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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

For	calend	lar year 2018 or tax year beginning	and ending						
	Name of foundation  A Employer identification number								
		ELL AND PATRICIA STEAGALL	_						
		LY FOUNDATION		<del></del>		-2061059			
		I street (or P 0 box number if mail is not delivered to street address) SOUTH NEW HOPE ROAD, SUITE 30		oom/suite		phone number (see instructions $4-616-3061$	)		
		, state or province, country, and ZIP or foreign postal code			70	4-010 3001			
		ONIA NC 28054			C If exe	emption application is pending,	check here		
			rn of a former public ch	arity	D 1 F	oreign organizations, check hei	re •		
) 	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Final return Amended	•			oreign organizations meeting th			
		Address change Name cha				5% test, check here and attach			
( )				-611					
		· · · · · · · · · · · · · · · · · · ·		119		rate foundation status was term on 507(b)(1)(A), check here	inated under		
_			e private foundation  X Cash Acc	<del></del>					
		ket value of all assets at J Accounting method ear (from Part II, col. (c), Other (specify)	Acc	crual		foundation is in a 60-month ter r section 507(b)(1)(B), check he	_		
_	ia or ye ie 16) l		no an agab baga \						
	art I		Ī			Γ	(d) Disbursements		
LI	<u> </u>	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net inv		(c) Adjusted net income	for chantable purposes		
		the amounts in column (a) (see instructions) )	books	incon		moone	(cash basis only)		
	1	Contributions, gifts, grants, etc , received (attach schedule)		7					
	2	Check ► X if the foundation is <b>not</b> required to attach Sch B	<del></del>			·	r		
	3	Interest on savings and temporary cash investments	622	<del></del>	622				
	4	Dividends and interest from securities	51,542		51,542				
	5a	Gross rents				,	ļ		
Revenue	b	Net rental income or (loss)	7			T	[		
	6a	Net gain or (loss) from sale of assets not on line 10	100,713	F	<del>-</del>		Bere Lization		
š	b	Gross sales price for all assets on line 6a 761,280		<del> </del>					
æ	7	Capital gain net income (from Part IV, line 2)	<u></u>		00,713	RECENTED			
	8	Net short-term capital gain		# == = = = = = = = = = = = = = = = = =		ABAEIAED O	5		
	9	Income modifications		#	<u> </u>		8 1		
	10a	Gross sales less returns and allowances	<u>*</u>	La Tachata	=   8 -	TK=1-5-2019-1			
	b	Less Cost of goods sold	¥	<u> </u>		OGDEN, UT			
	C	Gross profit or (loss) (attach schedule)				DODE(*, U)			
	11	Other income (attach schedule)					1		
	12	Total. Add lines 1 through 11	152,877	<del>†                                      </del>	52,877	0			
Ś	13	Compensation of officers, directors, trustees, etc	0	1					
enses	14	Other employee salaries and wages							
ber	15	Pension plans, employee benefits							
	16a	Legal fees (attach schedule)  Accounting fees (attach schedule)  STMT 1	1 250						
و	b		1,350	+	25 010				
Operating and Administrative Ex	C	Other professional fees (attach schedule) STMT 2	25,018	+ '	25,018				
štra	17	Interest Taxes (attach schedule) (see instructions)  STMT 3	11,274	<del>  .</del>	11,274				
Ę.	18	, , ,	11,2/4	· · · ·	11,2/4				
Ξ	19	Depreciation (attach schedule) and depletion		<del>                                     </del>					
Ad	20 21	Occupancy Travel, conferences, and meetings		<del> </del>		<u> </u>			
פַ	22	Printing and publications		!		· · · · · ·			
<u>a</u>	23	Other expenses (att. sch.)		<del> </del>					
<u>.</u>	24	Total operating and administrative expenses.		<del>                                     </del>					
rat	- 7	Add lines 13 through 23	37,642	·	36,292	o	o		
be	25	Contributions, gifts, grants paid				<b>****</b> ********************************	103,000		
Ō	26	Total expenses and disbursements. Add lines 24 and 25	140,642		36,292	0	103,000		
	27	Subtract line 26 from line 12	T-1	1		·	= = = =		
		Excess of revenue over expenses and disbursements	12,235		====	1			
	Ь	Net investment income (if negative, enter -0-)			16,585				
	c	Adjusted net income (if negative, enter -0-)		Ü.		0			
	<u> </u>		·	1 2	_===				

-	Part I	Ralance Shoots Attached schedules and amounts in the description colum	าก	Beginning of year	End o	f year
L	<u>Part I</u>	Balance Sheets Attached schedules and amounts in the description colun should be for end-of-year amounts only (See instructions		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing		100,124	98,754	98,754
`	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶		*		
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
d	6	Receivables due from officers, directors, trustees, and other				
	•	disqualified persons (attach schedule) (see				
ı		instructions)				
	7	Other notes and loans receivable (att. schedule)				2
ļ	•	Less allowance for doubtful accounts	0			
,,	8	Inventories for sale or use	_			
Assets	9	Prepaid expenses and deferred charges				
1SS	10a	Investments – U.S. and state government obligations (attach schedule)				
`	_	Investments – corporate stock (attach schedule)  SEE STM	г <i>4</i> .	1,781,580	2,148,463	2,184,676
ı	b	Investments – corporate bonds (attach schedule)		1,701,300	2,140,403	2,202,070
	C	·				
	11	Investments – land, buildings, and equipment basis		<u> </u>		
	12	Less accumulated depreciation (attach sch.) ► Investments – mortgage loans				
		<b>4 5</b>				
	13	Investments – other (attach schedule)		, <u></u>		
١	14	Land, buildings, and equipment basis		<u>-</u>		
-	4.5	Less accumulated depreciation (attach sch.)	,			
	15	Other assets (describe >	)			
	16	Total assets (to be completed by all filers – see the		1 001 704	2,247,217	2 202 420
$\dashv$	47	instructions. Also, see page 1, item I)		1,881,704	2,241,211	2,283,430
- 1	17	Accounts payable and accrued expenses				
ဖွ	18	Grants payable				
Liabilities	19	Deferred revenue			<u></u>	
٥	20	Loans from officers, directors, trustees, and other disqualified persons				
<u> </u>	21 22	Mortgages and other notes payable (attach schedule)	,			
		Other liabilities (describe	)	0	0	
+	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	$\overline{}$		<del></del>	
٨		and complete lines 24 through 26, and lines 30 and 31.				
ces	24	Unrestricted				
딞		Temporarily restricted				
<b>Assets or Fund Balanc</b>		Permanently restricted				
힑		Foundations that do not follow SFAS 117, check here	► X			
킲		and complete lines 27 through 31.				
히		Capital stock, trust principal, or current funds				
Ş.		Paid-in or capital surplus, or land, bldg, and equipment fund				
SS				1,881,704	2,247,217	
₹		Retained earnings, accumulated income, endowment, or other funds		1,881,704	2,247,217	
Se l		Total link like and not posses (see instructions)		1,001,704	2,241,211	
		Total liabilities and net assets/fund balances (see		1,881,704	2,247,217	
<u>,                                    </u>	Part II	instructions)  II	200	1,001,704	2,291,211	
		net assets or fund balances at beginning of year – Part II, column (a), line		gree with		
٠		of-year figure reported on prior year's return)	50 (mast e	igree with	1	1,881,704
2		amount from Part I, line 27a			2	12,235
		increases not included in line 2 (itemize) SEE STATEMENT	' 5		3	378,365
		nes 1, 2, and 3	. •		4	2,272,304
		eases not included in line 2 (itemize) SEE STATEMENT 6	5		5	25,087
		net assets or fund balances at end of year (line 4 minus line 5) – Part II, ci		ine 30	6	2,247,217
Ť	. 51011	The second of th	- · · · · · · · · · · · · · · · · · · ·		_1_*_1	Form 990-PF (2018)

Part IV   Capital Gains a	nd Losses for Tax on Investme	ent Income				
	e the kind(s) of property sold (for example, real estate, varehouse, or common stock, 200 shs MLC Co )		(b) How acquired P Purchase D Donation	(c) Date ad (mo , day		(d) Date sold (mo , day, yr )
1a RAYMOND JAMES	(78651179)		P	VARIO	วบร	VARIOUS
	78651179)		P	VARIO	ous	VARIOUS
c RAYMOND JAMES (	78651179)	-				
d						
е						
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)		r other basis ense of sale			or (loss) ) minus (g))
a 264,057			268,872			-4,815
ь 494,658			391,695			102,963
c 2,565					·	2,565
d						
e						
Complete only for assets showing	gain in column (h) and owned by the four	ndation on 12/31/69		(i)	Gains (Col	(h) gain minus
(ı) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) I (j), if any		(k), but not	less than -0-) or om col (h))
a						-4,815
b	1.00					102,963
С						2,565
d						•
е						
2 Capital gain net income or (net ca	If gain, also enter in F If (loss), enter -0- in F			2		100,713
, ,	s) as defined in sections 1222(5) and (6) column (c) See instructions. If (loss), enter	er -0- ın		3		
	nder Section 4940(e) for Reduc	ed Tay on Net I	nvestment incon			
	foundations subject to the section 4940(a)					
	·	tax on het investine	ant income )			
If section 4940(d)(2) applies, leave this	s part blank					
	on 4942 tax on the distributable amount of under section 4940(e). Do not complete t	• •	e period?			Yes X No
	ach column for each year, see the instruct		any entries	•		
(a)	(b)					(d)
Base period years Calendar year (or tax year beginning in)	Advantad availeura distabilitana	Net value	(c) e of nonchantable-use assets			nbution ratio divided by col (c))
2017		,387	2,261,8	348	(00. (0)	0.042614
2016		,849	2,005,1			0.048301
2015		,105	2,012,4			0.042290
2014		,900	1,851,0			0.038843
2013		,330	1,526,8			0.039513
20,0		,				
2 Total of line 1, column (d)				2		0.211561
	year base period – divide the total on line				1	0 040310
the number of years the foundatio	n has been in existence if less than 5 year	rs		3		0.042312
4 Enter the net value of noncharitab	le-use assets for 2018 from Part X, line 5			4		2,541,628
5 Multiply line 4 by line 3				5	_	107,541
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)			6		1,166
7 Add lines 5 and 6				7		108,707
8 Enter qualifying distributions from				8		103,000
If line 8 is equal to or greater than Part VI instructions	line 7, check the box in Part VI, line 1b, ai	nd complete that par	τ using a 1% tax rate	see the		

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Pa	rt VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1	+			
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)			der Seister nich	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			2,332
	here ▶ \ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of	حا			
	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			2,332
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			2,332
6	Credits/Payments	-			
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 4,864			·····	
b	Exempt foreign organizations – tax withheld at source			_	
С	Tax paid with application for extension of time to file (Form 8868)		200	- <del> </del>	
d	Backup withholding erroneously withheld 6d	<u> </u>			
7	Total credits and payments Add lines 6a through 6d	7			<u>1,864</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	<u> </u>		2,532
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 2,332 Refunded ▶	11	L		200
- Pa	rt VII-A-I Statements Regarding Activities			<del></del>	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				es No
	participate or intervene in any political campaign?			1a	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				
	instructions for the definition			1b	X
	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			-	_
C	Did the foundation file Form 1120-POL for this year?			1c	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation  \$ (2) On foundation managers  \$	_			===
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			-	====
•	on foundation managers  \$				_ x
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			-	
3	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			<del>*</del>  -	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		•	5	X
-	If "Yes," attach the statement required by General Instruction T			<b>i=</b> =	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				***
	By language in the governing instrument, or			-	= ==
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?			6 2	K
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV			7 2	K
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			j	16-27-28
	NC		ļ		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			<u> </u>	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation			8b 2	K
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See instructions for Part XIV If "Yes,"				
	complete Part XIV			9	<u>x</u>
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses			10	<u> </u>
			F	:om 990:	- <b>PF</b> (2018)

<u>l Pa</u>	art VII-A 1 Statements Regarding Activities (continued)					
	•			-	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the					
•	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions			11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified					
	person had advisory privileges? If "Yes," attach statement. See instructions			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applica	tion?		13	X	<u> </u>
	Website address ► N/A					_
14		elephone no 🕨	704-8	867-	734	4
	355 SOUTH NEW HOPE ROAD			_		
	Located at ► GASTONIA NC	ZIP+4 ▶	28054	1		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here		1			▶ _
	and enter the amount of tax-exempt interest received or accrued during the year	▶ [	15			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority				Yes	No
	over a bank, securities, or other financial account in a foreign country?			16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			-		. <del></del>
	the foreign country ▶			<u> </u>		
<u>Pa</u>	art VII-B1 Statements Regarding Activities for Which Form 4720 May Be Require	<u>d</u>		h		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year, did the foundation (either directly or indirectly)	<u></u>	FF			-
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	☐ Yes	X No		<u></u>	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	<b>—</b>	₹ <b>7</b>	=		1 3-2-
	disqualified person?	Yes	X No X No	<u> </u>	===	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	<b>=</b>	ı		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	∐ Yes	X No	1		**
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	□ v	X No	-		
	the benefit or use of a disqualified person)?  (6) Associate any management of a gavenment official? (Expection, Charle "Ne" of the	∐ Yes	X No	<u> </u>	====	===
	(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	Yes	X No			
<b>L</b>	termination of government service, if terminating within 90 days.)	_	22 140		====	==
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulative section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	Olis	N/A	1b	*****	
	Organizations relying on a current notice regarding disaster assistance, check here		▶ □	F		
С	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?		N/A	1c		
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))					-
а	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?	X Yes	No	-	=	
	If "Yes," list the years ▶ 20 <b>17</b> , 20 , 20 , 20	_	_		بتشوشن	-
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)					
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to					
	all years listed, answer "No" and attach statement – see instructions )			2b	Х	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
	<b>▶</b> 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
	at any time during the year?	∐ Yes	X No			
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 determine if the		/-		<u> </u>	
	foundation had excess business holdings in 2018 )	_	N/A	3b		32
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes	7		4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its					
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20	1187		4b	00 DE	X
			1	om 99	,U-FF	(2018)

2 Compensation of five highest-paid employees (other than those included of "NONE."	on line 1 – see instr	uctions). If none,	enter	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
			-	
•				
Total number of other employees paid over \$50,000	<u> </u>		<u> </u>	

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Part VIII Information About Officers, Directors, Trustees, Foundatio	n Managers, Highly Paid Em	
and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. See instruction	s. If none, enter "NONE."	-
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE .		
Total number of others receiving over \$50,000 for professional services		<b></b>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the organizations and other beneficianes served, conferences convened, research papers produced, etc.	number of	Expenses
1 N/A		
I N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instruction	is)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		
2		
		<u></u>
All other program-related investments See instructions		

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▶

Total. Add lines 1 through 3

Form 990-PF (2018) DARRELL AND PATRICIA STEAGALL 56-2061059 Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, Part X see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1 purposes 2,475,380 1a Average monthly fair market value of securities а 104,953 1b Average of monthly cash balances b 1c Fair market value of all other assets (see instructions) , 580 1d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 0 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 2,580, 3 Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see 38,705 instructions) 2,541,628 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 127,081 Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations, check here ▶ and do not complete this part ) 127,081 Minimum investment return from Part X, line 6 1 2,332 Tax on investment income for 2018 from Part VI, line 5 2a b Income tax for 2018 (This does not include the tax from Part VI) 2c Add lines 2a and 2b 124,749 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 4 Recoveries of amounts treated as qualifying distributions 124,749 5 Add lines 3 and 4 5 6 6 Deduction from distributable amount (see instructions) 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 124,749 line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 103,000 1a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 b Program-related investments - total from Part IX-B 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the

3a Suitability test (prior IRS approval required) 3b Cash distribution test (attach the required schedule) 103,000 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4

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

Adjusted qualifying distributions. Subtract line 5 from line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2018)

103,000

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Pa	art XIII Undistributed Income (s	see instructions)			<u>-                                    </u>	
			(a)	(b)	(c)	(d)
1	Distributable amount for 2018 from Part XI,		Corpus	Years prior to 2017	2017	2018
•	line 7					124,749
2	Undistributed income, if any, as of the end of	f 2018		<u></u>		
	Enter amount for 2017 only	. 2010			106,651	
	Total for prior years 20 , 20	20				
3	Excess distributions carryover, if any, to 201					
	From 2013	0			-	
-	From 2014		1		- 1	
	From 2015					
	From 2016		ł			
		·		<b> </b> -		
_	From 2017				=4	
, f	Total of lines 3a through e		1	я	======================================	
4	Qualifying distributions for 2018 from Part XI	I,				
	line 4 > \$ 103,000		[ '	]	102 000	•
	Applied to 2017, but not more than line 2a			e e	103,000	
þ	Applied to undistributed income of prior years	S				
	(Election required – see instructions)			17		
С	Treated as distributions out of corpus (Election	on		<u>.</u>	EF	
_	required – see instructions)		,	<u> </u>	an	
	Applied to 2018 distributable amount		·	#	-#	
	Remaining amount distributed out of corpus				.=	
5	Excess distributions carryover applied to 201				1	=
	(If an amount appears in column (d), the same	ne	!		=P	
	amount must be shown in column (a))			1	## ##	-
6	Enter the net total of each column as	;		1.	_==	:
	indicated below:				**	
	Corpus Add lines 3f, 4c, and 4e Subtract lin	ie 5			-d	
b	Prior years' undistributed income Subtract					1
	line 4b from line 2b				- -	
С	Enter the amount of prior years' undistributed	t				,
	income for which a notice of deficiency has				-u	
	been issued, or on which the section 4942(a)	)			± !	
	tax has been previously assessed				R F	
d	Subtract line 6c from line 6b Taxable					,
	amount – see instructions				•	
е	Undistributed income for 2017 Subtract line			"		,
	4a from line 2a Taxable amount – see			- 4		
	instructions				3,651	<u></u>
f	Undistributed income for 2018 Subtract lines	5			19 =9 =8	
	4d and 5 from line 1 This amount must be					<b></b>
	distributed in 2019		1.2	2	- 1	124,749
7	Amounts treated as distributions out of corpu	ıs			7 H U ( 	·
	to satisfy requirements imposed by section					<b>1</b>
	170(b)(1)(F) or 4942(g)(3) (Election may be			'	49	i
	required—see instructions)			'	==	· 
8	Excess distributions carryover from 2013 not			11	제 () 	,
	applied on line 5 or line 7 (see instructions)			- -	16	<del></del>
9	Excess distributions carryover to 2019.			<b>'</b>		·
	Subtract lines 7 and 8 from line 6a					<del> </del>
0	Analysis of line 9			יי	90 ft 	
а	Excess from 2014			•	# 	=
b	Excess from 2015			]		(
С	Excess from 2016		j	. <del>.</del>	 FP	
d	Excess from 2017			1	Č	-
е	Excess from 2018			l į	n n	-

Pa	art XIV Private Operating Fo	undations (see in:	structions and Part	VII-A, question 9)		-
1a	If the foundation has received a ruling or	determination letter that	t it is a private operating	3		
	foundation, and the ruling is effective for 2	2018, enter the date of	the ruling	_	<u> </u>	
b	Check box to indicate whether the foundation	tion is a private operati	ng foundation described	d in section 49	942(J)(3) or 494:	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	r	(e) Total
	income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
	investment return from Part X for					
	each year listed			 		
b	85% of line 2a		ļ <u>-</u>			/
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
_	for active conduct of exempt activities  Qualifying distributions made directly			<u> </u>		
е	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
-	alternative test relied upon					
а	"Assets" alternative test – enter					
	(1) Value of all assets		:			
	(2) Value of assets qualifying under			/		
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test – enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed		//		· · · · · · · · · · · · · · · · · · ·	
С	"Support" alternative test – enter					
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments on		/			
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization	<i></i>				
	(4) Gross investment income	<u>[</u>				
Pa	Supplementary Inform			he foundation had	d \$5,000 or more	in assets at
	any time during the ye		ions.)		·····	
1	Information Regarding Foundation Ma	•	than 20/ of the total com	stabutions recovered by	ha faundation	
а	List any managers of the foundation who before the close of any tax year (but only				ne loundation	
	NONE	ii tiley llave contributed	more man \$5,000) (or	cc 30011011 307 (d)(2) )		
b	List any managers of the foundation who	own 10% or more of the	e stock of a corporation	(or an equally large po	rtion of the	
	ownership of a partnership or other entity)					
	NONE					
2	Information Regarding Contribution, G	Grant, Gift, Loan, Scho	olarship, etc., Program	ns:		
	Check here ▶ ☐ If the foundation only	makes contributions to	preselected charitable	organizations and does	s not accept	
	unsolicited requests for funds If the found		its, etc., to individuals of	r organizations under o	ther conditions,	
	complete items 2a, b, c, and d See instru				<del> </del>	
а	The name, address, and telephone numb			olications should be add	ressed	
	DARRELL & PATRICIA S					
<u>_</u>	355 SOUTH NEW HOPE R	-		should include		
b	The form in which applications should be SEE STATEMENT 8	submitted and informat	ion and materials they s	snould include		
С	Any submission deadlines <b>N/A</b>					
d	Any restrictions or limitations on awards, s	such as by geographica	ıl areas, charıtable fields	s, kinds of institutions, o	or other	
	factors					
	N/A					

Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year ALZHEIMER'S FOUNDATION N/A 322 EIGHT AVENUE 501 (C) (3) NEW YORK NY 10001 ALZHEIMER'S RESEARCH AMERICAN FOREST FOUNDATION 1111 NINTEENTH STREET NW N/A 501 (C) (3) 1,000 WASHINGTON DC 20036 FOREST SUSTAINABILITY ANTI DEFAMATION LEAGUE OF ATLANTA 3490 PIEDMONT ROW NE 501 (C) (3) ANTI-BULLYING ATLANTA GA 30305 ATLANTA EDUCATIONAL 740 BISMARK RAOD NE N/A 501 (C) (3) ATLANTA GA 30324 ARTS, CULTURE & HUMANITIES ATLANTA SYMPHONY 501 (C) (3) 1280 PEACHTREE STREET N/A AYMPHONY CRCHESTRA ATLANTA GA 30309 BACKPACK WEEKEND NA 501 (C) (3) 3707 ALLIANCE DRIVE FEED CHILDREN IN POVERTY GREENSBORO NC 27407 1,000 BAT CONSERVATION INTERNATIONAL N/A 501 (C) (3) P.O. BOX 162603 AUSTIN TX 78716 BAT CONSERVATION 1,000 BRIGHT BLESSINGS 501 (C) (3) 608-A MATTHEWS-MINT HILL N/A MATTHEWS NC 28105 SUPPORT HOMELESS CHILDREN BRYON F. LEWIS COLLEGE 2,000 CALDWELL COUNTY PATHWAYS INC PO BOX 1954 NA CONSERVATION LENOIR NC 28645 1,000 ▶ 3a 103,000 Total b Approved for future payment N/A ▶ 3b Total

Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year CARENGIE MELLON N/A 501 (C) (3) 5000 FORBES AVENUE UNIVERSITY PITTSBURGH PA 15213 CAROLINA CROSS CONNECTION N/A PO BOX 5723 501 (C) (3) CONCORD NC 28027 YOUTH SUMMER CAMP CENTRAL UNITED 501 (C) (3) 214 NORTH ACADEMY STREET N/A CHURCH MOORESVILLE NC 28115 1,500 CENTRAL UNITED METHODIST 501 (C) (3) 214 NORTH ACADEMY STREET N/A BOY SCOUTS MOORESVILLE NC 28115 CHILDREN'S HUNGER FUND 501 (C) (3) 12820 PIERCE STREET N/A FEEDING THE HUNGRY 1,500 PACOIMA CA 91331 CHRONS & COLITIS FOUNDATION 501 (C) (3) 386 PARK AVENUE SOUTH N/A NEW YORK NY 10016-8804 DISEASE RESEARCH DUNCAN MEMORIAL UNITED METHODIST 901 HIGHMARKET STREET N/A 501 (C) (3) CHURCH GEORGETOWN SC 29440 3,000 FAMILY PROMISE OF GASTON COUNTY N/A 501 (C) (3) PO BOX 67 FEEDING THE HUNGRY GASTONIA NC 28053-0067 FEEDING AMERICA 35 EAST WACKER DRIVE N/A 501 (C) (3) CHICAGO IL 60601 FEEDING CHILDREN FIELDSTONE PRESBYTERIAN N/A 501 (C) (3) 804 FIELDSTONE ROAD ROSWELL GA 30075 BOY SCOUTS **Total** b Approved for future payment N/A ▶ 3b Total

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year FIELDSTONE PRESBYTERIAN CHURCH 501 (C) (3) N/A 804 FIELDSTONE ROAD CHURCH MOORESVILLE NC 28115 FOOD FOR DAYS N/A 224 ROLLING HILLS RD 501 (C) (3) CHILDHOOD HUNGER 1,000 MOORESVILLE NC 28117 FRIENDS OF RAYMOND JAMES 880 CARILLON HWY N/A 501 (C) (3) ST. PETERSBURG FL 33716 GENERAL CHARITABLE GASTONIA CORNERSTONE 400 EAST FIFTH STREET N/A 501 (C) (3) ADDICTION RECOVERY GASTONIA NC 28053 GASTON COUNTY HEALTH & HUMAN 330 DR. MARTIN LUTHER NONE GASTONIA NC 28052 HOMELSS SHELTER 1,000 GEORGIA COURT APPOINTED SPECIAL 75 MARIETTA ST NW STE 404 N/A 501 (C) (3) CHILD ADVOCATES ATLANTA GA 30303 GEORGIA DIETETIC FDN 4780 ASHEFORD DUNWOODY RD NONE ATLANTA GA 30338 5,000 GEORGIA PUBLIC BROADCASTING 260 14TH STREET NW N/A 501 (C) (3) ATLANTA GA 30318 RADIO BROADCASTING 1,000 GEORGIA STATE N/A 501 (C) (3) PO BOX 3963 ATLANTA GA 30302 UNIVERSITY HIGH MUSEUM OF ART N/A 1280 PEACHTREE STREET |501 (C) (3) ATLANTA GA 30309 ART MUSEUM Total b Approved for future payment N/A ▶ 3b Total

Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year HOLY ANGELS N/A 6600 WILKINSON BLVD 501 (C) (3) BELMONT NC 28012-0710 CARE FOR INTELLECTUALLY DISABLED 5,000 HOPE OF MOORESVILLE N/A 501 (C) (3) PO BOX 434 MOORESVILLE NC 28115 HOMELESS SHELTER 1,500 HUNTERS FOR THE HUNGRY N/A PO BOX 304 501 (C) (3) FEEDING THE HUNGRY BIG ISLAND VA 24526 1,500 HUNTING FOR HEROES 8426 CLINT DRIVE N/A 501 (C) (3) INJURED LAW ENFORCEMENT THERAPY BELTON MO 64012 MARCH OF DIMES 7506 E. INDEPENDENCE BLVD N/A 501 (C) (3) BIRTH CHARLOTTE NC 28227 **DEFECTS** MEMORIAL SLOAN KETTERING CANCER 1275 YORK AVENUE N/A 501 (C) (3) CANCER RESEARCH NEW YORK NY 10065 MOORESVILLE CHRISTIAN MINISTRY 266 N. BROAD ST. 501 (C) (3) NA MOORESVILLE NC 28115 CHRISTIAN OUTREACH 1,500 MOORESVILLE SOUP KITCHEN PO BOX 5173 N/A 501 (C) (3) MOORESVILLE NC 28117 FEEDING THE HUNGRY 1,500 MYERS MEMORIAL 501 (C) (3) 301 SOUTH NEW HOPE ROAD N/A GASTONIA NC 28054 CHURCH 5,000 MYERS MEMORIAL 501 (C) (3) 301 SOUTH NEW HOPE ROAD N/A GASTONIA NC 28054 COLUMBARIUM 10,000 Total b Approved for future payment N/A ▶ 3b Total

Part XV. | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year MYERS MEMORIAL N/A 501 (C) (3) 301 SOUTH NEW HOPE ROAD CHURCH - TOWER FUND GASTONIA NC 28054 NATIONAL WILD TURKEY N/A 501 (C) (3) PO BOX 530 EDGEFIELD SC 29824 CONSERVATION & HUNTING ORGANIZATION NC STATE STUDENT AID ASSOCIATION 5400 TRINITY ROAD N/A 501 (C) (3) RALEIGH NC 27607 UNIVERISTY STUDENT AID 5,000 NCSU FOUNDATION CAMPUS BOX 7474 N/A 501 (C) (3) UNIVERSITY ADVANCEMENT RALEIGH NC 27695-7474 19,000 **OUTREACH FARMS** PO BOX 644 N/A 501 (C) (3) PAWLEY'S ISLAND SC 29585 FEEDING THE HUNGRY PUBLIC BROADCASTING, ATLANTA 740 BISMARK RD NE 501 (C) (3) N/A ATLANTA GA 30324 RADIO STATION QUAIL FOREVER N/A 1783 BUERKLE CIRCLE 501 (C) (3) ST. PAUL MN 55110 QUAIL CONSERVATION ROSWELL UNITED METHODIST CHURCH 814 MIMOSA BOULEVARD N/A 501 (C) (3) ROSWELL GA 30075 CHURCH SALVATION ARMY 107 S. BROAD STREET N/A 501 (C) (3) GASTONIA NC 28052 FIGHTING POVERTY SALVATION ARMY 1424 NORTHEAST EXPRESSWAY NONE ATLANTA GA 30329 FEED & HOUSE POOR 3,000 ▶ 3a Total b Approved for future payment N/A 3b Total

Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year SALVATION ARMY OF GEORGETOWN 2401 ANTHUAN MAYBANK DR. N/A 501 (C) (3) FIGHTING POVERTY GEORGETOWN SC 29440 SCHIELE MUSEUM 1500 E. GARRISON BLVD N/A 501 (C) (3) **MUSEUM** 1,000 GASTONIA NC 28054 SHRINERS HOSPITAL FOR CHILDREN 2900 ROCKY POINT DRIVE N/A 501 (C) (3) **TAMPA FL 33607** HOSPITAL 3,000 SMITH MEDICAL CLINIC 116 BASKERVILL DR. N/A 501 (C) (3) MEDICAL CENTER PAWLEY'S ISLAND SC 29585 1,000 SPRINGMONT SCHOOL 5750 LONG ISLAND DRIVE NA 501 (C) (3) ATLANTA GA 30327 **EDUCATIONAL** 10,000 SPRINGMONT MONTESSORI SCHOOL 5750 LONG ISLAND DRIVE NW N/A 501 (C) (3) ATLANTA GA 30327 MONTESSORI SCHOOL ST. CHRISTOPHER'S CHILDREN 14323 OCEAN HWY, STE 4143 N/A 501 (C) (3) PAWLEY'S ISLAND SC 29585 CLOTHING & MEDICAL CARE FOR CHILDREN 1,000 ST. JUDES CHILDREN'S HOSPITAL N/A 501 (C) (3) 262 DANNY THOMAS PLACE MEMPHIS TN 38105 CHILDREN'S HOSPITAL 3,000 THAKO 1,000 THE CHRISTIAN MISSION PO BOX 62 N/A 501 (C) (3) MOORESVILLE NC 28115 FEEDING THE HUNGRY 1,500 Total b Approved for future payment N/A 3b Total

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year THE DRAKE HOUSE OF ROSWELL 10500 CLARA DRIVE N/A 501 (C) (3) ROSWELL GA 30075 HOMELESS SHELTER THE SHELTER OF GASTON 330 NORTH MARIETTA STREET N/A 501 (C) (3) GASTONIA NC 28052 HOUSING FOR BATTERED WOMEN 1,000 THE UNITED METHODIST CHILDREN'S 500 S. COLUMBIA DR. N/A 501 (C) (3) DECATUR GA 30030 CHILD TRAUMA RESTORATION THE V FOUNDATION 106 TOWERVIEW COURT N/A 501 (C) (3) **CARY NC 27513** CANCER RESEARCH 1,000 TOMORROW FOR HAITIAN KIDS 2509 LOWELL BETHESDA ROAD N/A 501 (C) (3) GASTONIA NC 28056 SUPPORT IMPOVERISHED CHILDREN **UMCOR** N/A 475 RIVERSIDE DRIVE 501 (C) (3) NEW YORK NY 10115 HUMAN SUFFERING 2,000 UNIVERSITY OF NORTH PO BOX 309 N/A 501 (C) (3) CHAPEL HILL NC 27514 UNIVERSITY MEDICAL HOSPITAL UNIVERSITY OF PITTSBURGH 128 NORTH CRAIG STREET N/A 501 (C) (3) PITTSBURGH PA 15260 UNIVERSITY 1,000 WE ARE ZOE 700 WATERFIELD RIDGE PLAC NONE GARNER NC 27529 CHILDREN IN POVERTY 1,000 WEST JOHNSON PARSONS FOUNDATION 1020 TALAHASSEE ROAD N/A 501 (C) (3) ALBANY GA 31721 STUDENT ENRICHMENT Total b Approved for future payment N/A Total ightharpoons3b

Part XV Supplementary Information (co	ontinued)			•
3 Grants and Contributions Paid During t	he Year or Approved for	Future Payment	1	<del></del>
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		_
a Paid during the year WOUNDED WARRIOR PROJECT 4899 BELFORT ROAD JACKSONVILLE FL 32256	n/a	501(C)(3) AID FOR WOUN	DED VETS	1,000
FELLOWSHIP OF CHRISTIAN ATH	I.ETES			
		501(C)(3) CHRISTIAN EV	ANGELISM	
UNITED OSTOMY ASSOCIATION PO BOX 525 KENNEBUNK ME 04043-0525	n/a	501 (C) (3)		1,500
	ia –			
		,		
Total			<b>▶</b> 3a	
b Approved for future payment			> sa	<del>_</del>
N/A				
Total			<b>▶</b> 3b	

Part XVI-A	Analysis of Income-Producing Act	tivities				
	ounts unless otherwise indicated	1	ed business income	Exclude	d by section 512, 513, or 514	
	,	(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	(e) Related or exempt function income
1 Program se	ervice revenue			code	_	(See instructions)
а	· · · · · · · · · · · · · · · · · · ·					
b	<del></del>					
d						
_						
f						
g Fees a	nd contracts from government agencies					
2 Membershi	p dues and assessments			<b>_</b>		
3 Interest on	savings and temporary cash investments			14	622	
4 Dividends a	and interest from securities	<u> </u>		14	51,542	
5 Net rental II	ncome or (loss) from real estate	·			-	
a Debt-fir	nanced property					
<b>b</b> Not det	ot-financed property		<u> </u>			
6 Net rental in	ncome or (loss) from personal property					
7 Other inves	tment income					
8 Gain or (los	s) from sales of assets other than inventory		<u> </u>	18	2,565	98,148
9 Net income	or (loss) from special events		· · · · · · · · · · · · · · · · · · ·			
	or (loss) from sales of inventory					
11 Other rever	nue <b>a</b>					
b						<u>.</u>
				ļ	<u>.</u>	
d						
e				$oxed{oxed}$		
	dd columns (b), (d), and (e)	£	<u> </u>	-	54,729	
	line 12, columns (b), (d), and (e)				<sup>13</sup>	152,87
	in line 13 instructions to verify calculations )					
Part XVI-B	l					
Line No.	Explain below how each activity for which income is					
N/A	accomplishment of the foundation's exempt purpos	ses (other than b	y providing tunds for s	uch purpe	oses) (See instructions	)
N/A						
<del></del>						
		*				
		****	<u> </u>			
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-						
		_				
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		-		<del></del>	<u>-</u>	<u>-</u>
			<del></del>			
				<del></del>		

Part X	(VIII	Information Regardance Organizations	arding Tra	insters To and	d Transaction	ns and Relationsh	nips With Nonc	haritable Exe	mpt	
1 Did	the ora		rectly engage	ın anv of the follow	wing with any oth	er organization describe	ed		Yes	No
	-	01(c) (other than section			-	<del>-</del>	-		_	_
	anızatıor		,		, , , , , , , , , , , , , , , , , , , ,	g F				
_		om the reporting founda	ation to a non	charitable exempt	organization of				*****	-
	Cash							1a(1)		X
(2) Other assets						1a(2)		X		
	er trans									
		f assets to a noncharita	ble exempt o	rganization				1b(1)		X
		ses of assets from a no		=	1			1b(2)		X
		of facilities, equipment,		, -	•			1b(3)		X
		rsement arrangements						1b(4)		X
		or loan guarantees						1b(5)		X
		nance of services or me	mberehin er f	fundraising solicita	tions			1b(5)		X
		acilities, equipment, ma	·-	-				1c		X
	-		-			(b) should always show	v the fair market			
						e foundation received le				
						e goods, other assets, o				
(a) Line		(b) Amount involved	1	e of nonchantable exem			of transfers, transactions, a	and sharing arrangemen	nts	
N/A		(B) / dilocité di torto	(c) (tall	o or riorid lamable exem	pr organization	(a) Doscipion	or transfers, transactions, t	The orienting arrangement		
		<del> </del> -	<del>                                     </del>	****						
		<del>                                     </del>	<del> </del>			<u></u>	<del></del>			
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		<u> </u>	<u> </u>	<del></del>			<del></del>		-	
		ation directly or indirect	•	·		empt organizations			137	١
		section 501(c) (other the		01(c)(3)) or in sec	tion 5277			∐ Ye	s X	No
b If "Y		nplete the following sch	edule T			· · <del>-</del> ····				
37/7		a) Name of organization		(b) Type of o	organization		(c) Description of relation	inship		
N/A	7		<del></del>							
			$\longrightarrow$							
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						ules and statements, and to the nich preparer has any knowled		and belief, it is true,		
				11				y the IRS discuss this re		
Sign		101	1//	4				h the preparer shown bel e instructions	Yes	No
Here	$\sim$		1		. 4	11/19				ئــــــــــــــــــــــــــــــــــــــ
	_	Munus	ingui		/	<u>''' '</u>	PRESIDENT	<u>'</u>		
	Signa	ature of officer or trustee			Date	, , , , , , , , , , , , , , , , , , ,	Title			
	Print/Ty	pe preparer's name			Preparer's signature	9		Date	Check	$\bigcap_{a}$
Paid						1			self-emp	oloyed
_	R. KI	EITH GUNTER					<u> </u>	04/09/19		_
Preparer	Firm's n				P00448					
Use Only	Firm's a									
	<u> </u>	CHARL	OTTE, 1	NC 28203	-4688		Phone no	704-52	<u>5-7</u> .	<u> 300</u>
		<del></del>						Form 99	0-PF	(2018

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STE1003\ Darrell and Patricia Steagall 56-2061059 FYE: 12/31/2018

Federal Statements

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Charitable Purpose		\$	
Adjusted Net	\$	\$	essional Fees
Net Investment	\$	\$	90-PF, Part I, Line 16c - Other Professional Fees
Total	\$ 1,350		Statement 2 - Form 990-PF, Part I,
Description	GBK   PEABODY PLLC	TOTAL	Stateme

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Charitable Purpose	\$	\$
Adjusted Net	S	\$
Net Investment	25,018	25,018
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Total	25,018	25,018
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Description	INVESTMENT MANAGEMENT FEES	TOTAL

## Statement 3 - Form 990-PF, Part I, Line 18 - Taxes

Charitable Purpose	v.	\$
Adjusted Net	٠¢٠	٠ \$
Net Investment	2,099 4,864 4,311	11,274
_	ဟ	·
Total	2,099 4,864 4,311	11,274
	ς	တ
Description	FOREIGN TAXES WITHHELD ON DIVIDE EXCISE TAX ESTIMATE EXCISE DUE WITH PY RETURN	TOTAL

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

Description	Beginning of Year	. End of Year	Basis of Valuation	Fair Market Value
SECURITIES	\$ 1,781,580	\$ 2,148,463	COST	\$ 2,184,676
TOTAL	\$ 1,781,580	\$ 2,148,463		\$ 2,184,676

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Federal Statements

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Statement 5 - Form 990-PF, Part III, Line 3 - Other Increases

Description	<u></u>	Amount
PY CHECKS CASH IN CY PPA	\$	5,750 372,615
TOTAL	\$	378,365

## Statement 6 - Form 990-PF, Part III, Line 5 - Other Decreases

Description		Amount
CY CHECKS UNCLEARED OTHER ADJUSTMENTS	\$	17,500 7,587
TOTAL	\$_	25,087

0 0 0 0 0 0 4/9/2019 4:58 PM Expenses 0 0 0 0 0 Statement 7 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc. Benefits 0 0 0 0 0 Compensation **Federal Statements** Average 00.0 0.00 0.00 0.00 00.0 0.00 Hours VICE PRESIDE VICE PRESIDE VICE PRESIDE VICE PRESIDE PRESIDENT SECRETARY STE1003 Darrell and Patricia Steagall GABRIEL J. STEAGALL 375 KNOLL WOODS TERRACE ROSWELL GA 30075 ROBIN G. STEAGALL 375 KNOLL WOODS TERRACE ROSWELL GA 30075 Name and Address PATRICIA C. STEAGALL 23 TRADEWIND COURT GEORGETOWN SC 29440 MOORSEVILLE NC 28115 MOORESVILLE NC 28115 23 TRADEWIND COURT GEORGETOWN SC 29440 DARRELL P. STEAGALL DARRELL C. STEAGALL HOLLY G. STEAGALL PO BOX 1257 FYE: 12/31/2018 PO BOX 1257 56-2061059

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Form 990-PF, Part XV, Line 1a - Managers Wh	o Contributed Over 2% or \$5,000
Name of Manager	Amount
NONE	\$
TOTAL	\$0
Form 990-PF, Part XV, Line 1b - Managers	Who Own 10% or More Stock
Name of Manager	Amount
NONE	\$
TOTAL	\$0
Statement 8 - Form 990-PF, Part XV, Line 2b - Appli	cation Format and Required Contents
Description	
REQUESTS FOR FUNDS SHOULD BE SUBMITTED IN WRITTINCLUDE A DESCRIPTION OF THE FOLLOWING: (1) ORGEQUESTING FUNDS, (2) WHAT THE FUNDS WILL BE US (3) WHO THE FUNDS WILL BENEFIT	SANIZATION
Form 990-PF, Part XV, Line 2c - Su	ıbmission Deadlines
Description	
N/A	
Form 990-PF, Part XV, Line 2d - Award F	Restrictions or Limitations
Description	
N/A	