2949132001803 OMB No 1545-0052

2018

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

Department of the Treasury

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

	internal H										Upt	en to Public in	spection	<u> </u>
	For cal	enda	year 2018 or ta	ax year beginnir	g	, 2018	, and ending		,					
	TNCR	ам г	FAMILY FOU	иоттапи				Α	Employer lo 26-14			mber		
-	8501	N.	SCOTTSDAL	E RD., SUI	TE 12	0		В	Telephone r			ructions)		
	SCOT	TSDA	ALE, AZ 85	253		•		_	602-9	<u>55</u>	-2424			
								С	If evemntin	וחב מ	nlication is	nending check h	oro ▶ [	$\neg$
	Ch.	I	I that analy	United setum	Г	United return of a form	nor public chambi	C If exemption application is pending, check here						ᆜ
	<b>G</b> Che	eck ar	I that apply	Initial return	ŀ	Initial return of a form Amended return	ner public charity	D 1 Foreign organizations, check here					▶ [	
				Address char	Name change			2 Foreign organizations meeting the 85% test, check						
•	H Check type of organization. X Section 501(c)(3) exempt private foundation						1	here and at				•	╛	
	Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation					E	If private fo	ounda	ation status	was terminated				
•	I Fair market value of all assets at end of year J Accounting method. X Cash Accrual					1	under secti	on 50	)7(b)(1)(A)	, check here	•			
	•	n Part	II, column (c), line	16)		Other (specify)		F	If the found	latior	n is in a 60-	-month terminatio	n .	_
,	<b>►</b> \$			,094.	(Part I	column (d) must be or	r cash basis )					, check here	- ▶	
- {	Part I	_  <u>A</u> !	nalysis of Re	evenue and		(a) Revenue and	(b) Net investme	nt	(c) Adju	icto	d not	(d) Disburs		
		CO.	<b>(penses</b> (The lumns (b), (c), a	total of amount and (d) may not	sın	expenses per books	income	i it		ome		for charm		
		ne	cessarily equal	the amounts in								(cash basi		
		CO	Contributions gifts grant	structions)) its, etc., received (attach sch	edule)				-					<del></del> ,
		2		undation is not required to					<del> </del>					+
		_	_						<del>                                     </del>		-			7
		3 4	Interest on savings and t Dividends and interest fro	temporary cash investments			53	37.	<del> </del>		-			
		1 .	Gross rents	om securites			-34,48	22	<del>                                     </del>					-
		b	Net rental income or (loss)				24,40	<u>, , , , , , , , , , , , , , , , , , , </u>	1		-RE(	PEIVED.		7
	a		Net gain or (loss) from s	sale of assets not on line 10						<del>-</del> [			78	T
	Revenue	b	Gross sales price for assets on line 6a	or all						8	NUV	0 8 7019	ő	
'n	Řě	7		come (from Part IV, III	ie 2)		34,48	32.		<u>" </u>			181	
3	_	8	Net short-term capi Income modification	•					<del>  </del>		OGE	ACKI III	711	4
NO ANNIET			Gross sales less	1					<del> </del>		OGL	VEN, UT		ᆛ
2			allowances	L					ļ					
$\leq$		6	Less Cost of goods sold						_			ı		
;		С	Gross profit or (loss) (att	•										
		11	Other income (attac	ch schedule)									ı	ı
		12	Total Add lines 1	and the state				. –	ļ				<u>`</u>	4
		12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc.		0.	5.3	37.			0.					
		14	Other employee sa		,							,		_
	es	15	Pension plans, emp	oloyee benefits										
2	S		Legal fees (attach s	CEE	CT 1									
•	e D		Accounting fees (at	•	ŞT 1	1,320.	49	0.						_
	and Administrative Expen	17	Other professional fees ( Interest	attach sch)			<u> </u>		<del> </del>					
	ţive	18	Taxes (attach schedule):	see instrs) SEE S	TM 2	73.			<del>  -</del>					
	trat	19	Depreciation (attach	h	_	13.			<del> </del>					$\neg$
_	nis		schedule) and deple	etion										
_	Ē	20	Occupancy Travel, conferences	and meetings					<b></b>					_
	١٨	22	Printing and publica						<del> </del>					_
2	and	23	Other expenses (att	tach schedule)					<del>                                     </del>					_
<u>c</u>			\$	SEE STATEM	ENT 3	4.	4	17.						_
Juden	atir	24	Total operating and expenses, Add line			1 207	E 3	7						
	Operating	25	Contributions, gifts, grant	ימגמ	r xv	1,397. 242,000.		37.	<del> </del>			21'	2,000	_
	ō	26	Total expenses and	•					<del> </del>					
L.			Add lines 24 and 25	5		243,397.	53	37.			0.	243	2,000	
3		27	Subtract line 26 from										•	
		a	Excess of revenue and disbursements	•		-243,397.	  -					,*		1
		b	Net investment inc	ome (if negative, ente	r -0-)	э		0.	<u> </u>					Ţ
_		C	Adjusted net incom	ne (if negative, enter	0)						0.			
_								_						_



Page 2

Part	. 11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
ran	. 11	(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing	201,517.	2,072.	2,072.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less. allowance for doubtful accounts ▶			
	4	Pledges receivable			
	1	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 sch)			
		Less allowance for doubtful accounts			
Assets	8	Inventories for sale or use			
Ass	9	Prepaid expenses and deferred charges			
		a Investments — U.S. and state government obligations (attach schedule)			
	l t	nvestments — corporate stock (attach schedule)		<u>.</u>	
	٠	: 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)	4,172.	22.	22.
	14	Land, buildings, and equipment. basis ▶			
		Less accumulated depreciation (attach schedule)			
		Other assets (describe			
	16	Total assets (to be completed by all filers — see the instructions Also, see page 1, item I).	205,689.	2,094.	2,094.
	17	Accounts payable and accrued expenses		_	
Ś	18	Grants payable			
<u>:</u>	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, & other disqualified persons		29,277.	
=	21	Mortgages and other notes payable (attach schedule)		10 505	
	22	Other liabilities (describe SEE STATEMENT 4 )		10,525.	
	23	Total liabilities (add lines 17 through 22)	0.	39,802.	[
se		Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31.			
ŭ	24	Unrestricted .			
<u>ä</u>	25	Temporarily restricted			
<u>ш</u>	26	Permanently restricted			,
Fun		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds	205,689.	-37,708.	
set	28	Paid-in or capital surplus, or land, bldg, and equipment fund		<del></del>	
As	29	Retained earnings, accumulated income, endowment, or other funds			
et	30	Total net assets or fund balances (see instructions)	205,689.	-37,708.	
Z	31	Total liabilities and net assets/fund balances (see instructions)	205,689.	2,094.	
Par	E III	Analysis of Changes in Net Assets or Fund Balance			· · · · · · · · · · · · · · · · · · ·
	Tota	I net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return).		gree with	205 680
2		or amount from Part I, line 27a		. 2	205,689. -243,397.
3		increases not included in line 2 (itemize)	•	3	-243,331.
4		lines 1, 2, and 3			-37,708.
5		ases not included in line 2 (itemize)		5	31,100.
6		I net assets or fund balances at end of year (line 4 minus line 5)	- Part II. column (b). I	`.L	-37,708.
BAA		TFFA03021 0			Form <b>990-PF</b> (2018)

(a) List and describe	the kind(s) of property sold (for examply varehouse, or common stock, 200 she	e, real estate, (I	b) How acquired P — Purchase D — Donation	(mo , day, yr )	(d) Date sold (mo , day, yr )
1 a				<u> </u>	
b					
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or ((e) plus (f) m	
a b					
С	<del>                                     </del>				
d	<u> </u>				
e	<del> </del>	<del></del>	<del></del>		
<del></del>	ng gain in column (h) and owned by the	foundation on 12/31/69		(1) Onine (Onl	/h
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		(i) Gains (Col gain minus col (k), b nan -0-) <b>or</b> Losses (fi	ut not less
2					
a b	<del>                                     </del>				
C					
	<del>                                     </del>	<del></del>			<del></del> ·
e	<del>                                     </del>				
2 Capital gain net income or (n		enter in Part I, line 7			
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)	er -0- in Part I, line 7 and (6).	2		34,482
If gain, also enter in Part I, Iir in Part I, line 8	ne 8, column (c) See instructions If	(loss), enter -0-	3		
Part V Qualification Under	er Section 4940(e) for Reduced	d Tax on Net Investme	-	<u> </u>	
	this part blank ection 4942 tax on the distributable ar lify under section 4940(e). Do not cor		se period?	Yes	X No
<ol> <li>Enter the appropriate amount in</li> </ol>	each column for each year, see the ins	tructions before making any e	ntries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	<b>(c)</b> Net value of noncharitable-use asse	ts	(d) Distribution (col (b) divided	ratio by col. (c))
2017		9.	,007.		
2016			411.		
2015			403.		
2014	850.		714.		1.19047
2013			595.		
2 Total of line 1, column (d)	•		2		1.190476
3 Average distribution ratio for the number of years the foundation	e 5-year base period – divide the total of on has been in existence if less than	n line 2 by 5 0, or by the 5 years .	3		0.23809
4 Enter the net value of noncha	iritable-use assets for 2018 from Part	X, line 5	4		
5 Multiply line 4 by line 3			5		-
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			. 7		0
8 Enter qualifying distributions t	from Part XII, line 4		8		242,000
· • -	an line 7, check the box in Part VI, line	1b, and complete that part usi		rate See the	<u> </u>

-		148294		P	age <b>4</b>
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instructio	ns)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here				
	Date of ruling or determination letter (attach copy of letter if necessary – see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	1			0.
	check here ► X and enter 1% of Part I, line 27b				
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
_	foundations only, others, enter -0-)	2			0.
3	Add lines 1 and 2	3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			0.
6	Credits/Payments				<del></del>
а	2018 estimated tax pmts and 2017 overpayment credited to 2018 . 6a 500.				1
ь	Exempt foreign organizations — tax withheld at source 6b				l
c	Tax paid with application for extension of time to file (Form 8868)			,	
d	Backup withholding erroneously withheld 6 d				
7	Total credits and payments Add lines 6a through 6d	7		<del></del> 5	00.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached .	8			<del></del>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		5	00.
11	Enter the amount of line 10 to be Credited to 2019 estimated tax 500. Refunded	11			0.
Par	t VII-A   Statements Regarding Activities				<del></del>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
ıa	participate or intervene in any political campaign?		1 a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?				
L	See the instructions for the definition		1 b		Х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published				
	or distributed by the foundation in connection with the activities.				
С	Did the foundation file Form 1120-POL for this year?		1 c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation >\$ 0. (2) On foundation managers >\$	0	<u>.</u>		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers >\$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	—	<del></del> -l
2	If 'Yes,' attach a detailed description of the activities		-	+	<u>X</u>
	·				ł
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3	—-	
4.			<del></del>	$\longrightarrow$	<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?  If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?		4 a	<del></del>	<u>X</u>
	•		4 b	N	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If 'Yes,' attach the statement required by General Instruction T		5		<u>X</u>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.		·		
•	By language in the governing instrument, or			1	
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?</li> </ul>			<del></del> -	
7			7	X	
	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.  Enter the states to which the foundation reports or with which it is registered. See instructions			Х	
оа			_	1	
	AZ				
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G?</i> If 'No,' attach explanation		8 b	X	
_				<del>^</del>	—¬,
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If 'Yes,' complete	4942(j)(5)	9	<del></del>  -	<del>-</del> ,
		. GILAIV		<del></del>	<u> </u>
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		10	]	Х
BAA	<u> </u>	F	orm 990-	PF (2)	
•				/	,

Par	rt VII-A   Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule See instructions		11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement See instructions	ad	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption appropriate address  N/A	olication?	13	X	
14	Website address  N/A  The books are in care of ► ALBERT BLASI  Telephone no	602-9	 55-2	 424	- <b>-</b> -
15	Located at ► 8501 N. SCOTTSDALE RD., SUITE 120 SCOTTSDALE ZIP + 4 ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here	35253	N/A		
13	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15	147 A	, -	∐ N/A
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over bank, securities, or other financial account in a foreign country?	a	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country				
Par	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		<u> </u>		
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
1 a	a 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?	es X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	es No			
		es X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	es X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	es X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days )	es X No			
b	b If any answer is 'Yes' to 1a(1)–(6), did <b>any</b> 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		1 b	<del>-</del>	
	Organizations relying on a current notice regarding disaster assistance, check here	▶ □			1
С	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 2018?		1 c		l
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
a	a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?	es X No		,	v
	If 'Yes,' list the years ▶ 20 _ , 20 _ , 20 , 20	بي			ŀ
b	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2	).			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) all years listed, answer 'No' and attach statement — see instructions.)	to	2 b	- N	— /А
С	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here				
	► 20 <sub></sub> , 20 <sub></sub> , 20 <sub></sub>				
3 a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	es X No			
b	b If 'Yes,' did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to			<u>`</u>	
	determine if the foundation had excess business holdings in 2018)	•	3 b	N	<u>/</u> A
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4 a		X
b	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could				۵
	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?		4 b		
BAA		F	orm 990	)-PF (	

· , Form 990-PF (2018) INGRAM FAMILY FOU	NDATION		26-	14829	46	Pag	e (
Part VII-B   Statements Regarding Activit	ies for Which Forn	n 4720 May Be Req					_
<ol> <li>5 a During the year, did the foundation pay or incur a</li> <li>(1) Carry on propaganda, or otherwise attem</li> </ol>	•	on (section 4945(e))?	Yes	X No		Yes N	0
(2) Influence the outcome of any specific put on, directly or indirectly, any voter registr	olic election (see section ation drive?	n 4955), or to carry	Yes	X No			
<ul><li>(3) Provide a grant to an individual for travel</li><li>(4) Provide a grant to an organization other than</li></ul>	•		Yes	X No			
in section 4945(d)(4)(A)? See instructions	s		Yes	X No			
(5) Provide for any purpose other than religion educational purposes, or for the prevention			Yes	X No			
b If any answer is 'Yes' to 5a(1)—(5), did any o described in Regulations section 53 4945 or in a See instructions	current notice regarding of	disaster assistance?	ptions		5 b	N/A	_
Organizations relying on a current notice rega	•	•	•				
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respor If 'Yes,' attach the statement required by Reg	isibility for the grant?	·	N/A Yes	No			
6 a Did the foundation, during the year, receive a on a personal benefit contract?		, , , , , , , , , , , , , , , , , , ,	Yes	XNo			_
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	niums, directly or indirec	ctly, on a personal bene	efit contract?		6 b	1	X
7a At any time during the tax year, was the foun			1 1	XNo		_	
<ul><li>b If 'Yes,' did the foundation receive any proces</li><li>8 Is the foundation subject to the section 4960 tax</li></ul>				N/A	7 b		_
or excess parachute payment(s) during the ye			Yes	$X_{No}$			
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Mana	gers, Highly Pai	d Emp	loyees	<b>,</b>	_
and Contractors							
and Contractors  1 List all officers, directors, trustees, and foun	dation managers and ti	heir compensation. See	e instructions.		_		_
	dation managers and the control of t	heir compensation. See (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee bener plans and deferr compensation	<sub>fit</sub>   (e)	Expense other al	e accour lowance:	ıt,
1 List all officers, directors, trustees, and foun  (a) Name and address  KEITH_MICHAEL_INGRAM  8501_NSCOTTSDALE_RD_STE_120_  SCOTTSDALE, AZ 85253	(b) Title, and average hours per week devoted to position  DIRECTOR 0	(c) Compensation (If not paid,	(d) Contributions to employee bene plans and deferr compensation	<sub>fit</sub>   (e)	Expens other al	lowance	nt, s
1 List all officers, directors, trustees, and foun  (a) Name and address  KEITH MICHAEL INGRAM  8501 N. SCOTTSDALE RD STE 120	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee bener plans and deferr compensation	fit (e)	Expension other al	lowance:	s 
1 List all officers, directors, trustees, and foun  (a) Name and address  KEITH_MICHAEL_INGRAM  8501 N. SCOTTSDALE RD STE 120  SCOTTSDALE, AZ 85253  SHEILA L. INGRAM  8501 N. SCOTTSDALE RD STE 120	(b) Title, and average hours per week devoted to position  DIRECTOR  DIRECTOR	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee bener plans and deferr compensation	fit (e) red 0.	Expenso other al	lowance:	s  ) .
1 List all officers, directors, trustees, and foun  (a) Name and address  KEITH_MICHAEL_INGRAM  8501 N. SCOTTSDALE RD STE 120  SCOTTSDALE, AZ 85253  SHEILA L. INGRAM  8501 N. SCOTTSDALE RD STE 120	(b) Title, and average hours per week devoted to position  DIRECTOR  DIRECTOR	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee bener plans and deferr compensation	fit (e) red 0.	Expenso other al	lowance:	s ).
1 List all officers, directors, trustees, and foun  (a) Name and address  KEITH_MICHAEL_INGRAM  8501 N. SCOTTSDALE RD STE 120  SCOTTSDALE, AZ 85253  SHEILA L. INGRAM  8501 N. SCOTTSDALE RD STE 120	(b) Title, and average hours per week devoted to position  DIRECTOR  DIRECTOR  O  DIRECTOR	(c) Compensation (If not paid, enter -0-)  0.	(d) Contributions to employee bener plans and deferr compensation	fit (e) 0. 0.	Expens other al	lowance:	s ).
(a) Name and address  KEITH MICHAEL INGRAM  8501 N. SCOTTSDALE RD STE 120  SCOTTSDALE, AZ 85253  SHEILA L. INGRAM  8501 N. SCOTTSDALE RD STE 120  SCOTTSDALE, AZ 85253  CONTENT OF THE PROPERT OF THE PRO	(b) Title, and average hours per week devoted to position  DIRECTOR  DIRECTOR  O	(c) Compensation (If not paid, enter -0-)  0.	(d) Contributions to employee bener plans and deferr compensation	O.  O.  One in the interval of	expense	lowance:	s 
(a) Name and address  KEITH_MICHAEL_INGRAM  8501_NSCOTTSDALE_RD_STE_120_ SCOTTSDALE, AZ 85253  SHEILA_LINGRAM  8501_NSCOTTSDALE_RD_STE_120_ SCOTTSDALE, AZ 85253  CONTENT OF The ADDRESTE STE_120_ SCOTTSDALE, AZ 85253  CONTENT OF The ADDRESS	(b) Title, and average hours per week devoted to position  DIRECTOR  DIRECTOR  DIRECTOR  DIRECTOR  DIRECTOR  DIRECTOR	(c) Compensation (If not paid, enter -0-)  0.	(d) Contributions to employee bener plans and deferr compensation  ns). If none, enter 'NC (d) Contributions to employee benef plans and deferring the contributions to employee beneficially and deferring the contributions to the contributio	O.  O.  One in the interval of	expense	C C	s 
(a) Name and address  KEITH MICHAEL INGRAM  8501 N. SCOTTSDALE RD STE 120  SCOTTSDALE, AZ 85253  SHEILA L. INGRAM  8501 N. SCOTTSDALE RD STE 120  SCOTTSDALE, AZ 85253  CONTENT OF THE PROPERT OF THE PRO	(b) Title, and average hours per week devoted to position  DIRECTOR  DIRECTOR  DIRECTOR  DIRECTOR  DIRECTOR  DIRECTOR	(c) Compensation (If not paid, enter -0-)  0.	(d) Contributions to employee bener plans and deferr compensation  ns). If none, enter 'NC (d) Contributions to employee benef plans and deferring the contributions to employee beneficially and deferring the contributions to the contributio	O.  O.  One in the interval of	expense	C C	s 
(a) Name and address  KEITH MICHAEL INGRAM  8501 N. SCOTTSDALE RD STE 120  SCOTTSDALE, AZ 85253  SHEILA L. INGRAM  8501 N. SCOTTSDALE RD STE 120  SCOTTSDALE, AZ 85253  CONTENT OF THE PROPERT OF THE PRO	(b) Title, and average hours per week devoted to position  DIRECTOR  DIRECTOR  DIRECTOR  DIRECTOR  DIRECTOR  DIRECTOR	(c) Compensation (If not paid, enter -0-)  0.	(d) Contributions to employee bener plans and deferr compensation  ns). If none, enter 'NC (d) Contributions to employee benef plans and deferring the contributions to employee beneficially and deferring the contributions to the contributio	O.  O.  One in the interval of	expense	C C	s 

Form 990-PF (2018) INGRAM FAMILY FOUNDATION	26-1482946 Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, H and Contractors (continued)	ighly Paid Employees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter	er 'NONE.'
(a) Name and address of each person paid more than \$50,000 (b) Type of ser	
NONE	
	ļ
Total number of others receiving over \$50,000 for professional services	• 0
Doubly A Common of Division Charles Askiniking	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of the foundation's four largest direct charitable activities during the tax year.	ber of
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	
Part IX-B   Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	2. Amount
1 <u>N/A</u>	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	0.
BAA	Form <b>990-PF</b> (2018)

Page 8

Part X Minimum Investment Return (All domestic foundations must complete this passes instructions.)	art. Foreign fo	undations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes a Average monthly fair market value of securities.	1 a	
<b>b</b> Average of monthly cash balances	1 b	
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	0.
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	
3 Subtract line 2 from line 1d	3	
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0.
6 Minimum investment return. Enter 5% of line 5	6	0.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private and certain foreign organizations, check here and do not complete this part XI and		ndations
1 Minimum investment return from Part X, line 6	1	
2 a Tax on investment income for 2018 from Part VI, line 5		<u> </u>
b Income tax for 2018 (This does not include the tax from Part VI)  2b		
c Add lines 2a and 2b	2 c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as qualifying distributions	. 4	
5 Add lines 3 and 4 .	5	
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	0.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	. 1a	242,000.
b Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purpose	es <b>2</b>	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3 a	
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	242,000.
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 See instructions	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	242,000.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whethe qualifies for the section 4940(e) reduction of tax in those years	r the foundation	
BAA	F	form <b>990-PF</b> (2018)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	<b>(c)</b> 2017	(d) 2018
Distributable amount for 2018 from Part XI,				
line 7				0.
2 Undistributed income, if any, as of the end of 2018:		-		
a Enter amount for 2017 only			0.	
b Total for prior years 20, 20, 20	_	0.	<del></del>	<u> </u>
3 Excess distributions carryover, if any, to 2018 a From 2013				
b From 2014				A . William
<b>c</b> From 2015				** 1 st
d From 2016				
e From 2017				, e.
f Total of lines 3a through e				الم مع
4 Qualifying distributions for 2018 from Part	0.			
· · · · · · · · · · · · · · · · · · ·				
XII, line 4 \$ 242,000.  a Applied to 2017, but not more than line 2a		-	<del></del>	
a Applied to 2017, but not more than line 2a	<del></del>		0.	
b Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus			_	
(Election required — see instructions)  d Applied to 2018 distributable amount	0.	<u> </u>		<del></del>
	040.000		· · · · · · · · · · · · · · · · · ·	0.
e Remaining amount distributed out of corpus	242,000.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the	0.			0.
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	242,000.			
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 2017 Subtract line 4a from		200 COM CO PM 2 CO CO CO CO		
line 2a Taxable amount — see instructions			0.	<u>                         </u>
6 Understributed income for 2019. Subtract lines				
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2019				0.
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)	0.	· · · · · · · · · · · · · · · · · · ·		
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions)			-	
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2019.	_		- <del>-</del>	* 🐙 🗥 🔻
Subtract lines 7 and 8 from line 6a	242,000.			
10 Analysis of line 9				]
a Excess from 2014				
b Excess from 2015				į
c Excess from 2016				
d Excess from 2017				ļ
e Excess from 2018 242,000.				

BAA

Part XIV		uctions and Dar	t VIII-A guartiar	26-148294	
1 a If the foundation has received a ruling or dete	ermination letter that				N/A
is effective for 2018, enter the date of the	ruling	•			<u></u>
b Check box to indicate whether the foundar		erating foundation of		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2018	<b>(b)</b> 2017	(c) 2016	(d) 2015	(e) Total
b 85% of line 2a					-
<ul> <li>Qualifying distributions from Part XII, line 4 for each year listed</li> </ul>					
d Amounts included in line 2c not used directly for active conduct of exempt activities		-			
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter	/	1			
<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section 4942(j)(3)(B)(i)</li></ul>					
b 'Endowment' alternative text — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test – enter		<del></del>			
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
		<del> </del>			
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)	1				
(3) Largest amount of support from an exempt organization					
(A) Gross investment income	(C   - 1 - 1 - 1			CE 000	<u> </u>
Part XV Supplementary Information assets at any time during the	(Complete this le vear — see it	s part only if the istructions.)	toundation had	a \$5,000 or more	: III
1 Information Regarding Foundation Management					
a List any managers of the foundation who hav	e contributed more i	than 2% of the total c	ontributions received	by the foundation bef	ore the
close of any tax year (but only if they have SEE STATEMENT 5	e contributea more	: tnan \$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	on (or an equally larg	e portion of the owner	ship of
a partnership or other entity) of which the NONE	foundation has a	10% or greater inter	est		
2 Information Regarding Contribution, Grant,	Gift, Loan, Scholars	hip, etc., Programs:		<u> </u>	
Check here X if the foundation only marequests for funds If the foundation make 2a, b, c, and d See instructions.	akes contributions to	preselected charitab			
a The name, address, and telephone number o	r email address of t	he person to whom a	oplications should be	addressed	
b The form in which applications should be	submitted and info	rmation and materi	als they should incli	ude.	
2 The form in which applications should be	oubou and im-		alo triog silouta men		
c Any submission deadlines.					
d Any restrictions or limitations on awards,	such as by geogra	phical areas, charita	able fields, kinds of	ınstitutions, or other	factors
	- · - · · · · · · · · · · · · · · · · ·				000 PE (0010)

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 any foundation manager or substantial contributor oundation Recipient Purpose of grant or contribution status of recipient Amount Name and address (home or business) a Paid during the year SEE STATEMENT 6 Total 3 a 242,000. b Approved for future payment 3 b

Total

nter o	gross amounts unless otherwise indicated		business income		by section 512, 513, or 514	(e)
1 F	Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
' a	Togram Service revenue			Code		
b_						
		<del>                                     </del>		+		
ď		<del>  </del>	<del></del>			
e -						
f T						
g F	ees and contracts from government agencies		·			
	Membership dues and assessments					
3 li	nterest on savings and temporary cash investments					
4 [	Dividends and interest from securities					
5 N	Net rental income or (loss) from real estate				1	en men juganian enterflightight dis patricie
	Debt-financed property					
	Not debt-financed property		<del></del>			
	let rental income or (loss) from personal property					
	Other investment income		<del> </del>			
	ain or (loss) from sales of assets other than inventory					
	let income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11 (	Other revenue					
a _						
b_		<u> </u>				
_		<u> </u>				
С_						
d_			· <del></del> · · · · · · · · · · · · · · · · · ·			
d_ e_						
d_ e_ 12 §	Subtotal Add columns (b), (d), and (e)					
d_ e_ 12 3	Total. Add line 12, columns (b), (d), and (e)				13	0
d_ e_ 12 S 13 T See w	Fotal. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat					0
d_ e 12 S 13 T See w	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the	e Accomplis		<del></del>	oses	
d_e_12_S 13_T See w	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	
d_ e_ 12 S 13 T See w	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	
d_e_12_S 13_T See w	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	
d_e_12_S 13_T See w	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	
d_e_12_S 13_T See w	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	
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d_e 12 S 13 T See w	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	
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d_e 12 S 13 T See w	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	
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d_e 12 S 13 T See w	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	
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d_e_12_S 13_T See w	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	
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d_e_12_S 13_T See w	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	
d_e_12_S 13_T See w	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	
d_e 12 S 13 T See w	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	
d_e_12_S 13_T See w	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	
d_e 12 S 13 T See w	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	
d_e_12_S 13_T See w Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	
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d_e_12_S 13_T See w Part Line	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	
d_e_12_S 13_T See w	Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculat XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomplis		<del></del>	oses	

# Rart XVIII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

descrit relation a Transf (1) Ca (2) Ot b Other (1) Sa (2) Pu (3) Re (4) Re (5) Lo (6) Pe c Sharin d If the actine good	ped in section 501(c) g to political organizations from the reporting the respective series from the reporting the respective series of assets to a notice and of facilities, equipment arrangulars or loan guaranteer formance of services g of facilities, equipments answer to any of the policy of the respective series of t	(other than secations? g foundation to encharitable execute a noncharita inpment, or othe ements es or membersh ment, mailing lis above is 'Yes,' ervices given by	ble exempt organization r assets  ip or fundraising solicitations, other assets, or paid of the reporting foundation. If	ons) or in section of ons employees the foundation references	on 527,	· · ·s show the fair r iir market value in	1 a (1) 1 a (2) 1 b (1) 1 b (2) 1 b (3) 1 b (4) 1 b (5) 1 b (6) 1 c	Yes	X X X X X X X
any tra	ansaction or sharing	arrangement, sl	now in column (d) the val	ue of the good	s, other assets, or	services receive	d.		
(a) Line no	(b) Amount involved	(c) Name o	f noncharitable exempt organiza	tion (d	) Description of transfer	rs, transactions, and	sharing arrang	ements	<u> </u>
N/A									
	· · · · · · · · · · · · · · · · · · ·								
						<del> </del>			
			·		<del></del>	<del></del>			
						<del> </del>			
	···								
		ļ			<del></del>	<del> </del>			
	<del></del>		·						
					<u>.</u>				
descrit	oundation directly or in ded in section 501(c) ,' complete the follow	(other than sec	l with, or related to, one or tion 501(c)(3)) or in secti	more tax-exempon 527?	ot organizations		Yes	XI	No
(	a) Name of organiza	tion	<b>(b)</b> Type of organ	ızatıon	(c) D	escription of rela	tionship		
N/A									
						-			
Under	r penalties of perjury, I decia	are that I have exami	ned this return, including accomplished taxpayer) is based on all info	anying schedules a	nd statements, and to the	best of my knowledge	e and belief, it i	s true,	
Sign Here	K-m.g.	ng/c-	/ 10-	30-19	DIRECTOR		May the IRS this return v preparer sh See instruc	vith the own be lions,	e
Sigi	nature of officer or trustee	<u>U</u>	Date	0 / T	itle	<del> </del>	X Y	es	No
Paid	CHARLES V.	<sup>ame</sup> MIHAYLO	Prepare & signature	into CPA	Pate 10.30.19	Check if self-employed	PTIN P004442	88	
Preparer	Firm's name	EDWARDS, L	ARGAY, MIHAYLO	&/CO., PI	LC Fir	m's EIN ▶ 86-1(	09057		
Use Only			ORN ROAD, SUITE	2/60					
	<u> </u>		Z 85012	-	Ph	one no (602)	285-0	500	
BAA					· · · · · · · · · · · · · · · · · · ·		Form <b>990</b> -		2018)

2018	FEDERAL STATEMENTS	PAGE	
	INGRAM FAMILY FOUNDATION	26-148294	
STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES			
ACCOUNTING FEE	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 1,320. \$ 490. \$ 1,320. \$ 490. \$ 0.	(D) CHARITABLE PURPOSES  \$ 0.	
STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES			
CORPORATE INCOME TAX	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	(D) CHARITABLE PURPOSES  \$ 0.	
STATEMENT 3 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES	•		
ADMINSTRATION EXP BANK CHARGES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED NET INCOME  \$ 47.  TOTAL \$\frac{\$ 4.}{\$ 4.} \frac{\$ 4.}{\$ 47.} \frac{\$ 5.}{\$ 0.}	(D) CHARITABLE PURPOSES  \$ 0.	

OTHER LIABILITIES

EL DORADO HOLDINGS VIII, LLC

\$ 10,525.

TOTAL \$ 10,525.

STATEMENT 5 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

KEITH MICHAEL INGRAM SHEILA L. INGRAM

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## **FEDERAL STATEMENTS**

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**INGRAM FAMILY FOUNDATION** 

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#### STATEMENT 6 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OFGRANT	AMOUNT
GARY SINISE FOUNDATION PO BOX 5008 STUDIO CITY CA 94614	NONE	501 (C) (3)	TO SUPPORT AND SERVE OUR NATION BY HONORING OUR DEFENDERS, VETERANS, FIRST RESPONDERS, THEIR FAMILIES AND THOSE IN NEED. THIS IS DONE BY CREATING AND SUPPORTING UNIQUE PROGRAMS DESIGNED TO ENTERTAIN, EDUCATE, INSPIRE, STRENGTHEN, AND BUILD COMMUNITIES.	\$ 10,000.
NRA FOUNDATION 11250 WAPLES MILL RD. FAIRFAX VA 22030	NONE	501 (C) (3)	TO PRESERVE THE CORE OF OUR AMERICAN VALUES AND TRADITIONS IN OUR STEADFAST EFFORT TO TEACH FREEDOM.	25,000.
PHOENIX SEMINARY 4222 E. THOMAS RD. SUITE 400 PHOENIX AZ 85018	NONE	501(C)(3)	TO EQUIP GODLY LEADERS TO SERVE JESUS CHRIST EFFECTIVELY IN A DIVERSE AND CHANGING WORLD BY PROVIDING THEOLOGICAL EDUCATION WITH PERSONAL MENTORING AND MINISTRY TRAINING IN PARTNERSHIP WITH THE LOCAL CHURCH.	20,000.

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### **FEDERAL STATEMENTS**

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**INGRAM FAMILY FOUNDATION** 

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### STATEMENT 6 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
ASU FOUNDATION PO BOX 2260 TEMPE AZ 85280	NONE	501 (C) (3)	TO ADVANCE, THROUGH PHILANTHROPY, THE SUCCESS OF ARIZONA STATE UNIVERSITY AS A NEW AMERICAN UNIVERSITY.	\$ 5,000.
CSU FOUNDATION 410 UNIVERSITY SERVICES CIR FORT COLLINS CO 80523	NONE	501 (C) (3)	TO ENHANCE THE EDUCATIONAL EXCELLENCE OF THE CALIFORNIA STATE UNIVERSITY IN TEACHING, LEARNING, COMMUNITY SERVICE, AND APPLIED RESEARCH.	3,000.
SNU EQUINE CENTER 4700 N. THOMPKINS BETHANY OK 73008	NONE	501 (C) (3)	TO MAKE CHRISTLIKE DISCIPLES THROUGH HIGHER EDUCATION IN CHRIST-CENTERED COMMUNITY.	10,000.
CELEBRITY FIGHT NIGHT FOUNDATION 2111 E. HIGHLAND AVE # 135 PHOENIX AZ 85016	NONE	501 (C) (3)	TO PROMOTE 'ONGOING EFFORTS TO ELIMINATE SICKNESS AND POVERTY BY CONTRIBUTING TO RESEARCH AIMED AT FINDING A CURE FOR CATASTROPHIC DISEASES AND PROVIDE FUNDING TO NON-PROFIT ORGANIZATIONS THAT CREATE OPPORTUNITIES FOR YOUTHS.	110,000.

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## **FEDERAL STATEMENTS**

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**INGRAM FAMILY FOUNDATION** 

26-1482946

#### STATEMENT 6 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OFGRANT	AMOUNT
THE GOD'S NOT DEAD FOUNDATION 18940 N. PIMA RD. SUITÉ 110 SCOTTSDALE AZ 85255	NONE	501 (C) (3)	TO GIVE VOICE TO THE TRUTHS OF GOD'S WORD AND HELP YOU MAKE A STATEMENT WITH YOUR ELECTRONICS BY LETTING EVERYONE KNOW THAT GOD'S NOT DEAD!	\$ 10,000.
PHOENIX MERCURY BASKETBALL 201 E. JEFFERSONST. PHOENIX AZ 85004	NONE	501 (C) (3)	FOR UPLIFTING WOMEN, BEING AN INCLUSIVE AND SAFE SPACE FOR ALL, AND INSPIRING THE NEXT GENERATION.	4,000.
MSU ALUMNI FOUNDATION PO BOX 172750 BOZEMAN MT 59717	NONE	501 (C) (3)	TO CULTIVATE LIFELONG RELATIONSHIPS AND SECURE PRIVATE SUPPORT TO ADVANCE MONTANA STATE UNIVERSITY.	10,000.
TURNING POINT USA 217 1/2 ILLINOIS ST. LEMONT IL 60439	NONE	501 (C) (3)	TO IDENTIFY, EDUCATE, TRAIN, AND ORGANIZE STUDENTS TO PROMOTE FREEDOM.	10,000.
CHARLIE RUSSELL RIDERS FOUNDATION PO BOX 1284 BIGFORK MT 59911	NONE	501 (C) (3)	PRESERVE, RESEARCH, INTERPRET, AND EDUCATE ON THE ART AND LIFE OF CHARLES MARION RUSSELL; THE ART AND LIFE OF HIS CONTEMPORARIES; AND THE ART OF PRECEDING AND ENSUING GENERATIONS THAT DEPICTS AND FOCUSES ON THE CULTURE, LIFE AND COUNTRY OF RUSSELL'S WEST.	25,000.
			TOTAL	\$ 242,000.