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Form **990-PF** 

Department of the Treasury Internal Revenue Service

# EXTENDED TO NOVEMBER 15, 2019 Return of Private Foundation

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

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

FOI C	alendar year 2018 of tax year beginning		, and ending		
Nam	e of foundation			A Employer identification i	number
,BZ	ARBARA JUDY THOMAS MEMORIA	L FOUNDATION		57-6037541	
Numi	per and street (or P O box number if mail is not delivered to street ac	idress)	Room/suite	B Telephone number	
	21 HAWTHORNE VALE		_	803-767-134	18
	or town, state or province, country, and ZIP or foreign po IDGELAND, MS 39157	ostal code		C If exemption application is per	nding, check here
	neck all that apply: Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organizations,	check here
	Final return	Amended return	,		
	Address change	Name change		2. Foreign organizations mee check here and attach con	ting the 85% test, inputation
H C	neck type of organization: X Section 501(c)(3) exi	empt private foundation	ΛU	  E   If private foundation state	us was terminated
	Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation O	under section 507(b)(1)(	A), check here
I Fai	r market value of all assets at end of year   J   Accountin	ng method: X Cash	Accrual	F If the foundation is in a 6	60-month termination
(fro		her (specify)	<del></del>	under section 507(b)(1)(	B), check here
		nn (d) must be on cash bası	s)		
!Pa	Tt.I. Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received		<b>台灣。在今天,在一個</b>		<b>建工研究证明</b>
-	2 Check X if the foundation is not required to attach Sch. B	の間で本意の内容が与	MEXITAGE WAS	時間間的日本。在一個	<b>可是其中国共和党的工程</b>
	Interest on savings and temporary cash investments	<u> </u>			語る一個などでは、一個など
	4 Dividends and interest from securities $\Lambda$	4,986.	4,986.		STATEMENT." 1.
	5a Gross rents	· · · · · · · · · · · · · · · · · · ·			一方面 一方面
	Net rental income or (loss)	院 对为国际政治的			"一个"。"一个"。"一个"。"一个"。"一个"。"一个"。"一个"。"一个"。
e e	6a Net gain or (loss) from sale of assets not on line 10	<30,966.>	LE LEGISTE	NEUGINEL	EDG WAY STATE
ŭ	b Gross sales price for all assets on line 6a 14,963.	ALLE THE TANK			到21、12000年1月
Revenu	7 Capital gain net income (from Part IV, line 2)	Mary Charles	0.0	E-NOV-1-8-2019_	TO SERVED
	8 Net short-term capital gain	有天教、原理、原则	1970年高期		190 - W. T. W.
	9 Income modifications Gross sales less returns		是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	TO CONTRACTOR OF THE PERSON OF	· · · · · · · · · · · · · · · · · · ·
	10a and allowances	PARTIE SECTION	7		<b>国家的</b> 对于1944
	b Less Cost of goods sold	は、一年の一年の一日		· 经验证券包括 1994	
	c Gross profit or (loss)	- <u></u>	"LOW ALL RESIDENCE P	· · · · · · · · · · · · · · · · · · ·	に高いまでいたから
0	11 Other income 12 Total Add lines 1 through 11	<25,980.>	4,986.		高品は、大きな
<del>2</del>	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
63	14 Other employee salaries and wages				
6.	15 Pension plans, employee benefits				
	16a Legal fees				
l∇  Pense		2,151.	1,613.		538.
CX	c Other professional fees				
E L					
SCANNE Administrative	18 Taxes STMT 3	731.	731.		0.
A	19 Depreciation and depletion				万元记 争问 医法
S F	20 Occupancy				
and	22 Printing and publications	<u> </u>			
ng (	23 Other expenses				
rati	24 Total operating and administrative	0 000	2 244		
Operating and	expenses Add lines 13 through 23	2,882.	2,344.	Size I T May 1 . Make a Min of	538. 10,888.
J	25 Contributions, giras, grants paid	10,008.	目"在二三年"从此为政	1887. 28 12 15 15 15 15 15 15 15 15 15 15 15 15 15	10,000.
	26 Total expenses and disbursements	13,770.	2,344.		11,426.
	Add lines 24 and 25	13,//0.	2,344.	THE STATE OF THE STATE OF	47:17:27:27:27:27:27:27:27:27:27:27:27:27:27
	27 Subtract line 26 from line 12:	<39,750.>		The state of the s	1 Programme I Product to the Police
	Excess of revenue over expenses and disbursements     Net investment income (if negative, enter -0-)	EAL FRANCISCO	2,642.	letter have been all a secondaries	The Control of the Co
	C Adjusted net income (if negative, enter -0-)		THE ENTER'S	N/A	<b>"是一个大大工",</b>
	• Autuacou not income (il negative, enter -U-)	A DE TRANSPORT TO THE PERSON	IN THE PARTY OF A PARTY OF THE	., 41/44	The same of the sa

P:	ant;	Balance Sheets Atlached schedules and amounts in the description	Beginning of year	End 0	<del></del>
51 X1	Alter	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
П	1	Cash - non-interest-bearing	19,135.	10,060.	_ 10,060.
寸		Savings and temporary cash investments			
		Accounts receivable		<b>开心力会还有些自己的</b>	
- 1	3		Salar Salar Salar Manual Manual Salar Sala	EST THE WAY AS A STATE OF THE PARTY OF THE P	ALL DEFENDENCE STREET STREET STREET STREET
		Less: allowance for doubtful accounts	COMMUNICATION DESCRIPTION OF THE PROPERTY OF		Commence of the Commence of th
ļ	4	Pledges receivable ►	是是 一种		
l		Less: allowance for doubtful accounts	<u> </u>		
- 1	5	Grants receivable			
- 1	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
l	7	Other notes and loans receivable	<b>新教育的企业的企业的企业</b>	2000年1200年1200日	
ĺ	′		Service - constant and a service -	the section of the se	MARKED ECTATE TO LANCE WAS SEED AT DESCRIPTION OF
l	_	Less: allowance for doubtful accounts			-
ţ	_	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
۲	10a	Investments - U.S. and state government obligations		<u> </u>	
	b	Investments - corporate stock STMT 4	137,106.	106,431.	191,916.
		Investments - corporate bonds			
ı		Investments - land, buildings, and equipment basis	<b>建筑的过去式和一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个</b>	THE RESERVE OF THE PERSON OF T	<b>西班牙斯斯斯</b> (1000)
1	• •		AND AND AND PROPERTY STATE OF THE STATE OF T	新から 特別をなった。 「「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな。 「大きな」は 「大きな」は 「大きな」は 「大きな」は 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「大きな 「たな 「たな 「たな 「たな 「たな 「たな 「たな 「た	APPERATE ALICE STATES AND RESPONDENT OF CONTRACTOR CONT
	40	Less accumulated depreciation	<del> </del>		
		Investments - mortgage loans	<del></del>		
	13	Investments - other	CONTRACTOR OF THE STATE OF THE	AND THE PROPERTY OF THE PROPER	Services appropriate to the services and the services of the services and the services are the services and the services are
	14	Land, buildings, and equipment, basis		· · · · · · · · · · · · · · · · · · ·	<b>建型工程工程工程工程工程工程工程工程工程工程工程工程工程工程工程工程工程工程工程</b>
		Less accumulated depreciation			
	15	Other assets (describe			
		Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item ()	156,241.	116,491.	201,976.
$\dashv$	17	Accounts payable and accrued expenses			
				<del></del>	
	18	Grants payable			
es	19	Deferred revenue		<del> </del>	THE PARTY OF THE PROPERTY OF THE PARTY OF TH
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ab	21	Mortgages and other notes payable			<b>企业的企业</b>
_	22	Other liabilities (describe >)		<u> </u>	
	23	_Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31			
es	7.4	•		1	
5	24	Unrestricted			
lar	25	Temporarily restricted	<del></del>	<del></del>	
ä	26	Permanently restricted			
2		Foundations that do not follow SFAS 117, check here	Ì	ì	
Ţ		and complete lines 27 through 31			
ğ	27	Capital stock, trust principal, or current funds	0.	0.	
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Assets or Fund Balanc	29	Retained earnings, accumulated income, endowment, or other funds	156,241.	116,491.	
Net /	30	Total net assets or fund balances	156,241.	116,491.	
Ž	30	Total liet assets of fully paralices	130/241.	110,151.	CONTRACTOR OF STREET
1			156 241	116 401	
	31	Total liabilities and net assets/fund balances	156,241.	116,491.	<b>为4年的成功之前是10年10年10</b> 年
P	ant	Analysis of Changes in Net Assets or Fund B	alances		
_					<del>,</del>
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	e 30		
	(mu	st agree with end-of-year figure reported on prior year's return)		1	156,241.
		r amount from Part I, line 27a	•	2	<39,750.>
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	116,491.
		eases not included in line 2 (itemize)			0.
			roluma (h) line 20		116,491.
6	ıota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30		
				•	Form <b>990-PF</b> (2018)

Part IV Capital Gains a	and Losses for Tax on li	nvestment	income					· · <del></del>
(a) List and describe	the kind(s) of property sold (for exrehouse; or common stock, 200 sh		e,	(b) Ho P - F D - I	w acquired Purchase Donation	(c) Date a (mo., da	icquired iy, yr )	(d) Date sold (mo., day, yr.)
1a 3 SHS GENERAL B	ELECTRIC			<u> </u>	P	01/09	9/04	01/26/18
b 442 SHS GENERAL	<del></del>				P	01/09	9/04	01/26/18
						VARIO	DUS	01/26/18
d								
е								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				in or (loss (f) minus	
a 48.				8.				<50.>
ь 7,067.			14,43					<7,364.>
c 7,848.			31,40	0.				<23,552.>
d								
_e								
Complete only for assets showin	g gain in column (h) and owned by	the foundation	on 12/31/69.		_	(I) Gains (C	ol. (h) gair	n minus
(i) FMV as of 12/31/69	(j) Adjusted basis		cess of col (i)		С	òl. (k), but n Losses (	ot less tha (from col.	
(1) 1 101 0 0 0 1 12 0 17 0 0	as of 12/31/69	over	col. (j), if any					· · · ·
<u>a</u>	. <u> </u>		<del></del>					<50.>
b			<u> </u>					<7,364.>
<u>c</u>			<del>-</del>					<23,552.>
<u>d</u>								
<u>e</u>								
2 Capital gain net income or (net ca		er in Part I, line -0- in Part I, line	7 7	}	2			<30,966.>
3 Net short-term capital gain or (los	•			Í				
If gain, also enter in Part I, line 8,		and (o).		)				
If (loss), enter -0- in Part I, line 8					3		N/A	
Part V Qualification U	nder Section 4940(e) fo	r Reduced	Tax on Net	Inves	tment in	ome		
(For optional use by domestic private	foundations subject to the section	4940(a) tax on	net investment inc	come.)				
If section 4940(d)(2) applies, leave th	nis part blank.							
		_						
Was the foundation liable for the sect			,	log <sub>2</sub>				Yes X No
If "Yes," the foundation doesn't qualif  Enter the appropriate amount in a				ntrine		<del></del>	·	<del></del>
		IIISTI UCTIONS DEI	ore making any er			<del></del>		(d)
(a) Base period years Calendar year (or tay year beginning)	(b) ng in)   Adjusted qualifying d	istributions	Net value of no	(c) oncharita	able-use asse	is .	Distri	(d) button ratio
Calendar year (of tax year beginnii 2017	ig iii)   Alajaataa qaaliiyilig a	7,273.			232,47		(coi. (b) ai	vided by col. (c)) • 0 3 1 2 8 6
2016		6,905.			$\frac{252,47}{159,26}$		<del></del>	.043356
2015		7,132.	<del></del>		139,2 <u>0</u> 139,07			.051284
2014	<del></del>	6,716.	<del></del>		$\frac{135,07}{145,09}$		<del></del> _	.046286
2013	<del></del>	5,265.	<del></del>		123,03			.042709
2013	<del></del>	3,203.			123,21	<del>-                                    </del>		.042703
2 Total of line 1, column (d)						2		.214921
3 Average distribution ratio for the	5-year base period - divide the tota	I on line 2 by 5 (	) or by the numb	or of vo	are			• 214741
the foundation has been in exister		ii on line 2 by 5.0	o, or by the number	er or yea	113	3		.042984
the foundation has been in exister	ice ii iess tilaii 3 years					"		.042304
4 Enter the net value of noncharitab	Nature access for 2018 from Part V	' kaa E						232,038.
4 Litter the fiet value of florichantab	ile-use assets for 20 to from Part A	, iiie o				4	<del></del>	232,030.
F. Multiply hop 4 by line 2						[		9,974.
5 Multiply line 4 by line 3						5		3,314.
6 Enter 19/, of not investment incom	10 (19/ of Part I line 27h)							26.
6 Enter 1% of net investment incom	ie (176 01 Part I, illie 270)					6		20.
7 Add lines 5 and 6						,		10 000
AUU IIIIES 3 AIIU D						7		10,000.
8 Enter qualifying distributions from	n Part XII, line 4					8		11,426.
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, check the box in Part VI, lii	ne 1b, and comp	lete that part usin	ıg a 1%	tax rate.			

3

	990-PF (2018) BARBARA JUDY THOMAS MEMORIAL FOUNDATION 57-6037	
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.	istractions)
14	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	
, р	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	26.
	of Part I, line 27b	
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).	NO ENGINEER OF THE STATE OF THE
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	0.
_	Add lines 1 and 2	26.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	26.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	20.
	Credits/Payments: 2018 estimated tax payments and 2017 overpayment credited to 2018  6a  0.	
	Exempt foreign organizations - tax withheld at source  6b  0.	
	Tax paid with application for extension of time to file (Form 8868)  6c  6c	
	Backup withholding erroneously withheld 6d 0.	
	Total credits and payments. Add lines 6a through 6d	0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8	0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 5   9	26.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	
11	Enter the amount of line 10 to be: Credited to 2019 estimated tax	
	TIVILA Statements Regarding Activities	Yes No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	37
_	any political campaign?  Put it second more than \$100 during the year (other directly or radicactly) for callitical purposes? See the restrictions for the definition	<del></del>
U	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	1b X
	distributed by the foundation in connection with the activities.	
c	Did the foundation file Form 1120-POL for this year?	1c X
	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 .	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	
	managers. ► \$0.	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 X
	If "Yes," attach a detailed description of the activities.	
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 X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
	If "Yes," has it filed a tax return on Form 990-T for this year?  N/A	4b X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.	
Ü	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 X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7 X
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.	
	SC	
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 General Instruction G? If "No," attach explanation	8b X
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	<b>亚洲</b> 阿拉克 沙斯拉
	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV	9 X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10 X

Form 990-PF (2018

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Form 990-PF (2018) BARBARA JUDY THOMAS MEMORIAL FOUNDATION

[Part VII-A | Statements Regarding Activities (continued)

	·		Yes	No
44	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	<b> </b>	100	-110
11	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		х
40	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			<del></del>
12	If "Yes," attach statement. See instructions	12		х
12	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	<del></del>
10	Website address > N/A			
1.4	The books are in care of ► DAVID M. THOMAS  Telephone no. ► 803-76	7-1	348	
17	Located at ► 121 HAWTHORNE VALE, RIDGELAND, MS ZIP+4 ► 39			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		<b></b>	$\overline{\Box}$
10	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
,,,	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			, ,
Pa	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	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):	,		,
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	' !	1	, , 3
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1 - 2 - 2 - 1	,	÷
	a disqualified person? Yes X No	. 170	4,1	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		7 m	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	₩. :		٠ , -
	(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)?		•	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	1	. '	, ,
	if the foundation agreed to make a grant to or to employ the official for a period after	,	<b>)</b> .	1
	termination of government service, if terminating within 90 days.)	ļ	-	·
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	<u> </u>		_ ``
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	l .		'
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		<u> </u>	1
	before the first day of the tax year beginning in 2018?	1c		X
2		ľ		
_	defined in section 4942(j)(3) or 4942(j)(5)):		ľ	
8	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?  Yes X No		* -	,
	M MV W L - 4 Above N			,
	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect	,		1
٠	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	]		
	statement - see instructions )  N/A	2b		
	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		<del></del>	7
		' '	ķ.	
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		, `	٠ ؞
	during the year?			ļ., i
t	of "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after		· - ~	<u>.</u>
	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 foundation had excess business holdings in 2018.)  N/A	3b	<u>Г</u>	
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	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 2018?	4b		X
	F0	rm <b>99</b> 0	O-PF	(2018)

Total number of other employees paid over \$50,000

Form 990-PF (2018) BARBARA JUDY THOMAS MEMORIAL FOUNDAY	rion <u>5</u> 7-	6037541 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NON		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		<del> </del>
		Ì
Total cumber of others consume and CEO 000 for exploration		▶ 0
Total number of others receiving over \$50,000 for professional services Pait和来名。Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inf	formation such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced, e	tc.	Expenses
1 N/A		
	· · · · · · · · · · · · · · · · · · ·	1
2		
3		1
	<del></del>	_
4		1
		1
Part X:B Summary of Program-Related Investments	<del></del>	<u> </u>
Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2.	Amount
1 N/A		<del></del>
<u> </u>		1
		1
2		
		]
······································		
All other program-related investments. See instructions.		
3		4
		4
		4
		1
		1
Total. Add lines 1 through 3		0.
and the second s		

Form 990-PF (2018)

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	idations, se	e instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<del></del>
à	Average monthly fair market value of securities	1a	216.174.
	Average of monthly cash balances	1b	216,174. 19,398.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	235,572.
	D. Laborat L. and E. Martiner, a rather to be accorded to be and	DE STO	
-	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	235,572.
-	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,534.
4		5	232,038.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	6	11,602.
6 (E)	Minimum investment return. Enter 5% of line 5  Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations are		11,002.
想度	foreign organizations, check here $\blacktriangleright$ and do not complete this part.)	io certain	
1	Minimum investment return from Part X, line 6	1	11,602.
2a	Tax on investment income for 2018 from Part VI, line 5	<b>TEN</b>	
b	Income tax for 2018 (This does not include the tax from Part VI )		
c	Add lines 2a and 2b	2c	26.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	11,576.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	11,576.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	11,576.
	art-XIII Qualifying Distributions (see instructions)	<del></del>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	超鐵	
·a		1a	11,426.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	<b>经</b>	
a		3a	
		3b	······································
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	11,426.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
-	income. Enter 1% of Part I, line 27b	5	26.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	11,400.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of		
	4940(e) reduction of tax in those years.	154111100 101 1	5500011

Form **990-PF** (2018)

Part.XIII Undistributed Income (see instructions)

	(a)	(b) Years prior to 2017	(c) 2017	( <b>d)</b> 2018
`	Corpus	rears prior to 2017	2017	2010
1 Distributable amount for 2018 from Part XI, line 7				11,576.
2 Undistributed income, if any, as of the end of 2018	-			
a Enter amount for 2017 only	١	t	10,888.	
b Total for prior years:			, ,	-
g total for prior years.	,	0.	,	
3 Excess distributions carryover, if any, to 2018.				1
a From 2013				
b From 2014	-	-		<b>1</b>
	,	•		-
c From 2015		,		
d From 2016	÷	•	,	
e From 2017	0.			
f Total of lines 3a through e				
4 Qualifying distributions for 2018 from	• • • • • • • • • • • • • • • • • • • •			. , .
Part XII, line 4: ► \$ 11,426.		` <b>.</b>	10,888.	
a Applied to 2017, but not more than line 2a	27 14 14		10,000:	
<b>b</b> Applied to undistributed income of prior		0.	,	, -
years (Election required - see instructions)	· · ·		-, -	
c Treated as distributions out of corpus	•	,		
(Election required - see instructions)	0.			538.
d Applied to 2018 distributable amount		7		230.
e Remaining amount distributed out of corpus	0.	· · · · · · · · · · · · · · · · · · ·	<u> </u>	0.
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount	0.		<u> </u>	0.
must be shown in column (a))  6 Enter the net total of each column as indicated below;				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract	,		·	
line 4b from line 2b		0.	*	
c Enter the amount of prior years'				, -
undistributed income for which a notice of				* 1 sy*
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.		A 11
e Undistributed income for 2017. Subtract line	;			
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract		F . ",	1	
lines 4d and 5 from line 1. This amount must			· ·	
be distributed in 2019	. '	-		11,038.
7 Amounts treated as distributions out of				,
corpus to satisfy requirements imposed by		, .		
section 170(b)(1)(F) or 4942(g)(3) (Election			ı	
may be required - see instructions)	0.		'	
8 Excess distributions carryover from 2013		-	<del>†</del>	
	0.	<u>l</u> . '		
not applied on line 5 or line 7				
9 Excess distributions carryover to 2019	0.		· ·	
Subtract lines 7 and 8 from line 6a	<del></del>	<del></del>		<u> </u>
10 Analysis of line 9:	,	-	•	•   ' - '
a Excess from 2014	ֈ		,	-
b Excess from 2015	-	a		1
c Excess from 2016	-  <sub>-</sub>			1
d Excess from 2017	<b>-</b> - '			•
e Excess from 2018	<u> </u>	<u> </u>	<u> </u>	5

Form 990-PF (2018) BARBARA	JUDY THOM	AS MEMORIAL	FOUNDATION_	<u>57</u> -60:	37541 Page 1
Part XIV Private Operating F				N/A	
1 a If the foundation has received a ruling	or determination letter tha	at it is a private operating			
foundation, and the ruling is effective fo	or 2018, enter the date of	the ruling	▶		
b Check box to indicate whether the foun	dation is a private operat	ing foundation described		4942(j)(3) or 49	42(J)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for					
each year listed			ļ.,	/	<del></del>
b 85% of line 2a		<del> </del>	<del></del>		
<ul> <li>Qualifying distributions from Part XII,</li> </ul>			/	1	ı
line 4 for each year listed					
d Amounts included in line 2c not					•
used directly for active conduct of					
exempt activities					<del></del>
e Qualifying distributions made directly		/			1
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the			<del> </del>	<del></del>	· · · · · · · · · · · · · · · · · · ·
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets		1	<del></del>		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter			<del></del>	<del></del>	·· <del>·</del>
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:			<del></del>	<del></del>	
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or oyalties)					
(2) Support from general public					
and 5 of more exempt					
organizations as provided in seetion 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization			<u> </u>		
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	had \$5,000 or mor	e in assets
at any time during	the year-see inst	ructions.)		<del></del>	
<ol> <li>Information Regarding Foundati</li> </ol>	on Managers:				
a List any managers of the foundation w			tributions received by the	e foundation before the clos	e of any tax
year (but only if they have contributed	more than \$5,000) (See	section 507(a)(2).)			
NONE					
b List any managers of the foundation w other entity) of which the foundation h			(or an equally large port	ion of the ownership of a pa	rtnership or
	as a 1070 of greater filter	¢31.			
NONE				<del></del>	
2 Information Regarding Contribu		•	_		
Check here $\triangleright X$ if the foundation the foundation makes gifts, grants, etc					ests for funds. If
				·	
a The name, address, and telephone num	iber or email address of	the person to whom appli	cations should be address	ssed.	
h. The form in which applications should	he submitted and inform	ation and materials their	should include:	<del></del>	
b The form in which applications should	ne annumitien sun milotui	auon anu materiais tiley s	anoule include.		
c Any submission deadlines:		· · · · · · · · · · · · · · · · · · ·		<del></del> .	
o rais submission duadines.					
d Any restrictions or limitations on awar	ds, such as by geographi	cal areas, charitable fields	s, kinds of institutions. or	other factors	

BARBARA JUDY THOMAS MEMORIAL FOUNDATION

If recipient is an individual,

show any relationship to

any foundation manager

or substantial contributor

Foundation status of

recipient

Form 990-PF (2018)

a Paid during the year

Part:XV Supplementary Information (continued)

Recipient

Name and address (home or business)

Grants and Contributions Paid During the Year or Approved for Future Payment

Part:XVI:A: Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		uded by section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
c			<u> </u>		
d			J		
e			ļ		
f			ļ		
g Fees and contracts from government agencies				L	
2 Membership dues and assessments			<b>-</b>		
3 Interest on savings and temporary cash			-		
investments			<del>                                     </del>		
4 Dividends and interest from securities			14	4,986.	and and the state of the state
5 Net rental income or (loss) from real estate:	STATE OF THE PARTY	がは国土自立には		C. C	
a Debt-financed property	-				
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income	<u></u> _				
8 Gain or (loss) from sales of assets other					
than inventory	<u> </u>		18	<30,966.>	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			-		
11 Other revenue:	ļ				
a					
b			_		
C			+-	<del>                                     </del>	<del> </del>
d	<del></del>		╅	<del>                                     </del>	<del></del>
e			20020	25 980 >	0
e		0	· 账级	<del></del>	
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0	· 34%	<25,980.>	
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation	ns.)			13_	
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation	ns.)			13_	
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Part XVI B: Relationship of Activities	ns.)	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activities	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation  Part XVIB:  Relationship of Activitie  Line No. Explain below how each activity for which	es to the Acco	omplishment of E	xemp	13_ t Purposes	<25,980.>

#### Form 990-PF (2018) Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations**

(2) Other assets b Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization								
	column	(d) the value of the goods, of	other assets, or servi	ces received.				
(a)L	ine no	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Description	of transfers, transactions, a	and sharing arrangements
		·······		N/A		1		
_				,		1		
	<del></del>							
		······································		<del></del>			<u> </u>	
						<del></del>	··	<del></del>
			· · · · · · · · · · · · · · · · · · ·		·····	<del></del>	<del></del>	<del></del>
		<del></del>	<del></del>			<del>- </del>		<del></del>
						<u> </u>	<del></del>	- <del></del>
		· · · · · · · · · · · · · · · · · · ·						
						<u> </u>		
				_				
_						<del></del>		
2.	Is the fo	nundation directly or indirect	thy affiliated with or r	olated to one	or more tax-exempt organi	zatione decoribed		<del></del>
24		on 501(c) (other than section	· ·	•	of more tax-exempt organic	zations described		Yes X No
_				JUN 327 :				163 [45] 140
	ii res,	complete the following school			(h) Type of organization	<u> </u>	(a) Description of relati	onchin
		(a) Name of org	janization		(b) Type of organization		(c) Description of relati	Oriship
		N/A					<u> </u>	
					ļ		<del></del>	<del></del>
			<del></del>					
	gn and ere [		Declaration of pres	parer (other than	accompanying schedules and str taxpayer) is based on all informat ////3//9		as any knowledge	May the IRS discuss this return with the preparer shown below? See instr  X Yes No
		Print/Type preparer's na	ame	Preparer's s	igna <b>y</b> ure	Date	Check If PT	IN
		7, 1, 2, 2, 2, 3, 1, 1			ĭ f	.	self- employed	
Pa	aid	MARY JO CO	t.E	M14 /	. /,	10/29/19		200147686
	epare				<i>V</i>	10/29/11	Firm's EIN ► 58 -	
	se Only	Transcription	LAKS & CO.	LE, LL	C		HILM.S FIN > 28-	-4474/33
U:	SE OIII		0 1/======				<del> </del>	
		Firm's address ► 60						
		WE	ST COLUMB	IA, SC	29169-7590	<del></del>	Phone no. 803-	<del>-765-0083</del>
						<del></del>		Form 990-PF (2018)

### Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Name of the organization

Employer identification number

	BARBARA JUDY THOMAS MEMORIAL FOUNDATION	57-6037541						
Organization type (chec	k one)							
Filers of:	Section:							
Form 990 or 990-EZ	501(c)( ) (enter number) organization	501(c)( ) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
· -	on is covered by the <b>General Rule</b> or a <b>Special Rule.</b> I (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R	lule See instructions						
General Rule								
-	tion filing Form 990, 990·EZ, or 990·PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributo							
Special Rules								
sections 509(a) any one contrib	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% suppor (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a outor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amo EZ, line 1 Complete Parts I and II	a, or 16b, and that received from						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III								
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, chantable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.								
=	n that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule Be on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its							

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

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

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

Employer identification number

## BARBARA JUDY THOMAS MEMORIAL FOUNDATION

57-6037541

Partus	Contributors (see instructions) Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DAVID AND MONICA THOMAS  121 HAWTHORNE VALE  RIDGELAND, MS 39157	\$	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<del></del> !		\$	Person Payroll Oncash Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )

Name of organization

Employer identification number

#### BARBARA JUDY THOMAS MEMORIAL FOUNDATION

57-6037541

Partur	(b) Description of noncash property given  (c) FMV (or estimate) (See instructions)  Date received  (d) Date received  (c) FMV (or estimate) (See instructions)  (d) Date received  FMV (or estimate) (See instructions)  (d) Date received  (d) Date received  (e) FMV (or estimate) (See instructions)		
(a) No. from Part I		FMV (or estimate)	
		\$	
(a) No. from Part I		FMV (or estimate)	
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Employer identification number

RARRAR	A JUDY THOMAS MEMORIAL	FOUNDATTON	57-6037541				
Partylli	Exclusively religious, charitable, etc., contribution	ons to organizations described in sec through (e) and the following line entre- charitable, etc., contributions of \$1,000 or le	tion 501(c)(7), (8), or (10) that total more than \$1,000 for the year				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-		(e) Transfer of gift					
	Transferee's name, address, ar	d ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gift					
	Transferee's name, address, ar		Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				

FORM 990-PF DIVIDE	NDS AND INTER	EST FROM SECUR	ITIES ST	PATEMENT 1
GROSS SOURCE AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
CHARLES SCHWAB DIV 4,98	86.	0. 4,986.	4,986.	
TO PART I, LINE 4 4,98	86.	0. 4,986.	4,986.	
FORM 990-PF	ACCOUNTI	NG FEES	S	FATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	2,151.	1,613.		538.
TO FORM 990-PF, PG 1, LN 161	2,151.	1,613.		538.
FORM 990-PF	TAX	ES	S	ratement 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
2017 EXCISE TAX FOREIGN TAXES PAID	699. 32.			0.
TO FORM 990-PF, PG 1, LN 18	731.	731.		0.

FORM 990-PF COF	PORATE STOCK	STATEMENT 4
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
DESCRIPTION  CHARLES SCHWAB  TOTAL TO FORM 990-PF, PART II, LINE 10B	106,431.	191,916.
TOTAL TO FORM 990-PF, PART II, LINE	106,431.	191,916.

## BARBARA JUDY THOMAS MEMORIAL FOUNDATION

FORM 990-PF	INTEREST	AND	PENALTIES		STAT	EMENT	5
•							
TAX DUE FROM FORM 990-PF LATE PAYMENT PENALTY	, PART VI						26. 1.
TOTAL AMOUNT DUE							27.
FORM 990-PF LATE		PAYM	ENT PENALTY		STAT	EMENT	6
DESCRIPTION	DATE		AMOUNT	BALANCE	MONTHS	PENA	ĽΤΥ
TAX DUE DATE FILED	05/15/1 11/15/1		26.	26. 26.	6		1.
TOTAL LATE PAYMENT PENALT	Y						1.