SCANNED DEC 3 1

EXTENDED TO NOVEMBER 15, 2019
Return of Private Foundation

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

Form. 990-PF

▶ 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. For calendar year 2018 or tax year beginning A Employer identification number Name of foundation THE MADDREY FOUNDATION 57-6125748 Number and street (or P O box number if mail is not delivered to street address) B Telephone number 864-232-8301 201 CRESCENT AVENUE City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here GREENVILLE, SC 29605 Initial return of a former public charity D 1. Foreign organizations, check here G Check all that apply: Initial return Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method X Cash F If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col. (c), line 16) 2, 145, 869. (Part I, column (d) must be on cash basis.) Analysis of Revenue and Expenses Part I (d) Disbursements (a) Revenue and (c) Adjusted net (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books ıncome , th. . . . 15,650 Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 36,431 36,431 STATEMENT 49,223 51,994 STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) JEIVEL 72,801 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 1,143,914. 72,801 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications OGDEN 10a and allowances ~ U b Less Cost of goods sold ي ۾ c Gross profit or (loss) 3,781 6,955 STATEMENT 11 Other income 180,657. 165,410 0. Total Add lines 1 through 11 0. Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 5,650. 2,825. Ō. 2,825. STMT 4 **b** Accounting fees 0. 22,138 22,138. 0. 5 STMT c Other professional fees 17 Interest 1,312 1,312. 0. STMT 6 18 Taxes Depreciation and depletion 19 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative 26,275 0. 2,825. 29,100 expenses. Add lines 13 through 23 181,800. 181,800. 25 Contributions, gifts, grants paid Total expenses and disbursements. 210,900 26,275 0. 184,625 Add lines 24 and 25 Subtract line 26 from line 12.

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions.

2 Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

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

0.

-30,243.

139,135

For	m 99	0-PF (2018) THE MADDREY FOUNDATION		5 / <u>-</u>	6125/48 Page 2
Į.	arti	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year (a) Book Value	End o (b) Book Value	of year (c) Fair Market Value
_	1	Cash - non-interest-bearing		· · · · · · · · · · · · · · · · · · ·	,
	2	Savings and temporary cash investments	63,556.	64,675.	64,675.
		Accounts receivable	ANTENNA DEGLESSA DE LA CONTRACTORIO	APRICE OF SUSPENSE	38/25/2014/2016/2/2016/-7/2016/2/
	"	•		285_25_00_0_0000000000000000000000000000	
		Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts		,	
	5	Grants receivable	,		<u> </u>
	6	Receivables due from officers, directors, trustees, and other			[
		disqualified persons			
	7	Other notes and loans receivable			
	'	Less: allowance for doubtful accounts		and the said of the Best Section of the said of the sa	The state of the s
	١.				
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 7	1,500,240.	1,487,075. 547,152.	1,555,038.
	C	Investments - corporate bonds STMT 8 ·	568,390.	547,152.	526,156.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation	,	,	
	12	Investments - mortgage loans		•	,
		Investments - other			,
	13			. 11: 55.2220000000000.022200	C-5/56P4.888.8951 100853 20858
	14	Land, buildings, and equipment basis			
	ĺ	Less accumulated depreciation			,
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the		· ·	i .
		instructions. Also, see page 1, item I)	2,132,186.	2,098,902.	2,145,869.
	17	Accounts payable and accrued expenses			
	18	Grants payable .		r	
	19	Deferred revenue			4.1 发生型的发生的 多数
Liabilities	20		•		
Ĕ	l	Loans from officers, directors, trustees, and other disqualified persons	· · · · · · · · · · · · · · · · · · ·		
į	21	Mortgages and other notes payable	· ·		ASSESSMENT OF THE PROPERTY OF
_	22	Other liabilities (describe			A. C. S. C. S. D. S.
	23	Total liabilities (add lines 17 through 22)	0.	·0.	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31			
es	24	Unrestricted ' -		٠	
2	1	Temporarily restricted		ı	BOTH STREET OF A STREET
Net Assets or Fund Bala	26	Permanently restricted-			ANTONIA MARKATERINI
8	20	•			
5		•			
F	,	and complete lines 27 through 31.	1 (16 746	1 (1 (74 (
S	27	Capital stock, trust principal, or current funds	1,616,746.	1,616,746.	CALL - DESCRIPTION OF PARTY OF THE PARTY OF
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund .	0.	0.	は、高いいのは、
As	29	Retained earnings, accumulated income, endowment, or other funds	515,440.	482,156.	自己的证据的证据的证据的
let	30	Total net assets or fund balances	2,132,186.	2,098,902.	
_					
	31	Total liabilities and net assets/fund balances	2,132,186.	2,098,902.	
<u></u>			,		,
Į.P	art	Analysis of Changes in Net Assets or Fund B	aiances		
_	Total	net assets or fund balances at beginning of year Part II, column (a), line	30	· ·	
•			JU		2 132 106
		st agree with end-of-year figure reported on prior year's return)		1	2,132,186.
		amount from Part I, line 27a		2	-30,243.
3	Othe	r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3	1	. 4	2,101,943.
5	Decr	eases not included in line 2 (itemize) FUND BALANCE A	DJ - NO TAX EI	FFECT 5	3,041.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	_	6	2,098,902.
					Form 990-PF (2018)

		EY FOUNDATI		Income	CEI	E 7.	rtach:	_	7-612 FATEMI		Page 3
(a) List and describe	the kınd(s) of	property sold (for exam	ple, real estat				quired nase	(c) Date (mo , d	acquired	(d) Date (mo., day	
	rehouse; or c	ommon stock, 200 shs.	MLC Co.)		D	- Dona	tion	(1110 , u	ay, yr.)	(1110., 04)	, yi)
<u>1a</u>			<u> </u>		-						
<u>b</u>											
d											
e											
(e) Gross sales price		reciation allowed r allowable)		t or other basis xpense of sale					ain or (loss s (f) minus i		
<u>a</u>					-						
<u>b</u>					\dashv						
c d		·			1						
e 1,143,914.	····			1,071,11	3.					72,	801.
Complete only for assets showin	g gaın ın colu	mn (h) and owned by th		<u> </u>			(1)	Gains (C	ol. (h) gain	minus	
(i) FMV as of 12/31/69		djusted basis of 12/31/69		cess of col. (ı) col (j), ıf any			col.	(k), but r Losses	ot less that (from col. (n -0-) or h))	
<u>a</u>		-			_						
<u>b</u>					\dashv						
c d		·			\dashv						
e										72,	801.
		∫ If gain, also enter	ın Part I line	7	7					<u> </u>	
2 Capital gain net income or (net ca	•	f (loss), enter -0-	ın Part I, line)	2				72,	801.
3 Not short-torm capital gain or (los If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8		in sections 1222(5) and	i (6):		}	3			N/A		
Part V Qualification U	nder Sec	tion 4940(e) for I	Reduced	Tax on Net	Inve	stm	ent Inco	me			
(For optional use by domestic private	foundations	subject to the section 49	940(a) tax on	net investment in	como.	.)					
If section 4940(d)(2) applies, leave th	us part blank.										
											X No
Was the foundation liable for the sect If "Yes," the foundation doesn't qualif				•	1007					Yes [<u>A</u> 140
1 Enter the appropriate amount in a					ntries.						
(a) Base period years		(b)			(c)				Distrib	(d) oution ratio	
Base period years Calendar year (or tax year beginnii	ng In)	Adjusted qualifying disti	ributions	Net value of no			use assets		(col. (b) div	rided by col. ((c))
2017			3,225.				3,237				8763
2016			962.				5,143				1837
			7,192.				5,003				4949
2014			0,879.				$\frac{7,444}{0.257}$				6142
2013		13.	3,050.			,50	9,257	+		.05	3024
2 Total of line 1, column (d)								2		.34	4715
3 Average distribution ratio for the state the foundation has been in existent			n line 2 by 5 (), or by the numb	er of y	ears/		3		.06	8943
4 Enter the net value of noncharitab	le-use assets	for 2018 from Part X, li	ne 5					4		2,447,	341.
5 Multiply line 4 by line 3								. 5		168,	727.
6 Enter 1% of net investment incom	ne (1% of Par	t I, line 27b)						6		1,	391.
7 Add lines 5 and 6	•	•						7			118.
	a Dart VII 1 to	a 4						8			625.
8 Enter qualifying distributions from If line 8 is equal to or greater than See the Part VI instructions.			1b, and comp	lete that part usir	ng a 1	% tax r	ate.	<u> </u>	L	104,	<u> </u>
823521 12-11-18			-			-				Form 990-F	PF (2018)



Form 990-PF (2018) THE MADDREY FOUNDATION		57-61	25748 Page 4
Part VI Excise Tax Based on Investment Income (Section 494	0(a), 4940(b), 4940(e), or 4	948 - see	e instructions)
1a Exempt operating foundations described in section 4940(d)(2), check here and	enter "N/A" on line 1.	13.48 TO	
Date of ruling or determination letter: (attach copy of letter if no			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here		1	<u> 1,391.</u>
of Part I, line 27b	İ	138 · E	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4	% of Part I, line 12, col (b).	1	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; or		2	
3 Add lines 1 and 2	•	3	1,391.
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	1,391.
6 Credits/Payments:			
a 2018 estimated tax payments and 2017 overpayment credited to 2018	$\begin{array}{ c c c c c c }\hline & 6a & 4,308. \end{array}$		
b Exempt foreign organizations - tax withheld at source	6b 0.		
c Tax paid with application for extension of time to file (Form 8868)	6c 0.		
d Backup withholding erroneously withheld	6d 0.		
7 Total credits and payments. Add lines 6a through 6d		7	4,308.
8 Enter any penalty for underpayment of estimated tax. Check here if.Form 2220 is at	tached	8	0.
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	2,917.
11 Enter the amount of line 10 to be: Credited to 2019 estimated tax	2,917. Refunded ▶	11	0.
Part VII A Statements Regarding Activities	,		
1a During the tax year, did the foundation attempt to influence any national, state, or local leg	islation or did it participate or intervent	: in	Yes No
any political campaign?			1a X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purp	oses? See the instructions for the defii	nition	1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies	s 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	ne year:		
(1) On the foundation. > \$ (2) On foundation manage	rs.▶ \$ 0 .	*	
e Enter the reimbursement (if any) paid by the foundation during the year for political expen	diture tax imposed on foundation		
managers. ▶ \$ 0 .		21	
2 Has the foundation engaged in any activities that have not previously been reported to the	IRS?	1	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
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year	ar?		4a X
b If "Yes," has it filed a tax return on Form 990-T for this year?			4b X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	7?		5 X
If "Yes," attach the statement required by General Instruction T			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	either. ,		
 By language in the governing instrument, or 			
 By state legislation that effectively amends the governing instrument so that no mandate 	ory directions that conflict with the stat	e 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," con	nplete 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 instruct	tions. >		
SC .			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the			
of each state as required by General Instruction G? If "No," attach explanation	SEE STATE		
9 Is the foundation claiming status as a private operating foundation within the meaning of		endar	
year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," co			9 X
10 Did any persons become substantial contributors during the tax year? If *Yes,* attach a sche	dule listing their names and addresses		10 X
· ·	•		Form 990-PF (2018)

iHis	Intervils As 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 application?	13 X
	Website address ► N/A	
14	The books are in care of ► MR. AND MRS. ERWIN MADDREY II Telephone no. ►864-23	32-8301
	Located at ▶ 201 CRESCENT AVE., GREENVILLE, SC ZIP+4 ▶29	9605
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	ightharpoonup
	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	選擇以 多达到 公業署
	foreign country	
₽ε	irt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1
**	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)	關於民族學語
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	
	a disqualified person?	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	
	(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"	
	if the foundation agreed to make a grant to or to employ the official for a period after	
	termination of government service, if terminating within 90 days)	
H	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b
	Organizations relying on a current notice regarding disaster assistance, check here	10 S S S S S S S S S S S S S S S S S S S
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	
	before the first day of the tax year beginning in 2018?	1c X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	新聞 基金 马河
_	defined in section 4942(j)(3) or 4942(j)(5)):	
a	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	
Ī	before 2018? Yes X No	
	If "Yes," list the years	
ŀ	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.) N/A	2b
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	\$\$1.455.15E
	•	
3:	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	
00	during the year? X Yes No	
ŀ	of Tyes," 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 foundation had excess business holdings in 2018.)	3b X
4	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a X
	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
		orm 990-PF (2018)
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	orm 4720 May Be Re	equirea _{(continu}	iea)	
5a During the year, did the foundation pay or incur any amount to.	1	·		Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No 🕽	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ctly,	[
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	? .	Ye	s 🗶 No 🧍	
(4) Provide a grant to an organization other than a charitable, etc., organization			_ ·	
4945(d)(4)(A)? See instructions		☐ Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo			
the prevention of cruelty to children or animals?	or outdaniental purposocy or m		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un-	der the excentions described i		·	
section 53.4945 or in a current notice regarding disaster assistance? See instru	· · · · · · · · · · · · · · · · · · ·	ogulaliono	N/A	5b
Organizations relying on a current notice regarding disaster assistance, check it				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ned		
expenditure responsibility for the grant?		//A	s 🗀 No 🚦	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).	-	/ [
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	nav nremilims on			
a personal benefit contract?	pay promiting on	□ v _a	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	arconal hanafit contract?		3 (22 110)	6b X
If "Yes" to 6b, file Form 8870.	ci sonai ochem comi act.		i.	8998 1.158 PAN
7a At any time during the tax year, was the foundation a party to a prohibited tax s	halter transaction?	v	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$				(1981 1983) - P. C.
excess parachute payment(s) during the year?	11,000,000 in remuneration of	□ v _e	s X No	
Rart VIII Information About Officers, Directors, Truste	es. Foundation Mar		(<u></u>) 1.0 1;	107 NO 1072 DEC 107 C14
Paid Employees, and Contractors				
1 List all officers, directors, trustees, and foundation managers and the	neir compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hours per week devoted	(If not paid,	horrele hac	
	to position	enter -0-)	compensation	allowances
E ERWIN MADDREY II	TRUSTEE	enter -0-)	compensation	allowances
E ERWIN MADDREY II 201 CRESCENT AVENUE		enter -0-)	compensation	allowances
		enter -0-)	compensation 0 .	allowances 0 .
201 CRESCENT AVENUE	TRUSTEE	enter -0-)	compensation	allowalices
201 CRESCENT AVENUE GREENVILLE, SC 29605	TRUSTEE 5.00	enter -0-)	compensation	allowalices
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY	TRUSTEE 5.00	enter -0-)	compensation	allowalices
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE	TRUSTEE 5.00 TRUSTEE	enter -0-)	Compensation 0 .	0.
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605	TRUSTEE 5.00 TRUSTEE 5.00	enter -0-)	Compensation 0 .	0.
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 EDWIN ERWIN MADDREY III 201 CRESCENT AVENUE	TRUSTEE 5.00 TRUSTEE 5.00	enter -0-)	Compensation 0 .	0.
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 EDWIN ERWIN MADDREY III 201 CRESCENT AVENUE	TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE	0 .	O .	0 •
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 EDWIN ERWIN MADDREY III 201 CRESCENT AVENUE GREENVILLE, SC 29605 ALEXANDER SMITH MADDREY	TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00	0 .	O .	0 •
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 EDWIN ERWIN MADDREY III 201 CRESCENT AVENUE GREENVILLE, SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE	TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00	0 .	O .	0 •
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 EDWIN ERWIN MADDREY III 201 CRESCENT AVENUE GREENVILLE, SC 29605 ALEXANDER SMITH MADDREY	TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00	0. 0.	O . O .	0. 0.
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 EDWIN ERWIN MADDREY III 201 CRESCENT AVENUE GREENVILLE, SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 2 Compensation of five highest-paid employees (other than those inc	TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 Uded on line 1). If none, (b) Title, and average	0 . 0 . 0 . enter "NONE."	O . O .	0. 0.
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 EDWIN ERWIN MADDREY III 201 CRESCENT AVENUE GREENVILLE; SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 GREENVILLE, SC 29605	TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 USTEE	0. 0.	O .	0. 0.
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 EDWIN ERWIN MADDREY III 201 CRESCENT AVENUE GREENVILLE, SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 2 Compensation of five highest-paid employees (other than those inc	TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 Uded on line 1). If none, (b) Title, and average	0 . 0 . 0 . enter "NONE."	O . O . (d) Contributions to employee benefit plans and deferred	0. 0.
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 EDWIN ERWIN MADDREY III 201 CRESCENT AVENUE GREENVILLE; SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 Uded on line 1). If none, (b) Title, and average	0 . 0 . 0 . enter "NONE."	O . O . (d) Contributions to employee benefit plans and deferred	0. 0.
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 EDWIN ERWIN MADDREY III 201 CRESCENT AVENUE GREENVILLE; SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 Uded on line 1). If none, (b) Title, and average	0 . 0 . 0 . enter "NONE."	O . O . (d) Contributions to employee benefit plans and deferred	0. 0.
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 EDWIN ERWIN MADDREY III 201 CRESCENT AVENUE GREENVILLE; SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 Uded on line 1). If none, (b) Title, and average	0 . 0 . 0 . enter "NONE."	O . O . (d) Contributions to employee benefit plans and deferred	0. 0.
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 EDWIN ERWIN MADDREY III 201 CRESCENT AVENUE GREENVILLE; SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 Uded on line 1). If none, (b) Title, and average	0 . 0 . 0 . enter "NONE."	O . O . (d) Contributions to employee benefit plans and deferred	0. 0.
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 EDWIN ERWIN MADDREY III 201 CRESCENT AVENUE GREENVILLE; SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 Uded on line 1). If none, (b) Title, and average	0 . 0 . 0 . enter "NONE."	O . O . (d) Contributions to employee benefit plans and deferred	0. 0.
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 EDWIN ERWIN MADDREY III 201 CRESCENT AVENUE GREENVILLE; SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 Uded on line 1). If none, (b) Title, and average	0 . 0 . 0 . enter "NONE."	O . O . (d) Contributions to employee benefit plans and deferred	0. 0.
201 CRESCENT AVENUE GREENVILLE, SC 29605 NANCY B MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 EDWIN ERWIN MADDREY III 201 CRESCENT AVENUE GREENVILLE; SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 ALEXANDER SMITH MADDREY 201 CRESCENT AVENUE GREENVILLE, SC 29605 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 TRUSTEE 5.00 Uded on line 1). If none, (b) Title, and average	0 . 0 . 0 . enter "NONE."	O . O . (d) Contributions to employee benefit plans and deferred	0. 0.

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

Form 990-PF (2018) THE MADDREY FOUNDATION	5/-61,	25/48 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Manage Paid Employees, and Contractors (continued)	rs, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
	b) Type of service	(c) Compensation
NONE		
•		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		•••
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information s	such as the	Evanges
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
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		
All other program-related investments. See instructions.		
3		
<u></u>		
Total. Add lines 1 through 3	>	0.
		Form 990-PF (2018)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	idations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	2,411,823. 72,787.
b	Average of monthly cash balances	1b	72,787.
C	Fair market value of all other assets	1c_	
d	Total (add lines 1a, b, and c)	1d	2,484,610.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,484,610.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	37,269.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,447,341.
6	Minimum investment return. Enter 5% of line 5	6	122,367.
<u>P</u>	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	122,367.
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,391.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	120,976.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	120,976.
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	120,976.
P	art XII Qualifying Distributions (see instructions)	· · · · · · · · · · · · · · · · · · ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	(1)	1a	184,625.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	184,625.
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	1,391.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	183,234.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies for	the section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,	·	· · · · · · · · · · · · · · · · · · ·		122 076
line 7				120,976.
2 Undistributed income, if any, as of the end of 2018			•	}
a Enter amount for 2017 only	·		0.	
ь Total for prior years.		0.		į
3 Excess distributions carryover, if any, to 2018:		<u> </u>		
a From 2013 9,080.				
b From 2014 20,649.				
c From 2015 41,458.				
d From 2016 102,131.				
e From 2017 73,763.				
f Total of lines 3a through e	247,081.			
4 Qualifying distributions for 2018 from				1
Part XII, line 4. ► \$ 184,625.]
a Applied to 2017, but not more than line 2a			0.]
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				120,976.
e Remaining amount distributed out of corpus	63,649.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	310,730.			i
b Prior years' undistributed income. Subtract	,	4		ı
line 4b from line 2b		0.		;
c Enter the amount of prior years'				ļ
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				1
amount - see instructions		0.		
e Undistributed income for 2017. Subtract line				i
4a from line 2a. Taxable amount - see instr.			0.	1
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2019				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)	U.			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7	9,080.			
9 Excess distributions carryover to 2019.	<u> </u>			
Subtract lines 7 and 8 from line 6a	301,650.			
IO Analysis of line 9:	332,0301			
a Excess from 2014 20,649.				
b Excess from 2015 41,458.				
c Excess from 2016 102,131.				
d Excess from 2017 73,763.				
e Excess from 2018 63,649.				
323581 12-11-18				Form 990-PF (2018)

					25748 Page 1
Part XIV Private Operating F	oundations (see in	structions and Part VII-	A, question 9)	N/A	
1 a If the foundation has received a ruling o	ir determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	r 2018, enter the date of t	the ruling	•		
b Check box to indicate whether the found	dation is a private operatir	ng foundation described in	n section	4942(j)(3) or 49	42(1)(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					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities				j	
•					
• •					
·					
3 Complete 3a, b, or c for the					
alternative test relied upon:		/			
, ,			-		
		-			
2/3 of minimum investment return					
shown in Part X, line 6 for each year					
· · · · · · · · · · · · · · · · · · ·					
securities loans (section				}	
	}				
organizations as provided in					
section 4942(j)(3)(B)(iii)	ļ				
(a) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
			f the foundation	had \$5,000 or mor	e in assets
at any time during t	he year-see instr	uctions.)			
1 Information Regarding Foundation	n Managers:				
			ibutions received by the	foundation before the close	of any tax
year (but only if they have contributed in	nore than \$5,000). (See s	ection 507(d)(2))			
SEE STATEMENT 10			ı		
b List any managers of the foundation wh	own 10% or more of th	e stock of a corporation (or an equally large portio	n of the ownership of a pai	tnership or
other entity) of which the foundation ha	s a 10% or greater interes	st.			
NONE					
Part XIV Private Operating Foundations (see matructons and Part VIII-A question s) N/A					
toundation, and the ruling is effective for 2018, ener the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 2 a Enter the lesser of the adjusted net income from Part I or the maintain investment return from Part I or the street of the day and the street of the s					
art XIV Private Operating Foundations (see instructions and Part VIIA, question 9) N/A If the foundation has received a rimping or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling of the development of the adjusted mit. A service of the date of the ruling of the development of the date of the ruling of the date of the ruling and the ruling is effective to 72016, enter the date of the ruling of the ruling of the date of the date of the ruling of t					
a The name, address, and telephone num	If XIV Private Operating Foundations (see matructones and Part VIII.A. question 9) N/A				
,,,,				ndation had \$5,000 or more in assets and by the foundation before the close of any tax large portion of the ownership of a partnership or and does not accept unsolicited requests for funds. If e items 2a, b, c, and d it be addressed.	
at the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enior the date of the ruling for determination letter that it is a private operating foundation, and the ruling is effective for 2018, enior the date of the ruling for the ruling is effective for 2018, enior the date of the ruling for the ruling is effective for 2018, enior the date of the ruling for the ruling for the adjust of the ruling for r					
Part XIV Private Operating Foundations (see matructons and Part VIII-A question 9) N/A					
2 - 1.0 to 1.1	Janimus uno intormat	uno materiale tries si	33.3 1101000		
c Any submission deadlines					
• Any Submission deadines					
d Any restrictions or limitations on award	s such as hy generanhie	al areas charitable fields	kinds of institutions or a	other factors	
• Any restrictions of inititations on award	o, outin as by goograpilita	يا سادمي, بالقا القاباة القابلي.	minus or institutions, of t	Amor raciol 5.	

	n 990-P <u>F</u>				FOUNDATION		
Part XV Sup			olementai	ry Informatio	on (continued)		
3 Grants and Contributions Paid During the Year or Approved for							
			Recipient		If recipient is an inc		

3 Grants and Contributions Paid During the Y		Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid dunng the year				
AMERICAN HEART ASSN MID-ATLANTIC	NONE	PC	TO SUPPORT GENERAL	
AFFILIATE			OPERATIONS OF THE	
7272 GREENVILLE AVE			ORGANIZATION	1,000
DALLAS, TX 75231		<u> </u>		1,000
CANCER SOCIETY OF GREENVILLE COUNTY	NONE	PC	TO SUPPORT GENERAL	
113 MILLS AVENUE	HOME	ľ	OPERATIONS OF THE	
GREENVILLE, SC 29605			ORGANIZATION	1,000
				·
CAROLINA YOUTH SYMPHONY	NONE	PC	TO SUPPORT GENERAL	
PO BOX 534			OPERATIONS OF THE	
GREENVILLE, SC 29602			ORGANIZATION	100
CHILDREN'S MUSEUM OF THE UPSTATE	NONE	₽C	TO SUPPORT GENERAL	
300 COLLEGE STREET			OPERATIONS OF THE	
GREENVILLE, SC 29601			ORGANIZATION	10,000
CHRIST CHURCH EPISCOPAL SCHOOL	NONE	PC	TO SUPPORT GENERAL	
245 CAVALIER DRIVE			OPERATIONS OF THE	
GREENVILLE, SC 29607			ORGANIZATION	1,000
Total SEE CO	NTINUATION SHEE	丁(S)	► 3a	181,800
b Approved for future payment				
NONE				
		1		
		1		
	-			
T-4-1			▶ 3b	C
Total	.		<u> 30 </u>	rm 990-PF (201

Part XVI-A	Analysis of Income-Produci	ng Activities	
		Unrelated business income	Contrated to a contrate Cat

Enter gross amounts unless otherwise indicated.	Unrelated bu	Isiness income		y section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	Amount	Tanetion meetic
a					
	-				
<u> </u>			 		
d			 		
e	-				
g Fees and contracts from government agencies	-		 	-	-
2 Membership dues and assessments					
3 Interest on savings and temporary cash	-				
investments			14	36,431.	
4 Dividends and interest from securities			14	36,431. 51,994.	
5 Net rental income or (loss) from real estate.					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income	900099	-2,394.	14	6,175.	
8 Gain or (loss) from sales of assets other					_
than inventory			18	72,801.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a	_				
b	-		ļ		
c	-				
ď	_	<u> </u>			
e	-			1.55 1.01	
12 Subtotal Add columns (b), (d), and (e)		-2,394.		167,401.	
13 Total. Add line 12, columns (b), (d), and (e)				13	165,007.
(See worksheet in line 13 instructions to verify calculations.)					

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
	· · · · · · · · · · · · · · · · · · ·

Form **990-PF** (2018)

Form 990-F	· PF(2018) THE M	ADDREY FOUNDATI	ON		57-612574	. 8 P	age 13
Part X\		egarding Transfers to a		d Relationshi _l	os With Noncharitabl		
	Exempt Organ	izations	<u></u>				
1 Did th	e organization directly or inde	irectly engage in any of the followi	ng with any other organization	n described in sectio	n 501(c)	Yes	No
(other	r than section 501(c)(3) organ	nizations) or in section 527, relatin	g to political organizations?				
a Trans	fers from the reporting found	lation to a noncharitable exempt or	ganization of				
(1) 0	Cash				1 <u>1</u>	(1)	X
(2)	Other assets				1a	(2)	X
b Other	transactions:						
(1) S	ales of assets to a noncharita	ible exempt organization			1b	(1)	X
(2) P	urchases of assets from a no	oncharitable exempt organization			1b	(2)	X
(3) R	Rental of facilities, equipment,	or other assets			1b	(3)	X
(4) R	Reimbursement arrangements	3			1b	(4)	X
	oans or loan guarantees					(5)	Х
, ,	-	embership or fundraising solicitation	ons			(6)	Х
		ailing lists, other assets, or paid em				c	Х
	*	"Yes," complete the following sch	· -	avs show the fair m	arket value of the goods, other	assets.	
		foundation. If the foundation receiv					
	• , ,	other assets, or services received.		•			
(a) Line no	(b) Amount involved	(c) Name of noncharitabl		(d) Description	of transfers, transactions, and sharing	ј алапдете	nts
	<u> </u>	N/A					
-							
	· · · · · · · · · · · · · · · · · · ·	 					
							
				•			
			 -	<u> </u>			
				····			
		1					
	_				· · · · · · · · · · · · · · · · · · ·		
		+					
		+		 			
		 			4.444		
2a la tha	foundation directly or indirec	the affiliated with or related to one	o or more tay evenut erganiz	ations described			
		ctly affiliated with, or related to, one	e or more tax-exempt organiza	ations described		∕es ဩॅ	No
	s," complete the following sch	on 501(c)(3)) or in section 527?				CS [23	יין ניי
<u> </u>	(a) Name of or		(b) Type of organization	1.	c) Description of relationship		
	N/A	gamzation	(B) Type of organization		o o o o o o o o o o o o o o o o o o o		
	14/11						
	······································			 	· ··		
			· · · · · · · · · · · · · · · · · · ·			-	
Tu	Inder penalties of périury, I declare	that I have examined this return, including	a accompanying schedules and sta	tements, and to the best	t of my knowledge		
		mplete Declaration of preparer (other than			s any knowledge May the l	RS discuss h the prepa	rer
Here		m March	W 15/14/ra	TRUSTE	_	low? See in	\neg
	Signature of officer or trustee		Date	Title	<u>-</u>	/es	No
	Print/Type preparer's na				Check If PTIN		
	FRANCES M.		7		self- employed		
Paid	PATTERSON	to about	m. Patters	73/14/10	P0044	15000	,
Prepar	-		PLLC	<u> </u>	Firm's EIN ► 57-0383		
Lise Or		ITOIT DWATS' PIPC	/ FUUC		rimsein 🚩 5/-036.	1302	

Phone no. (864) 242-3370 Form **990-PF** (2018)

Firm's address ▶ P.O. BOX 6286

GREENVILLE, SC 29606-6286

Part IV Capital Gains and Lo	sses for Tax on Investment Income	, <u>, , , , , , , , , , , , , , , , , , </u>			
(a) List and	describe the kind(s) of property solo		(b) How acquired P - Purchase D - Donation	(c) Date acquired	(d) Date sold
	rick warehouse; or common stock, 20	JU SNS MLU UO		(mo., day, yr.)	(mo., day, yr.)
b UBS ACCOUNT 13:		· · · · · · · · · · · · · · · · · · ·	P		
c UBS ACCOUNT 20:			P		
d UBS ACCOUNT 20:			P		
e UBS ACCOUNT 20:			P		
UBS ACCOUNT 20			P		
g UBS ACCOUNT 20:	104		P		
h UBS ACCOUNT 20:			P		
UBS ACCOUNT 20			P		
	DUCTS PARTERS K-1		P		
k MPLX K-1	- CMD TDUMTON		P		
CAPITAL GAIN D	ISTRIBUTION		P		
<u>m</u>					
<u>n</u>					
_0	(f) Depreciation allowed	(g) Cost or other basis		Gain or (loss)	
(e) Gross sales price	(or allowable)	plus expense of sale		lus (f) minus (g)	
a 20,160.		20,834.			-674.
b 135,290.		136,543.			-1,253.
c 173,647.		192,171.			-18,524.
d 321,118.		269,999.			51,119.
e 178,144.		179,375.			-1,231.
<u>f 122,683.</u>		109,627.			13,056.
g 30,066. h 109,269.		28,857. 101,284.			7,985.
$\frac{1}{1}$ 51,290.		32,415.			18,875.
1 31,250:		8.			-8.
k 10.					10.
1 2,237.					2,237.
m					
n					
0					
Complete only for assets showing	ng gain in column (h) and owned by t		(I) Los	ses (from col. (h))	1 (1)
(i) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		of col (h) gain over ot less than "-0-")	
<u>a</u>			<u></u>		-674.
<u>b</u>					-1,253.
С					-18,524.
<u>d</u>					51,119. -1,231.
e	·				$\frac{-1,231.}{13,056.}$
1					1,209.
h	.				7,985.
1					18,875.
<u> </u>					-8.
k					10.
					2,237.
m					
<u>n</u>					
0					
2 Capital gain net income or (net ca	ipital loss) { If gain, also enter If (loss), enter "-C	in Part I, line 7 I-" in Part I, line 7	2		72,801.
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) an	` \			
If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line	column (c)	}	3	N/A	
	· · · · · · · · · · · · · · · · · · ·		- 1		

3 Grants and Contributions Paid During the	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Alliborit
CLEMENT'S KINDNESS	NONE	₽C	TO SUPPORT GENERAL	
27 CLEVELAND STREET			OPERATIONS OF THE	1 000
GREENVILLE, SC 29601		 	ORGANIZATION	1,000
COMMUNITY FOUNDATION OF GREENVILLE	NONE	₽C	TO SUPPORT GENERAL	
630 E. WASHINGTON STREET, STE. A			OPERATIONS OF THE	
GREENVILLE, SC 29601			ORGANIZATION	11,000
CONSERVATION VOTERS OF SOUTH	NONE	PC	TO SUPPORT GENERAL	
CAROLINA			OPERATIONS OF THE	
PO BOX 50632			ORGANIZATION	
COLUMBIA, SC 29250				5,000
CURA FOUNDATION	NONE	₽C	TO SUPPORT GENERAL	
PO BOX 5298	NONE	[OPERATIONS OF THE	
NEW YORK, NY 10185			ORGANIZATION	1,000
				·
DAVIDSON COLLEGE	NONE	PC	TO SUPPORT GENERAL	
DAVIDSON COLLEGE			OPERATIONS OF THE	
DAVIDSON, NC 28035			ORGANIZATION	10,000
EMIL ENDOLMENT	NONE	₽C	TO SUPPORT GENERAL	
ETV ENDOWMENT 401 E. KENNEDY STREET, STE B-1	NONE		OPERATIONS OF THE	
SPARTANBURG, SC 29302			ORGANIZATION	1,000
FLAT ROCK PLAYHOUSE	NONE	₽C	TO SUPPORT GENERAL	
PO BOX 310			OPERATIONS OF THE	
FLAT ROCK, NC 28731			ORGANIZATION	1,000
FRIENDS OF DUPONT FOREST P.O. BOX 218	NONE	₽C	TO SUPPORT GENERAL OPERATIONS OF THE	
HENDERSONVILLE, NC 28739			ORGANIZATION	1,000
RENDERSONVILLE, NC 20737			OKOMI ZATION	1,000
FRIENDS OF THE REEDY RIVER	NONE	₽C	TO SUPPORT GENERAL	
PO BOX 9351			OPERATIONS OF THE	
GREENVILLE, SC 29604			ORGANIZATION	1,000
FURMAN UNIVERSITY	NONE	PC	TO SUPPORT GENERAL	
3300 POINSETT HWY			OPERATIONS OF THE	45.00
GREENVILLE, SC 29613 Total from continuation sheets	_l		PRGANIZATION	15,000 168,700

Part XV Supplementary Information	n			25/140
3 Grants and Contributions Paid During the	fear (Continuation)			
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	Contribution	
GOVERNOR'S SCHOOL FOR THE ARTS	NONE	PC	TO SUPPORT GENERAL	
FOUNDATION	NONE	FC	OPERATIONS OF THE	
PO BOX 8458			ORGANIZATION	
GREENVILLE SC 29604	•		DAGINI ZATION	5,000.
				
GREENVILLE CENTER FOR CREATIVE ARTS	NONE	PC .	TO SUPPORT GENERAL	
PO BOX 2206	NONE		OPERATIONS OF THE	
GREENVILLE, SC 29602			ORGANIZATION	10,000.
GREENVILLE, SC 27002		 	,	
GREENVILLE CHAUTAUQUA SOCIETY	NONE	PC	TO SUPPORT GENERAL	
943 RUTHERFORD ROAD	NONE	FC	OPERATIONS OF THE	
			ORGANIZATION '	1,000.
GREENVILLE, SC 29609		 -	DRGANIZATION	1,000.
CONTROL OF CONTROL WASTERNAME.	VOLUM	PC	TO SUPPORT GENERAL	
GREENVILLE COUNTY HISTORICAL SOCIETY	NONE		OPERATIONS OF THE	
211 EAST WASHINGTON STREET			ORGANIZATION	150.
GREENVILLE, SC 29601			DRGANIZATION	150.
CREENVILLE EDEE MEDICAL CLINIC INC	NONE	PC	TO SUPPORT GENERAL	
GREENVILLE FREE MEDICAL CLINIC INC. PO BOX 8993	NONE		OPERATIONS OF THE	
GREENVILLE SC 29604			ORGANIZATION	1,000.
ONDERVISED, DO BOOK		-		_,
GREENVILLE SYMPHONY .	NONE	₽C	TO SUPPORT GENERAL	
200 MAIN STREET			OPERATIONS OF THE	
GREENVILLE, SC 29601			ORGANIZATION	2,000.
GREENVILLE TEXTILE HERITAGE SOCIETY	NONE	₽C	TO SUPPORT GENERAL	
PO BOX 4355			OPERATIONS OF THE	
GREENVILLE, SC 29608		ļ	ORGANIZATION	1,000.
HABITAT FOR HUMANITY	NONE	PC	TO SUPPORT GENERAL	
209 S SUMTER STREET			OPERATIONS OF THE	
COLUMBIA, SC 29201			ORGANIZATION	2,000.
HENDERSON COUNTY RESCUE SQUAD	NONE	₽C	TO SUPPORT GENERAL	
PO BOX 1729			OPERATIONS OF THE	
HENDERSONVILLE, NC 28793			ORGANIZATION	1,000.
HOMES OF HOPE	NONE	₽C	TO SUPPORT GENERAL	
3 DUNEAN ST			OPERATIONS OF THE	
GREENVILLE, SC 29611		1	ORGANIZATION	1,000
Total from continuation sheets				l

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
INSTITUTE FOR CHILD SUCCESS	NONE	₽C	TO SUPPORT GENERAL	
102 EDINBURGH COURT			OPERATIONS OF THE	
GREENVILLE, SC 29607		1	ORGANIZATION	1,000
INTERNATIONAL AFRICAN AMERICAN MUSEUM	NONE	₽C	TO SUPPORT GENERAL	
25 CALHOUN STREET, NO 320			OPERATIONS OF THE	
CHARLESTON, SC 29401			ORGANIZATION	5,000
LAKE SUMMIT FOUNDATION	NONE	PC	TO SUPPORT GENERAL	
15 WESTMINSTER COURT			OPERATIONS OF THE ORGANIZATION	1,00
HENDERSONVILLE, NC 28739			DRGANIZATION	1,000
LEGACY ADVANCEMENT	NONE	₽C	TO SUPPORT GENERAL	
104 BROADUS AVENUE			OPERATIONS OF THE	
GREENVILLE, SC 29601			ORGANIZATION	1,000
MEALS ON WHEELS	NONE	₽C	TO SUPPORT GENERAL	
15 OREGON STREET	NONE		OPERATIONS OF THE	
GREENVILLE, SC 29605			ORGANIZATION	500
METROPOLITAN ARTS COUNCIL	NONE	₽C	TO SUPPORT GENERAL	
16 AUGUSTA STREET GREENVILLE, SC 29601			OPERATIONS OF THE ORGANIZATION	5,000
MUSEUM ASSOCIATION, INC.	NONE	PC	TO SUPPORT GENERAL	
420 COLLEGE STREET			OPERATIONS OF THE	
GREENVILLE, SC 29601			ORGANIZATION	2,500
NATURE CONSERVANCY - SC CHAPTER	NONE	₽C	TO SUPPORT GENERAL	
801 GERVAIS STREET, STE 202	1.01.11		OPERATIONS OF THE	
COLUMBIA, SC 29201			ORGANIZATION	1,00
NC OUTWARD BOUND	NONE	₽C	TO SUPPORT GENERAL	
2582 RICEVILLE RD			OPERATIONS OF THE	
ASHEVILLE, NC 28805			ORGANIZATION	250
PALMETTO PROJECT	NONE	₽C	TO SUPPORT GENERAL	
1031 CHUCK DAWLEY BLVD, STE 5			OPERATIONS OF THE	
MT, PLEASANT, SC 29464			ORGANIZATION	1,00
Total from continuation sheets				

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	711100111
PEACE CENTER	NONE	₽C	TO SUPPORT GENERAL	
101 W. BROAD STREET			OPERATIONS OF THE	
GREENVILLE, SC 29601			ORGANIZATION	10,000
DUDI IG EDUGAMION DARMEDG	NONE	₽C	TO SUPPORT GENERAL	
PUBLIC EDUCATION PARTNERS 225 S. PLEASANTBURG DR, STE B1	NONE	1	OPERATIONS OF THE	
GREENVILLE, SC 29607			ORGANIZATION	15,300
ac componer's squary for company	NONE	nc.	TO CURROR CENERAL	
SC GOVERNOR'S SCHOOL FOR SCIENCE &	NONE	PC	TO SUPPORT GENERAL OPERATIONS OF THE	
MATHEMATICS 1201 MAIN ST., STE 2350			ORGANIZATION	
COLUMBIA, SC 29201			SKGINT ZATTON	1,000
GG TAIDEDENING GOLLEGES .	NONE	PC	TO SUPPORT GENERAL	•
SC INDEPENDENT COLLEGES & UNIVERSITIES	NONE	FC	OPERATIONS OF THE	
PO BOX 12007			ORGANIZATION	
COLUMBIA, SC 29211				1,000
SMITHSONIAN	NONE	PC	TO SUPPORT GENERAL	
PO BOX 9016			OPERATIONS OF THE	
PITTSFIELD, MA 01201			ORGANIZATION	1,000
SOUTH CAROLINA CHILDREN'S THEATRE	NONE	PC	TO SUPPORT GENERAL	
PO BOX 9340			OPERATIONS OF THE	
GREENVILLE, SC 29604	····		ORGANIZATION	5,000
			·	
SOUTHERN ENVIRONMENTAL LAW CENTER	NONE	₽C	TO SUPPORT GENERAL	
201 WEST MAIN ST., SUITE 14			OPERATIONS OF THE	
CHARLOTTESVILLE, VA 22902		1	ORGANIZATION	5,000
SPARTANBURG REGIONAL FOUNDATION	NONE	₽C	TO SUPPORT GENERAL	
101 EAST WOOD STREET			OPERATIONS OF THE	
SPARTANBURG, SC 29303		 	DRGANIZATION	1,000
			TO GUDDONE STUTEN	
ST. FRANCIS FOUNDATION	NONE	PC	TO SUPPORT GENERAL	
1 ST FRANCIS DRIVE GREENVILLE, SC 29601			OPERATIONS OF THE ORGANIZATION	5,000
	"			3,000
תבא את חווב תוס	NONE	PC	TO SUPPORT GENERAL	
TEN AT THE TOP 124 VERDAE BOULEVARD	HOME	[OPERATIONS OF THE	}
GREENVILLE, SC 29607			ORGANIZATION	5,000
Total from continuation sheets	1	-	1	1

Part XV Supplementary Information 3 Grants and Contributions Paid During the		· ·		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	•
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
UNC-TV	NONE	PC	TO SUPPORT GENERAL	
10 T.W. ALEXANDER DRIVE	110112		OPERATIONS OF THE	
RESEARCH TRIANGLE PARK, NC 27709		1	ORGANIZATION	1,000
·			•	
UNITED MINISTRIES	NONE	PC	TO SUPPORT GENERAL	
606 PENDLETON STREET	,		OPERATIONS OF THE	
GREENVILLE, SC 29601			ORGANIZATION	2,000
UNITED WAY	NONE	PC	TO SUPPORT GENERAL	
105 EDINBURGH CT		[]	OPERATIONS OF THE	
GREENVILLE, SC 29607			ORGANIZATION	10,000
	,,,,			
UNIVERSITY OF NORTH CAROLINA AT	NONE	₽C	TO SUPPORT GENERAL	
CHAPEL HILL			OPERATIONS OF THE	ļ
PO BOX 309			ORGANIZATION	2,000
CHAPEL HILL, NC 27514				2,000
	l cour	200	TO CURPORT CENERAL	
UPSTATE FOREVER	NONE	PC	TO SUPPORT GENERAL OPERATIONS OF THE	
PO BOX 2308 GREENVILLE, SC 29602			ORGANIZATION	5,000
	-			
URBAN LEAGUE OF THE UPSTATE	NONE	PC	TO SUPPORT GENERAL	
15 REGENCY HILL DR	NONE	[OPERATIONS OF THE	
GREENVILLE, SC 29607			ORGANIZATION	1,000
YMCA	NONE	PC ·	TO SUPPORT GENERAL	
601 E MCBEE AVE, STE 212		'	OPERATIONS OF THE	
GREENVILLE, SC 29601			ORGANIZATION	3,000
GREENVILLE HEALTH SYSTEM (PRISMA)	NONE	₽C	TO SUPPORT GENERAL	
300 E MCBEE AVE STE 302			OPERATIONS OF THE	
GREENVILLE, SC 29601			ORGANIZATION	5,000
AMERICAN RED CROSS	NONE	₽C	TO SUPPORT GENERAL	
940 GROVE ROAD			OPERATIONS OF THE	1 000
GREENVILLE, SC 29605		 	DRGANIZATION	1,000
Total from continuation sheets				

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

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

Employer identification number Name of the organization 57-6125748 THE MADDREY FOUNDATION Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 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 Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, 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), ____ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Employer identification number Name of organization 57-6125748 THE MADDREY FOUNDATION

Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ERWIN AND NANCY MADDREY 201 CRESENT AVE GREENVILLE, SC 29605	\$15,650.	Person X 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 Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Onncash 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
823452 11-0		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

THE MADDREY FOUNDATION

57-6125748

Part II	Noncash Property (see instructions) Use duplicate copies of Par	rt II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(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

Name of org	ganization		Employer identification number				
THE MA	DDREY FOUNDATION		57-6125748				
Part III	Exclusively religious, charitable, etc., contributing	through (e) and the following line er charitable, etc., contributions of \$1,000 or	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the year try. For organizations \$				
(a) No.			(I) Description of house it is held				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of g	ft				
	Transferee's name, address, ar	nd 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				
	Transferee's name, address, ar	ft Relationship of transferor to transferee					
(a) Na							
(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	nd 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				
			4.				
	Transferee's name, address, a	(e) Transfer of g	Relationship of transferor to transferee				

823454 11-08-18

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT	FORM	990-PF	INTEREST C	ON SAVINGS	AND	TEMPORARY	CASH	INVESTMENTS	STATEMENT	1
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SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
UBS ACCOUNT 13972	36,158.	36,158.	36,158.
UBS ACCOUNT 13972 - ACCRUED		•	
INTEREST PAID	-2,136.	-2,136.	-2,136.
UBS ACCOUNT 13972 -			
ACQUISITION PREMIUM	7.	7.	7.
UBS ACCOUNT 13972 - BOND			
PREMIUM	-2,812.	-2,812.	-2,812.
UBS ACCOUNT 13972 - OID	7.	7.	7.
UBS ACCOUNT 20101	63.	63.	63.
UBS ACCOUNT 20102	4,834.	4,834.	4,834.
UBS ACCOUNT 20102 - ACCRUED			
INTEREST PAID	-649.	-649.	-649.
UBS ACCOUNT 20102 -		2.0	0.0
ACQUISITION PREMIUM	29.	29.	29.
UBS ACCOUNT 20102 - BOND	•		•
PREMIUM/MKT DISCOUNT	0.	0.	0.
UBS ACCOUNT 20102 - MKT	•	•	•
DISCOUNT	0.	0.	0.
UBS ACCOUNT 20102 -	222	222	233.
NONQUALIFIED INTERST	233. 623.	233. 623.	623.
UBS ACCOUNT 20102 - OID			23.
UBS ACCOUNT 20104	23. 21.	23. 21.	23.
UBS ACCOUNT 20105		30.	30.
UBS ACCOUNT 20119	30.	30.	
TOTAL TO PART I, LINE 3	36,431.	36,431.	36,431.
=			

FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES ST	TATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
UBS ACCOUNT 13972	0.	0.	0.	0.	0.
UBS ACCOUNT 20101 UBS ACCOUNT 20101	30,376.	0.	30,376.	30,376.	30,376.
- NONDIVIDEND	1,856.	0.	1,856.	0.	1,856.
UBS ACCOUNT 20102	1,477.	0.	1,477.	1,477.	1,477.
UBS ACCOUNT 20104 UBS ACCOUNT 20104	8,524.	0.	8,524.	8,524.	8,524.
- NONDIVIDEND	979.	0.	979.	0.	979.
UBS ACCOUNT 20105	8,782.	0.	8,782.	8,782.	8,782.
TO PART I, LINE 4	51,994.	0.	51,994.	49,159.	51,994.

FORM 990-PF	OTHER	INCOME		STATEMENT 3
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
UBS ACCOUNT 20102 - MISC INCO)ME	230.	230.	0.
UBS ACCOUNT 13972 - MISC INCO	ME	133.	133.	0.
PARTNERSHIP DISTRIBUTIONS		3,417.	3,417.	0.
UBI FROM PARTNERSHIPS		0.	-2,385.	0.
PTP LOSS LIMITATIONS		0.	2,384.	0.
ORDINARY GAIN/LOSS ON SALE OF	PTP			
INTEREST		0.	2,068.	0.
OTHER INCOME ADJUSTMENT		1.	1.	0.
ADJUSTMENT TO CAPITAL GAIN ON	1 PTP	_	4 405	•
SALES		0.	1,107.	0.
TOTAL TO FORM 990-PF, PART I,	LINE 11	3,781.	6,955.	0.
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
ACCOUNTING FEES	5,650	2,825	. 0	2,825.
TO FORM 990-PF, PG 1, LN 16B	5,650	2,825	. 0	2,825.
=				<u></u>
FORM 990-PF (THER PROFE	SSIONAL FEES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	22,138	. 22,138	. 0	. 0.
TO FORM 990-PF, PG 1, LN 16C	22,138	. 22,138	. 0	. 0.
=			= =====================================	= =

FORM 990-PF	TAX	ES	STATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAX PAID 1099S	1,312.	1,312.	0.	0.	
TO FORM 990-PF, PG 1, LN 18	1,312.	1,312.	0.	0.	

FORM 990-PF	CORPORATE STOCK		STATEMENT 7
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
UBS ACCOUNT 20101 UBS ACCOUNT 20102 UBS ACCOUNT 20104 UBS ACCOUNT 20105		710,810. 226,490. 307,245. 242,530.	700,506. 221,300. 298,385. 334,847.
TOTAL TO FORM 990-PF	F, PART II, LINE 10B	1,487,075.	1,555,038.
FORM 990-PF	CORPORATE BONDS		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
UBS ACCOUNT 13972 UBS ACCOUNT 20102		538,270. 8,882.	517,654. 8,502.
TOTAL TO FORM 990-PE	F, PART II, LINE 10C	547,152.	526,156.

FORM 990-PF	EXPLANATION	CONCERNING	PART VII-A,	LINE 8B	STATEMENT 9

EXPLANATION

NO LONGER REQUIRED BY SC

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 10

NAME OF MANAGER

E ERWIN MADDREY II NANCY B MADDREY