did the foundation receive ar Is the foundation subject to the sec		•						76		
0	excess parachute payment during th					) 					
						Yes		No			
Pai	t VIII Information About (	Offic	ers, Directors, Trust	ees, Foundation Ma	inagers, High	ly Pai	d Er	nplo	yees,		
1_	List all officers, directors, truste						_				
	(a) Name and address		<b>b)</b> Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contrib employee bene					se acc	
	(-,		devoted to position	-0-)	deferred com			٥	ther a	lowand	es
CHRIS	STOPHER KIRKLAND		DIRECTOR	100,000			C				C
	ESTESWOOD DRIVE VILLE, TN 37215	000 C	00								
	D KIRKLAND	DIRE	CTOR	100,000				+			
	WILLIAM HOWARD TAFT	000 0		100,000				Ί			
	NNATI, OH 45206										
JENN	/ D KIRKLAND	PRES	/DIRECTO	100,000			C				C
	ANDERS CHAPEL ROAD N CITY, TN 38261	0000	00								
	ORD F KIRKLAND	DIRE	CTOR	100,000							
	W MAIN STREET	000 0		100,000				Ί			•
LEBAI	NON, TN 37087										
2	Compensation of five highest-pa	id en	ployees (other than th	ose included on line 1				ne, e	nter "	NONE.	."
<b>(~)</b>	Name and address of each employee	naid	(b) Title, and average		(d) Contrib employee			(0)	Evnon	se acco	unt
(a)	more than \$50,000	paiu	hours per week	(c) Compensation	plans and					owance	
			devoted to position		compens	ation					
NON	<u> </u>										
					1		T				
Tota	I number of other employees paid ov	er \$5	0,000	<del></del> .	<u> </u>	•					
								For	m <b>99</b> 0	D-PF (	2018

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Part VIII Information About Officers, Directors, Trustee and Contractors (continued)	s, Foundation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional ser	vices (see instructions). If none, enter "NOI	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Include organizations and other beneficiaries served, conferences convened, research papers pr		Expenses
1 PROMETHEAN FOUNDAION, UNION CITY, TENNESSEE SERVES THE LOC SCHOLARSHIPS TO QUALIFYING APPLICANTS TO INCREASE THE SOCIA		
AVAILABLE TO THESE CHILDREN		1,785,992
2 DISCOVERY PARK OF AMERICA'S MISSION IS EDUCATION TO ENHANC EXPERIENCES AND TO INSPIRE THEM TO REACH THEIR FULL POTENTIA PROGRAMS COMPEL VISITORS OF ALL AGES TO "SEE BEYOND" THEIR AREAS DISCOVERY PARK FOCUSES ON NATURE, SCIENCE, TECHNOLO FOR THE ERECTION OF THE DISCOVERY PARK OF AMERICA	AL DISCOVERY PARK'S EXHIBITS AND CURRENT LEVEL OF KNOWLEDGE IN MANY	5,346,497
3 UNION CITY ROTARY CLUB - IS THE LOCAL CHAPTER OF THE ROTARY I ROTARY IS TO PROVIDE SERVICE TO OTHERS, PROMOTE INTEGRITY, A GOODWILL, AND PEACE THROUGH ITS FELLOWSHIP OF BUSINESS, PR THE UNION CITY ROTARY CLUB SPONSERS THE LARGEST SCHOLARSHI COUNTY HIGH SCHOOL GRADUATES THEY ALSO SPONSER OR SUPPOPARK OF AMERICA, OBION COUNTY DISTINGUISHED SPEACKERS, REA PROMETHEAN FOUNDATION	ND ADVANCE WORLD UNDERSTANDING, OFESSIONAL, AND COMMUNITY LEADERS IP PROGRAM IN THE AREA FOR THE CITY AND RT THE FOLLOWING PROJECTS DISCOVERY	51,000
4 CINCINNATI COUNTRY DAY SCHOOL, FOUNDED IN 1926, IS AN INDEPTUBLE OF THE PROVIDE EACH OF SUCCESS IN COLLEGE AND LIFE THEY INSPIRE A PASSION FOR LITHROUGH A STEADFAST COMMITMENT OF ACADEMIC EXCELLENCE, PEOTHERS	H STUDENT WITH SUPERIOR PREPARATION EARNING AND INDEPENDENT THINKING	10,000
Part IX-B Summary of Program-Related Investments (se	e instructions)	10,000
Describe the two largest program-related investments made by the foundation durin	<u>'</u>	Amount
1 N/A	g the tax year on lines I and 2	Amount
2		
All other manuals related investments.		
All other program-related investments See instructions  3		
Total. Add lines 1 through 3		
		Form <b>990-PF</b> (2018)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . . . . . . . .

3

4

5

2

3a 3h

4

5

7,274,689

110.657

7.164.032

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3,213,103

3,213,103

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Part XIII	Und

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Part XIII	Undistributed Income (see instruc	tions)					

- 1 Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only. . . . . .
- **b** Total for prior years Excess distributions carryover, if any, to 2018
- a From 2013. . . . . 861.745 4,088,028 **b** From 2014. . . . .
- c From 2015. . . 2.502.957
- d From 2016. . . . .
- 3.283.142 e From 2017. . . . . f Total of lines 3a through e. . . . . . . . 4 Qualifying distributions for 2018 from Part

**d** Applied to 2018 distributable amount. . . . . e Remaining amount distributed out of corpus

5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 **b** Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . . . f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 . . . . . 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 2013 not

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . . . .

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . .

c Excess from 2016. . . .

d Excess from 2017. . .

e Excess from 2018. . .

**b** Excess from 2015. .

6 Enter the net total of each column as

indicated below:

- 3,647,554
- XII, line 4 > \$ 7,274,689
- a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years
- (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election

same amount must be shown in column (a) )

(a)

Corpus

14.383.426

4,061,586

18,445,012

861.745

17,583,267

4.088.028

2,502,957

3.283.142

3.647.554

4.061.586

(b)

Years prior to 2017

(c)

2017



Enter gross amounts unless otherwise indicated		Unrelated bu	ısıness ıncome	Excluded by section	(e) Related or exemp	
-	m service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions )
g Fees	and contracts from government agencies					
	ership dues and assessments					
3 Intere invest	st on savings and temporary cash ments			14	727,151	
	nds and interest from securities			14	247,518	
	ntal income or (loss) from real estate					
	-financed property					
	debt-financed property					
	ntal income or (loss) from personal property investment income.					10,896,84
	or (loss) from sales of assets other than	+				10,890,842
invent						
9 Net in	come or (loss) from special events					
	profit or (loss) from sales of inventory					
<b>1</b> Other	revenue a					
d						
d e						
<b>d</b> <b>e</b> . <b>2</b> Subto	tal Add columns (b), (d), and (e).				974,669	
d e 2 Subto 3 Total.	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)			13	974,669	10,896,84: 11,871,511
d e 2 Subto 3 Total (See w	tal Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations )			· · · · · · · · · · · · · · · · · · ·	
d e 2 Subto 3 Total (See w Part XV	tal Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  oorksheet in line 13 instructions to verify calcu  T-B Relationship of Activities to the	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV Line No.	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV Line No.	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV Line No.	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV Line No.	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV Line No.	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV Line No.	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV Line No.	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV Line No.	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV Line No.	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV Line No.	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV Line No.	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV Line No.	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
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d e 2 Subto 3 Total (See w Part XV	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV Line No.	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV Line No.	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	
d e 2 Subto 3 Total (See w Part XV Line No.	tal Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  Orksheet in line 13 instructions to verify calculated the color of the columns.	lations ) ie Accomplish income is report	ment of Exem	pt Purposes of Part XVI-A contribu	ted importantly to	

(	· · · (====)								
XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations								

Part	XVI	Exempt Organia		ransters To a	and Transactio	ons and Relatio	onships With Nonchar	itable		
			directly enga				on described in section 501 ns?		Yes	No
a Tra	nsfers	from the reporting foun	dation to a n	oncharitable exe	empt organization	of				
(1) Cash								1a(1)		No
(2)	Othe	er assets						1a(2)		No
<b>b</b> Oth	er tra	nsactions								
(1)	Sale	s of assets to a nonchar	table exemp	t organization.				1b(1)		No
(2)	Purc	thases of assets from a n	oncharitable	exempt organiz	zation			1b(2)		No
(3)	Rent	tal of facilities, equipmer	nt, or other a	ssets				1b(3)		No
		nbursement arrangemen						1b(4)		No
		ns or loan guarantees.						1b(5)		No
٠.		rmance of services or m	•	_				1b(6)		No
	-	of facilities, equipment, n		· ·				1c		No
							lways show the fair market ed less than fair market val			
		ansaction or sharing arra						ue		
	1		ننيا							
(a) Line	No	(b) Amount involved	(c) Name of	noncharitable exe	mpt organization	(d) Description o	f transfers, transactions, and sh	arıng arra	ngemen	its
	+									
-	+									
2a Is t	he fou	ındatıon dırectly or ındıre	ectly affiliate	d with, or relate	d to, one or more	tax-exempt organ	nizations			
des	cribed	l ın section 501(c) (other	than section	n 501(c)(3)) or i	in section 527? .		🗆 Yes	<b>✓</b> No		
<b>b</b> If "`	Yes," d	complete the following so	chedule							
		(a) Name of organization	n	(t	<b>)</b> Type of organizat	on	(c) Description of rela	.ionship		
	Line	day nanalting of namumi	T doolare tha	t I baya ayamın	ad this rations in	luding seems so	ing schedules and stateme	-td	+- +	haat
							than taxpayer) is based o			
		ich preparer has any kno			·					
Sign		*****			2019-11-14	*****		the IRS d	iscuss th	าเร
Here					2017 11 11	\		the prepa	rer show	vn
	<b>  7</b>	Signature of officer or to	rustee		Date	Title	belo		_	_
		Signature of officer of the	ustee		Dute	Tiele	(see	ınstr )? [	Yes	□ No
		Print/Type preparer's	name	Preparer's Sigr	nature	Date	PTIN			
		,, , , , , , , , , , , , , , , ,				Jace	Check if self-	DOCCC	2504	
		ALFRED CRESWELI				2010 11 10	employed ▶ □	P00068	3584	
<b>Paid</b>		ALFRED CRESWELL	=			2019-11-18				
Prep	arei	r Firm's name ► ALEX	(ANDER THO	L MPSON ARNOLD	PLLC					
Use		THE THAT I WELL					Firm's	EIN ▶62	-11108	39
	_		4 EAST REEL	FOOT AVENUE						
		LIN	ION CITY, T	N 38261			Phone	no (731	) 885-3	3661
				55251						

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

	or substantial contributor		
a Paid during the year			
BOYS AND GIRLS CLUB1015 COLLEGE 1015 COLLEGE		OUTREACH TO DISADVANTAGE YOUTH	2,000

UNION CITY, TN 38261			
COMMUNITY CONCERT ASSOCIATION UC CIVIC AUDITORIUM HIGH SCHOOL DRIVE UNION CITY IN 38261		BRING QUALITY MUSIC TO AREA	1,000

UC CIVIC AUDITORIUM HIGH SCHOOL DRIVE UNION CITY, TN 38261		BILLIA QUALITY MOSTE TO AICEA	•
EMPOWER ME DAYCAMPPO BOX 672		RECREATION CHILDREN W/	

HIGH SCHOOL DRIVE UNION CITY, TN 38261			
EMPOWER ME DAYCAMPPO BOX 672 PO BOX 672		RECREATION CHILDREN W/ DISABILITIES	2,00

UNION CITY, TN 38261			
EMPOWER ME DAYCAMPPO BOX 672 PO BOX 672 LEBANON TN 37088		RECREATION CHILDREN W/ DISABILITIES	2,000

Total		▶ 3a	7,274,689
PO BOX 672 LEBANON, TN 37088		DISABILITIES	
EMPOWER ME DAYCAMPPO BOX 672		RECREATION CHILDREN W/	2,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

(	or substantial contributor		
a Paid during the year			
FELLOWSHIP OF CHRISTIAN ATHLETES 1722 REELFOOT AVE STE 200		CHRISTIAN MINISTRY	2,000

1722 REELFOOT AVE STE 200 UNION CITY, TN 38261			
FRIST CENTER-VISUAL ARTS 919 BROADWAY		PRESENT HIGH QUALITY EDUC PROGRAMS	

IION CITY, IN 38261		
IST CENTER-VISUAL ARTS 9 BROADWAY 9 BROADWAY SHVILLE, TN 37203		PRESENT HIGH QUALITY EDUC PROGRAMS

919 BROADWAY 919 BROADWAY NASHVILLE, TN 37203	PROGRAMS	,
HABITAT FOR HUMANITY OBION CO 228 E MAIN ST	HOMES FOR LOW INCOME	2,000

1,000

NASHVILLE, TN 37203			
HABITAT FOR HUMANITY OBION CO 228 E MAIN ST 228 E MAIN ST		HOMES FOR LOW INCOME	2,000

•			
HABITAT FOR HUMANITY OBION CO 228 E MAIN ST		HOMES FOR LOW INCOME	2,000
228 E MAIN ST			
UNION CITY, TN 38261			

Total		 ▶ 3a	7,274,689
228 E MAIN ST 228 E MAIN ST UNION CITY, TN 38261			
HABITAL FOR HUMANITT OBION CO	1	I HOMES FOR LOW INCOME	2,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

	or substantial contributor		
a Paid during the year			
HABITAT FOR HUMANITY WILSON CO 205 S MAPLE STREET		HOMES FOR LOW INCOME	1,000

205 S MAPLE STREET 205 S MAPLE STREET LEBANON, TN 37087			
MAGDELENE HOUSE 1302 REDWOOD CIRCLE		SAFE PLACE FOR WOMEN OF ALCHOL ABUSE	5

LEBANON, TN 37087			
MAGDELENE HOUSE 1302 REDWOOD CIRCLE 1302 REDWOOD CIRCLE DALLAS, TX 75218		SAFE PLACE FOR WOMEN OF ALCHOL ABUSE	5,

MAGDELENE HOUSE 1302 REDWOOD CIRCLE 1302 REDWOOD CIRCLE DALLAS, TX 75218		SAFE PLACE FOR WOMEN OF ALCHOL ABUSE	5,000
MAIN STREET UNION CITYPO BOX 382		PRESERVE HISTORICAL	1,000

1302 REDWOOD CIRCLE 1302 REDWOOD CIRCLE DALLAS, TX 75218		ALCHOL ABOSE	
MAIN STREET UNION CITYPO BOX 382 PO BOX 382		PRESERVE HISTORICAL	1,000

DALLAS, TX 75218			
MAIN STREET UNION CITYPO BOX 382 PO BOX 382		PRESERVE HISTORICAL DOWNTOWN	1,000
UNION CITY TN 38281			

MAIN STREET UNION CITYPO BOX 382 PO BOX 382 UNION CITY, TN 38281		PRESERVE HISTORICAL DOWNTOWN	1,000

7,274,689

Total		h	. 3-
NION CITY, TN 38281			
J BUX 302		DOWNTOWN	

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

	Wallie and address (nome or business)	or substantial contributor		
1	a Paid during the year			
	MASQUERADE THEATREPO BOX 1414		QUALITY ART THRU LIVE	2,000

PO BOX 1414 UNION CITY, TN 38281	PERFORMANCE	·
MERCY CHILDRENS HOSPITAL 112 NINTH AVENUE S	MEDICAL	5,000
112 NIINTU AVENIIE C	l .	

		EDITOR ET CALL	2 222
112 NINTH AVENUE S FRANKLIN, TN 37064			
MERCY CHILDRENS HOSPITAL 112 NINTH AVENUE S		MEDICAL	5,000

MERCY CHILDRENS HOSPITAL 112 NINTH AVENUE S 112 NINTH AVENUE S FRANKLIN, TN 37064		MEDICAL	5,000
MIDDLE TN BOY SCOUTS OF A 3414 HILLSBORO PIKE		EDUCATIONAL	2,000

112 NINTH AVENUE S FRANKLIN, TN 37064			
MIDDLE TN BOY SCOUTS OF A 3414 HILLSBORO PIKE 3414 HILLSBORO PIKE		EDUCATIONAL	2,000

MIDDLE TN BOY SCOUTS OF A		EDUCATIONAL	2,000
3414 HILLSBORO PIKE			
3414 HILLSBORO PIKE			
NASHVILLE, TN 37215			

Total	 ▶ 3a	7,274,689
3414 HILLSBORO PIKE 3414 HILLSBORO PIKE NASHVILLE, TN 37215		

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
NASHVILLE RESCUE MISSION 639 LAFAYETTE ST 639 LAFAYETTE ST		FOOD BANK	1,000

639 LAFAYETTE ST NASHVILLE, TN 37203			
NEW LEASH ON LIFE 507 JIM DRAPER BLVD 507 JIM DRAPER BLVD LEBANON, TN 37087		IMPROVE WELFARE OF COMPANION ANIMALS	2,000

NEW LEASH ON LIFE 507 JIM DRAPER BLVD 507 JIM DRAPER BLVD LEBANON, TN 37087		IMPROVE WELFARE OF COMPANION ANIMALS	2,000
OBION COUNTY SALVATION ARMY 1303 E REELFOOT AVENUE 1303 E REELFOOT AVENUE		HELPING UNDERPRIVILAGED	2,000

7,274,689

LEBANON, TN 37087			
OBION COUNTY SALVATION ARMY 1303 E REELFOOT AVENUE 1303 E REELFOOT AVENUE UNION CITY, TN 38261		HELPING UNDERPRIVILAGED	2,0

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business)

,	or substantial contributor		
a Paid during the year			
OPERATION STAND DOWN 1125 12TH AVE S		HELP VETERANS & FAMILIES	5,000

1125 12TH AVE S 1125 12TH AVENUE S NASHVILLE, TN 37203	TIEL VETERANS & LANGELES	3,000
PHOEBE CONNECTIONS 508 CHELSEA LANE	HELP WIDOWS-CHRISTIAN MINISTRY	1,000

PHOEBE CONNECTIONS 508 CHELSEA LANE 508 CHELSEA LANE LEBANON, TN 37090		HELP WIDOWS-CHRISTIAN MINISTRY	1,000
PRESTON TAYLOR MINISTRIES PO BOX 90442		CHRISTIAN YOUTH MINISTRY	4,000

NASHVILLE, TN 37209  Total		▶ 3a	7,274,689
PRESTON TAYLOR MINISTRIES PO BOX 90442 PO BOX 90442		CHRISTIAN YOUTH MINISTRY	4,000
508 CHELSEA LANE LEBANON, TN 37090			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor

	or substantial contributor		
a Paid during the year			
CHARITABLE - PROMETHEAN FOUNDATION 624 F REFLECOT AVENUE		PROVIDE DAYCARE FOR AT RISK CHILDREN	1,785,992

624 E REELFOOT AVENUE UNION CITY, TN 38261			
SAFE HAVEN FAMILY SHELTER 1234 3RD AVE S 1234 3RD AVE S		HELP THE HOMELESS	2,500

		1	
SAFE HAVEN FAMILY SHELTER 1234 3RD AVE S 1234 3RD AVE S NASHVILLE, TN 37210		HELP THE HOMELESS	2,500
SHERRY'S RUNPO BOX 8		BENEFIT THOSE AFFECTED BY	1,000

1234 3RD AVE S NASHVILLE, TN 37210			
SHERRY'S RUNPO BOX 8 PO BOX 8 LEBANON, TN 37089		BENEFIT THOSE AFFECTED BY CANCER	1,000

NASHVILLE, IN 3/210			
SHERRY'S RUNPO BOX 8 PO BOX 8 LEBANON, TN 37089		BENEFIT THOSE AFFECTED BY CANCER	1,000

7,274,689

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
ST LUKE COMMUNITY HOUSE 5601 NEW YORK AVE 5601 NEW YORK AVE NASHVILLE, TN 37209		FOOD PANTRY	1,500
TN DIAMONDS IN THE RUFFPO BOX 62		DOG RESCUE	3,000

·			
TN DIAMONDS IN THE RUFFPO BOX 62 PO BOX 62 UNION CITY, TN 38281		DOG RESCUE	3,0
TRUDY'S KIDS CAFE306 S FIRST 306 S FIRST		PROVIDE MEALS FOR AT RISK CHILDREN	1,0

TN DIAMONDS IN THE RUFFPO BOX 62 PO BOX 62 UNION CITY, TN 38281	DOG RESCUE	3,0
TRUDY'S KIDS CAFE306 S FIRST 306 S FIRST	PROVIDE MEALS FOR AT RISK CHILDREN	1,0

Total .

UNION CITY, TN 38281			
TRUDY'S KIDS CAFE306 S FIRST 306 S FIRST UNION CITY, TN 38261		PROVIDE MEALS FOR AT RISK CHILDREN	1,000

7,274,689

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
UNION CITY HIGH SCHOOL HIGH SCHOOL DR HIGH SCHOOL DRIVE		EDUCATIONAL	200

UNION CITY, TN 38261		
UNION CITY ROTARY FOUNDATION PO BOX 275 PO BOX 275	SERVICES OBION CO WITH SCHOLARSHIP P	51,000
LINION CITY TN 38281		

UNION CITY ROTARY FOUNDATION PO BOX 275 PO BOX 275 UNION CITY, TN 38281	SERVICES OBION CO WITH SCHOLARSHIP P	51,000
UNION CITY YOUNG LIFEPO BOX 3233	CHRISIAN MINISTRY	2,000

PO BOX 275 UNION CITY, TN 38281		SCHOLARSHII I	
UNION CITY YOUNG LIFEPO BOX 3233 PO BOX 3233		CHRISIAN MINISTRY	2,000
1ACKSON TN 39303			

NION CITY YOUNG LIFEPO BOX 3233		CHRISIAN MINISTRY	2,00
O BOX 3233			
ACKSON, TN 38303			

Total	 	▶ 3a	7,274,689
JACKSON, TN 38303	ļ		
PO BOX 3233	!		

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
WILSON CO CIVIC LEAGUEPO BOX 1231 PO BOX 1231		IMPROVE SOCIAL CONDITIONS IN COUNTY	2,000

LEBANON, TN 37088			
SUMMIT COUNTRY DAY 2161 GRANDIN ROAD		DAY CARE - THOSE THAT CANNOT AFFORD	10,00
31C1 CDANDIN DOAD			

SUMMIT COUNTRY DAY 2161 GRANDIN ROAD 2161 GRANDIN ROAD CINCINNATI, OH 45208		DAY CARE - THOSE THAT CANNOT AFFORD	10,000
CASA OF WILSON COUNTY		FAMILY SERVICES	2,000

2161 GRANDIN ROAD CINCINNATI, OH 45208			
CASA OF WILSON COUNTY 111 CASTLE HEIGHTS AVE 111 CASTLE HEIGHTS AVE		FAMILY SERVICES	2,000

CINCINNATI, OH 45208			
CASA OF WILSON COUNTY 111 CASTLE HEIGHTS AVE 111 CASTLE HEIGHTS AVE LEBANON, TN 37089		FAMILY SERVICES	2,000

▶ 3a

7,274,689

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

Recipient

If recipient is an individual, show any relationship to status of contribution

Purpose of grant or contribution

recipient

7,274,689

any foundation manager

Maria and address (home or business)

Name and address (nome or business)	or substantial contributor		
a Paid during the year			
UNIV OF TN FOUNDATIONKNOXVILLE KNOXVILLE, TN 37996		SCHOLARSHIPS	10,000
THE BRIDGEPO BOX 1208 PO BOX 1208 UNION CITY, TN 38281		BATTERED WOMENS SHELTER	1,000
UNITED WAY OF OBION COUNTY PO BOX 484 PO BOX 484 UNION CITY, TN 38281		COMMUNITY SERVICES	2,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or husiness)

	or substantial contributor		
a Paid during the year			
FRIENDS FOR MEDICAL RELIEF		MEDICAL SERVICES	5,000

CINCINNATI CINCINNATI, OH 45208			·
KENZIE'S CLOSET2010 MADISON ROAD 2010 MADISON ROAD		PROVIDE PROM DRESSES TO JR/SR GIRLS	1,250

KENZIE'S CLOSET2010 MADISON ROAD 2010 MADISON ROAD CINCINNATI, OH 45208		PROVIDE PROM DRESSES TO JR/SR GIRLS	1
KY PHYSICIANS HEALTH FOUNDATION		SUBSTANCE ABUSE -	1

CINCINNATI, OH 45208			
KY PHYSICIANS HEALTH FOUNDATION 9000 WESSEX PL 305 9000 WESSEX PL 305 LOUISVILLE KY 40222		SUBSTANCE ABUSE - HEALTHCARE PROFESS	1,25

CINCINITY 011 15200			
KY PHYSICIANS HEALTH FOUNDATION 9000 WESSEX PL 305 9000 WESSEX PL 305 LOUISVILLE, KY 40222		SUBSTANCE ABUSE - HEALTHCARE PROFESS	1,250
Total	 	▶ 3a	7,274,689

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount

Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
HATMAKER FOUNDATION			PROVIDING OYLER STUDENTS	1,250

	4811 MONTGOMERY RD 4811 MONTGOMERY RD 4811 MONTGOMERY RD CINCINNATI, OH 45212		ACADEMIC	Ι,
ĺ	CITY GOSPEL MISSION		WORK WITH THE HOMELESS	1.

CINNATI, OH 45212			
( GOSPEL MISSION 5 DALTON AVE 5 DALTON AVE CINNATI, OH 45214		WORK WITH THE HOMELESS	1,25

CITY GOSPEL MISSION 1805 DALTON AVE 1805 DALTON AVE CINCINNATI, OH 45214		WORK WITH THE HOMELESS	1,250
SCAN OF WILSON COUNTY 105 EAST HIGH ST 105 EAST HIGH ST		NEEDS FOR SENIOR CITIZENS	2,000

1805 DALTON AVE CINCINNATI, OH 45214			
SCAN OF WILSON COUNTY 105 EAST HIGH ST 105 EAST HIGH ST LEBANON, TN 37087		NEEDS FOR SENIOR CITIZENS	2,000

Total	 	<u> </u> 	7,274,689
105 EAST HIGH ST LEBANON, TN 37087			
105 EAST HIGH ST		NEEDS FOR SENIOR CITIZENS	2,000
SCAN OF WILSON COUNTY	1	NEEDS FOR SENIOR CITIZENS	2,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

7,274,689

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

any foundation manager

Name and address (home or business)

Total . .

,	or substantial contributor		
a Paid during the year			
DISCOVERY PARK OF AMERICA 830 EVERETT BLVD		EDUCATION	5,346,497

830 EVERETT BLVD
UNION CITY, TN 38261

efile GRAPHIC print - DO NOT P	ROCESS	As Filed D	ata -			DLN: 93491322006189
TY 2018 Accounting Fe	ees Scho	edule				
	Name:	THE ROB	BERT E	E & JENNY D K	(IRKLAND	
FOUNDATION						
	ETN.	13-4228	580			
I <u></u>	LTI4.	13-4220	509			
Category	Ame	ount		Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
·						
ACCOUNTING FEES		44,670		44,670		
i						

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## **TY 2018 Investments Corporate Stock Schedule**

Name: THE ROBERT E & JENNY D KIRKLAND

**FOUNDATION** 

ETN: 13-4228589

Investments Corporation Stock Schedule  Name of Stock	End of Year Book Value	End of Year Fair
	· · · · · · · · · · · · · · · · · · ·	Market Value
ANGEL OAK STRATEGIC MORTGAGE INCOME		
ANCHORAGE ILLIQUID OPPORTUNITIES OFF		
HOMRICH BERG		
HOMRICH BERG - ADJ TO MARKET		
INVESTMENT IN 2303 CRESTMOOR INC		
N3L FUND, LP		
N3L FUND, LP-ADJ TO MARKET		
FCA VENTURE PARTNERS VI QP, LP		
FCA VENTURE PARTNERS VI QP, LP-ADJ T		
WELLINGTON TRUST COMPANY		
WELLINGTON TRUST COMPANY - ADJ TO MA		
TRUSCO		
TRUSCO - ADJ TO MARKET		
LPL - STOCKS	1,841,400	1,841,400
LPL - ADJ TO MARKET		
SIMMONS 1ST NATIONAL (58,192 SHARES)	254,023	254,023
SIMMONS/COMM. 1ST. BANCSHARES-ADJ TO	1,150,150	1,150,150
REVOLUTION PARTNERS INVESTMENTS	2,478,563	2,478,563
REVOLUTION PARTNERS INVEST - ADJ TO		
GALLEON PARTNERS SPC LP	1,217	1,217
GALLEON PARTNERS SPC LP - ADJ TO MAR		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491322006189

### **TY 2018 Investments - Other Schedule**

Name: THE ROBERT E & JENNY D KIRKLAND

**FOUNDATION** 

<b>EIN:</b> 13-4228	3589						
Investments Other Schedule 2							
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value				
GOLUB PARTNERS CAPITAL INTERNATIONAL	AT COST	342,767	342,767				
GOLUB PARTNERS CAPITAL INT - ADJUST	FMV	7,233	7,233				
GSO CREDIT ALPHA FEEDER FUND II LP	AT COST	188,368	188,368				
GSO CREDIT ALPHA FEEDER FUND II LP -	FMV	37,239	37,239				
ANGEL OAK STRATEGIC MORTGAGE INCOME	AT COST	1,000,000	1,000,000				
ANGEL OAK STRATEGIC MORTGAGE - ADJUS	FMV	60,260	60,260				
ANCHORAGE ILLIQUID OPPORTUNITIES OFF	AT COST	585,000	585,000				
ANCHORAGE ILLIQUID OPPORTUNITIES - A	FMV	21,747	21,747				
INVESTMENT IN 2303 CRESTMOOR INC	FMV	3,140,868	3,140,868				
N3L FUND, LP	FMV	393,178	393,178				
N3L FUND, LP-ADJ TO MARKET							
FCA VENTURE PARTNERS VI QP, LP	AT COST	476,333	476,333				
FCA VENTURE PARTNERS VI QP, LP-ADJ T	FMV	74,112	74,112				
WELLINGTON TRUST COMPANY	FMV	30,762,925	30,762,925				
WELLINGTON TRUST COMPANY - ADJ TO MA							
TRUSCO	AT COST	5,662,058	5,662,058				
TRUSCO - ADJ TO MARKET	FMV	127,748	127,748				

DLN: 93491322006189

-268,352

-268,352

Name: THE ROBERT E & JENNY D KIRKLAND

FOUNDATION

**EIN:** 13-4228589

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HOMRICH BERG-ADJ TO MARKET

Other Assets Schedule						
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value			
HOMRICH BERG		12,331,362	12,331,362			

As Filed Data -		DLN: 93491322006189
edule		
THE ROBERT I	E & JENNY D KIRKLAND	
FOUNDATION		
13-4228589		
escription		Amount
		154,363
;		14,470,934
		32,513
_	edule THE ROBERT I FOUNDATION 13-4228589 escription	edule  THE ROBERT E & JENNY D KIRKLAND FOUNDATION 13-4228589 escription

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DL	N: 93491322006189	
TY 2018 Other Expenses Scho	edule				
Name	: THE ROBERT E	& JENNY D KIRKI	_AND		
	FOUNDATION				
EIN:	: 13-4228589				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
EXPENSES					
WIRE FEE	126	126			
WELLINGTON MANAGEMENT FEE	204,373	204,373			
FEE/EXPENSES - HOMRICH BERG	52,000	52,000			
TRAVEL EXPENSE	661	661			

TY 2018 Other Income Schedule	

Name: THE ROBERT E & JENNY D KIRKLAND

**FOUNDATION** 

**EIN:** 13-4228589

Other Income Schedule						
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income			
OTHER INCOME(LOSS) INVESTMENT	1,350,459	1,350,459				
GAIN (LOSS) ON INVESTMENTS	127,942	127,942				
GAIN ON SALE OF INVESTMENTS	9,418,441	9,418,441				

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TY 2018 Other Liabilities Schedule						
Name:	THE ROBERT E	E & JENNY D	KIRKLAND			
	FOUNDATION					
EIN:	13-4228589					
Description	n		Beginning of Year - Book Value	End of Year - Book Value		
DONATIONS PAYABLE			3,231,466			

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TY 2018 Other Notes/Loans R	eceivable Sh	ort Schedule	
Name:	THE ROBERT E	& JENNY D KIRKLAND	
	FOUNDATION		
EIN:	13-4228589		
Name of 501(c)(	3) Organization		Balance Due
DUE FROM DPC LLC (2008)			2,870,660
DUE FROM DPC LLC (2009)			3,288,538
DUE FROM DPC LLC (2010)			4,171,600
DUE FROM DPC LLC (2011)			14,569,355
DUE FROM DPC LLC (2012)			30,298,540
DUE FROM DPC LLC (2013)			26,466,180
DUE FROM DPC LLC (2014)			1,085,781
DUE FROM DPC LLC (2015)			
DUE FROM DPC LLC (2016)			

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TY 2018 Other Professional Fees Schedule						
Name: THE ROBERT E & JENNY D KIRKLAND FOUNDATION EIN: 13-4228589						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
LEGAL FEES	13,774	13,774				
FEES/EXPENSES - TRUSCO	56,947	56,947				
FEES/EXPENSES - REVOLUTION PARTN	33,090	33,090				

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TY 2018 Taxes Schedule						
Name: THE ROBERT E & JENNY D KIRKLAND FOUNDATION EIN: 13-4228589						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
OTHER TAXES	20	20				
PROPERTY TAXES	6	6				

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Schedule B	S	chedule of Contrib	outors		OMB No 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		Attach to Form 990, 990-EZ, o www.urs.gov/Form990 for the la			2018
Name of the organization THE ROBERT E & JENNY D FOUNDATION				Employer idea	ntification number
Organization type (che	ck one)			13 4220303	
Filers of:	Section:				
Form 990 or 990-EZ	☐ 501(c)( ) (enter no	umber) organization			
	4947(a)(1) nonexe	mpt charitable trust <b>not</b> trea	ated as a private foundat	ion	
	☐ 527 political organi	ızatıon			
Form 990-PF	<b>✓</b> 501(c)(3) exempt p	orivate foundation			
	4947(a)(1) nonexe	empt charitable trust treated	as a private foundation		
	501(c)(3) taxable private foundation				
	ition filing Form 990, 990-EZ, property) from any one contr				
Special Rules					
under sections 5	on described in section 501(c 09(a)(1) and 170(b)(1)(A)(vi), y one contributor, during the e 1h, or (ii) Form 990-EZ, line	that checked Schedule A (I year, total contributions of the	Form 990 or 990-EZ), Pa	art II, line 13, 16	6a, or 16b, and that
during the year, t	on described in section 501(o otal contributions of more tha he prevention of cruelty to ch	an \$1,000 <i>exclusively</i> for reli	igious, charitable, scienti		
during the year, of If this box is check purpose Don't co	on described in section 501(contributions exclusively for resided, enter here the total contributions and on the parts unlessed, etc., contributions totaling	eligious, charitable, etc , pur tributions that were received ss the <b>General Rule</b> applies	rposes, but no such cont d during the year for an e s to this organization bed	ributions totale exclusively religionals cause it receive	ed more than \$1,000 gious, charitable, etc , ed <i>nonexclusively</i>
990-EZ, or 990-PF), but	n that isn't covered by the Ge it <b>must</b> answer "No" on Part l orm 990PF, Part I, line 2, to c	IV, line 2, of its Form 990, o	or check the box on line H	d of its	
For Paperwork Reduction A for Form 990, 990-EZ, or 990	ct Notice, see the Instructions I-PF	Cat No 3061:	3X Schedul	е В (Form 990, 9	90-EZ, or 990-PF) (2018)

Name of organiza THE ROBERT E & JI FOUNDATION	ation ENNY D KIRKLAND	Employer identification 13-4228589	number
Part I	Contributors (See instructions) Use duplicate copies of Part I if ad	Iditional space is needed	
(a)	(b)	(c)	(d)
Νο.	Name, address, and ZIP + 4	Total contributions	Type of contribution
	KIRKLAND 2004 CHARITABLE LEAD		Person 🗸
<u>1</u>	KIRKLAND 2004 CLAT 203 THORNHILL CRESENT		Payroll
	200 MONIMIZE CRESENT	\$ 1,768,490	Noncash
	BRENTWOOD, TN 37027		
			(Complete Part II for noncash contributions )
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	KIRKLAND 2005 CHARITABLE LEAD		Person 🗸
2	203 THORNHILL CRESENT		Payroll
		\$ 481,440	Noncash
	BRENTWOOD, TN 37027		(Complete Book II for consider
			(Complete Part II for noncash contributions )
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution  Person
<u>3</u>	KIRKLAND 2007 CHARITABLE LEAD		•
_	203 THORNHILL CRESENT		Payroll
	BRENTWOOD, TN 37027	\$ 3,847,162	Noncash
			(Complete Part II for noncash
			contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Trums, address, and Emily 1		Person
-			Payroll
		\$	Noncash
			Noncasii
			(Complete Part II for noncash contributions )
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash
			contributions )
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash
			contributions)

Schedule B (Form 99	0, 990-EZ, or 990-PF) (2018)		Page <b>3</b>
Name of organizatio THE ROBERT E & JENN		Employer ident	ification number
FOUNDATION		13-4228589	
Part II	Noncash Property		
(a) No. from Part I	(See instructions) Use duplicate copies of Part II if additional space is needed (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
		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2018)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)