## **Return of Private Foundation**

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Fo	r calen	dar year 2018 or tax year beginning ,	and ending		<del></del>		
N	ame of fo	pundation		_	A Emp	loyer identification number	
					E 0	2700225	
		A FOUNDATION INC  Indicate the street (or P O box number if mail is not delivered to street address)		oom/suite		-3789335 phone number (see instruction	e)
		BOX 2533	"	DOMPSONG		4-607-1168	J)
		n, state or province, country, and ZIP or foreign postal code		·-			-t
	MOH	MASVILLE GA 31799-2	2533		C If exe	mption application is pending	, check here
G	Check	all that apply Initial return Initial retu	irn of a former public c	harity	D 1 F	oreign organizations, check h	ere 🕨 📘
		Final return Amended	return		2 F	oreign organizations meeting	he
		Address change Name cha	ange		85	5% test, check here and attacl	n computation
Н	Check	type of organization X Section 501(c)(3) exempt private	e foundation	16	E If priv	ale foundation status was terr	minated under
	Sectio	n 4947(a)(1) nonexempt charitable trust Other taxab	le private foundation	0	section	on 507(b)(1)(A), check here	▶
I F	aır ma	rket value of all assets at J Accounting method	X Cash Acc	rual	F If the	foundation is in a 60-month te	irmination
е	nd of y	vear (from Part II, col. (c), Other (specify)			under	section 507(b)(1)(B), check h	ere 🕨 📘
	ne 16)	▶ \$ 2,401,011 (Part I, column (d) must	be on cash basis)				<del></del>
ρ	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inve	estment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	incon	ne	income	purposes (cash basis only)
_	1	Contributions, gifts, grants, etc , received (attach schedule)	170,000			<del></del>	(cddir basis orny)
_	2	Check ► ☐ if the foundation is <b>not</b> required to attach Sch B	· · · · · · · · · · · · · · · · · · ·				
	3	Interest on savings and temporary cash investments	1,321		1,321		
	4	Dividends and interest from securities	38,994	3	8,994		
	5a	Gross rents					
e	Ь	Net rental income or (loss)					
n n	6a	Net gain or (loss) from sale of assets not on line 10 STMT 1	8,695				
Revenue	Ь	Gross sales price for all assets on line 6a 543, 383					
	7	Capital gain net income (from Part IV, line 2)	•	1	4,133		
	8	Net short-term capital gain				0	
	9	Income modifications				<del></del>	<del></del>
	10a	Gross sales less returns and allowances					
	þ	Less Cost of goods sold					······································
,	C	Gross profit or (loss) (attach schedule)  Other income (attach schedule)  STMT 2	1 720		1 720	<u> </u>	<del></del>
) }	11		-1,728 217,282		1,728 2,720	0	<del></del>
<i>,</i>	12	Total. Add lines 1 through 11	217,282		2,120		······································
chenses	1	Compensation of officers, directors, trustees, etc Other employee salaries and wages					
, L	15	Pension plans lemployee benefits					
ğ	160-	Toggl food (altogh cohodillo)		<del></del>			
ĴΩ	l iš	Accètatives (attach schedule) STMT 3	9,146		9,146		<del></del>
and Administrative Ex		Other professional fees (attach schedule) STMT 4	12,575	1	2,575		
rat Ta	17	Interest DEN UT					
ist	18	Taxes (attach schedule) (see instructions) STMT 5	39		39		
5 <del>.</del>	19	Depreciation (attach schedule) and depletion					
h	20	Occupancy	3,605		3,605		
Q P	21	Travel, conferences, and meetings					
au	22	Printing and publications					
	23	Other expenses (att sch ) STMT 6	492		492	J	
atir	24	Total operating and administrative expenses.		_		_	_
Operating		Add lines 13 through 23	25,857	2	5,857	0	0
Q	25	Contributions, gifts, grants paid	683,568		- 055		683,568
	26	Total expenses and disbursements. Add lines 24 and 25	709,425	2	5,857	0	683,568
	27	Subtract line 26 from line 12	-402 143		ł	}	
	a	Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	-492,143	2	6,863		<del></del>
	ł	Adjusted net income (if negative, enter -0-)			-,305	0	
	<del>`</del>						

D.	art (l	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
	art fi	should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing			<del></del>
	2	Savings and temporary cash investments	614,817	445,220	445,220
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
1	4	Piedges receivable ▶		1	
		Less allowance for doubtful accounts ▶			
ı	5	Grants receivable			
1	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see			
		instructions)			
	7	Other notes and loans receivable (att. schedule)			
		Less allowance for doubtful accounts ▶ 0			······
3	8	Inventories for sale or use			
1	9	Prepaid expenses and deferred charges	608	569	569
1	0a	Investments – U S and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule) SEE STMT 7	402,272	466,911	550,060
ĺ	С	Investments – corporate bonds (attach schedule)			
1	1	Investments – land, buildings, and equipment basis ▶	]		
		Less accumulated depreciation (attach sch.)			
1	2	Investments – mortgage loans			·
1	3	Investments – other (attach schedule) SEE STATEMENT 8	1,285,242	892,434	905,162
1	4	Land, buildings, and equipment basis ► 1,278,300			
		Less accumulated depreciation (attach sch.) > STMT 9	1,272,638	1,278,300	500,000
1	5	Other assets (describe ▶ )			
1	6	Total assets (to be completed by all filers – see the			
		instructions. Also, see page 1, item I)	3,575,577	3,083,434	2,401,011
1	7 ,	Accounts payable and accrued expenses			
1	8 (	Grants payable			
1	9	Deferred revenue			
2	0	Loans from officers, directors, trustees, and other disqualified persons			
2	1 1	Mortgages and other notes payable (attach schedule)			
2	2 (	Other liabilities (describe ▶ )			
2	3 .	Total liabilities (add lines 17 through 22)	0	0	
	1	Foundations that follow SFAS 117, check here			
	ä	and complete lines 24 through 26, and lines 30 and 31.			
24	4 l	Unrestricted	3,575,577	3,083,434	
2	5	Temporarily restricted			
20	6 F	Permanently restricted			
	F	Foundations that do not follow SFAS 117, check here			
	ā	and complete lines 27 through 31.			
27	7 (	Capital stock, trust principal, or current funds			
28		Paid-in or capital surplus, or land, bldg , and equipment fund			
29	9 F	Retained earnings, accumulated income, endowment, or other funds			
30		Total net assets or fund balances (see instructions)	3,575,577	3,083,434	
31	: Т	Total liabilities and net assets/fund balances (see			
		nstructions)	3,575,577	3,083,434	
Pai	rt III				
To	otal n	et assets or fund balances at beginning of year - Part II, column (a), line 30 (mus	st agree with		
er	nd-of-	year figure reported on prior year's return)			3,575,577
		amount from Part I, line 27a		2	-492,143
		ncreases not included in line 2 (itemize) ▶		3	
		es 1, 2, and 3		4	3,083,434
De	ecrea	ses not included in line 2 (itemize)		5	
		et assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b	), line 30	6	3,083,434
			······································		- 000 DE

Part IV Capital Gains a	nd Losses for Tax on Investment	t Income				
	the kind(s) of property sold (for example, real estate, irehouse, or common stock, 200 shs MLC Co )		(b) How acquired P – Purchase D – Donation	(c) Date ad (mo , day	•	(d) Date sold (mo , day, yr )
1a CAPITAL GAIN DI	STRIBUTIONS					
b						
С						
d						
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis inse of sale		(h) Gain ((e) plus (f)	• •
a 14,133						14,133
b						
С						
d						
е						
Complete only for assets showing	gain in column (h) and owned by the found	dation on 12/31/6	69	m c	Gains (Col. (	(h) gain minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of cot (i) (j), if any	col (		ess than -0-) or
a						14,133
b						
С						
d						
е						
2 Capital gain net income or (net ca	If gain, also enter in Par If (loss), enter -0- in Par			2		14,133
3 Net short-term capital gain or (los	s) as defined in sections 1222(5) and (6)					
, , ,	column (c) See instructions If (loss), enter	r -0- in		3		
	der Section 4940(e) for Reduced	Tax on Net I	nvestment Inco	me		<del></del>
	foundations subject to the section 4940(a)					
		tox on not invest	ment moonie j			•
If section 4940(d)(2) applies, leave thi	s part blank					
Was the foundation liable for the secti	on 4942 tax on the distributable amount of	any year in the b	ase period?			Yes X No
If "Yes," the foundation doesn't qualify	under section 4940(e) Do not complete th	nis part				
1 Enter the appropriate amount in e	ach column for each year, see the instruction	ons before makin	ng any entries			
(a)	(b)	<del></del>	(c)			(d)
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value	of noncharitable-use assets	,		oution ratio vided by col. (c))
2017	665,9	34	3,124,7	45	<u> </u>	0.213116
2016	457,1		3,558,6			0.128467
2015	558,3		4,118,6			0.135563
2014	468,3		4,524,1			0.103520
2013	412,2		4,698,4			0.087735
2 Total of line 1, column (d)				2		0.668401
· · · · · ·	year base period – divide the total on line 2	2 bv 5 0. or bv				
	n has been in existence if less than 5 years			3		0.133680
4 Enter the net value of noncharitable	e-use assets for 2018 from Part X, line 5			4		2,672,157
5 Multiply line 4 by line 3				5	·	357,214
6 Enter 1% of net investment income	e (1% of Part I, line 27b)			_6		269
7 Add lines 5 and 6				7		357,483
8 Enter qualifying distributions from I	Part XII. line 4			8		683,568
· •	line 7, check the box in Part VI, line 1b, and	d complete that p	art using a 1% tax ra			

For	n 990-PF (2018) 10-1 FOUNDATION INC 59-3789335			Page	4
P	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)				_
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			26	9
	here ▶ X and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of				
	Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				<u>0</u>
3	Add lines 1 and 2			26	<u>9</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			(	<u> </u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			26	9
6	Credits/Payments				
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 569				
b	Exempt foreign organizations – tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d 6d				
7	Total credits and payments Add lines 6a through 6d			569	<u> </u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.				_
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				_
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			300	<u>)</u>
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 300 Refunded ▶ 11				_
Pa	art VII-A Statements Regarding Activities				_
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	L	Yes	No	_
	participate or intervene in any political campaign?	1a		X	_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				
	instructions for the definition	1b		X	_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities			J	
С	Did the foundation file Form 1120-POL for this year?	1c		X	_
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			]	
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers 🕨 \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	<del></del>	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		1	ł	
	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?	4a	<del> </del>	X	_
b	If "Yes," has it filed a tax return on Form 990-T for this year?	A 4b	<del> </del>	<u> </u>	_
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	4	X	_
	If "Yes," attach the statement required by General Instruction T		1	]	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?	6	X	Ļ	-
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   GA				
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 year 2018 or the taxable year beginning in 2018? See instructions for Part XIV If "Yes,"				7
	complete Part XIV	9_	1	X	U
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				•
	names and addresses	10		X	_

F	Part VII-A 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	ł		 
	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?  Website address   N/A	13	Х	
14	The books are in care of ▶ MICHAEL A GRIMSLEY  Telephone no ▶ 404-	607-	116	8
	P.O. BOX 2533			
	Located at ▶ THOMASVILLE GA ZIP+4 ▶ 3179	9		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here			▶ [
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of		- 1	
	the foreign country			
٢	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<del>-</del>		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	Yes	No
1a			i	
			ľ	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No			
	(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?  Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(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 )			
b	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		}	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2018? N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		į	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2018?  Yes X No			
b	If "Yes," list the years > 20 , 20 , 20 , 20			
Ü	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 valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		Ì	
	all years listed, answer "No" and attach statement – see instructions )  N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
-	<b>▶</b> 20 , 20 , 20 , 20		1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of		-	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2018 ) N/A	3b	_	
la	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		<u>X</u>
	F	orm <b>99</b> (	)-PF (	2018)

T COLE FORSYTH THOMASVILLE CFO/SEC ONDO ONDO ONDO ONDO ONDO ONDO ONDO OND	Pa	<u>irt VII-B</u> Statements Re	egarding Activities for Which Fo	<u>orm 4720 May Be I</u>	Required (cor	ntinued)		,—	,—
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly, any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other smilar purposes?  (4) Provide a grant to an originazion other than a charitable, etc., originazion described in section 4494(6)(4)(4))? See instructions  (5) Provide for any purpose other than religious, charitable, etc., originazion described in section 4494(6)(4)(4))? See instructions or travelly to children or animals?  (6) Provide for any purpose other than religious, charitable, etc., originazion described in section 4494(6)(4)(4))? See instructions or travelly to children or animals?  (7) Provide for any purpose other than religious, charitable, etc., originazion described in section 45,4456 or in a current notice regarding disaster assistance? See instructions  (8) Provide for any purpose other than religious, charitable in the quality under the exceptions described in Regulations section of a current notice regarding disaster assistance? See instructions  (9) Originazionis relying on a current notice regarding disaster assistance; See instructions  (1) If Yes: Tatach the statement required by Regulations section 53 4945–5(1)  (1) If Yes: Tatach the statement required by Regulations section 53 4945–5(1)  (1) Did the foundation, during the year, receive any junded, directly or indirectly, to pay premiums on a personal benefit contract?  (1) Old the foundation, during the year, receive any junded, directly or indirectly, to pay premiums  on a personal benefit contract?  (2) Old the foundation, during the year, receive any junded, directly or indirectly, to pay premiums  on a personal benefit contract?  (3) A tany time during the tax year, receive any junded, directly or indirectly, to pay premiums  on a personal benefit contract?  (4) Duth the foundation subject to the section 4960 tax on payment(s) of more than \$1,00,000 to 10	5a	During the year did the foundatio	n pay or incur any amount to	·				Yes	N
directly or indirectly, any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an individual for travel, study, or other similar purposes?  (6) Provide for any purpose so, or for the prevention of cruelly to children or animals?  (7) Provide a grant to an organization other than a chambble, etc., organization described in section 4945(d)(4)(4)(7) See instructions  (8) Provide for any purpose so ther than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals?  (8) Provide for any purpose so there than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals?  (9) If any answers is "Yes" to Sal'), does the foundation or animals?  (1) If any animals is "Yes" to Sal'), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  (2) If the animals expenditure responsibility for the grant?  (3) Provide a grant to an organization section 53 945-5(d)  (4) If the foundation, during the year, execute any funds, directly or indirectly, to pay premiums on a personal benefit contract?  (4) Yes X No  (5) If the foundation, during the year, was the foundation a party to a prohibited tax shelter transaction?  (a) At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  (a) At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  (a) At any time during the tax year, was the foundation an aparty to a prohibited tax shelter transaction?  (a) At any time during the tax year, was the foundation and party to a prohibited tax shelter transaction?  (b) If the foundation, during the year,		(1) Carry on propaganda, or other	erwise attempt to influence legislation (se	ction 4945(e))?		Yes X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an individual for travel, study, or other similar purposes?  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of circuity to children or animals?  (6) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of circuity to children or animals?  (6) If any answer is "Yes" to Sa(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53 4495 or in a current notice regarding disaster assistance? See instructions  Organizations relying on a current notice regarding disaster assistance? See instructions  Organizations relying on a current notice regarding disaster assistance? See instructions  N/A Sb.  Organizations relying on a current notice regarding disaster assistance? See instructions  N/A yes No  Organizations relying on a current notice regarding disaster assistance, check here  If "Fes" attach the statement required by Regulations section \$3.4945–5(d)  If "Yes," attach the statement required by Regulations section \$3.4945–5(d)  If "Yes," attach the statement required by Regulations sections \$3.4945–5(d)  If "Yes," attach the statement required by Regulations sections \$3.4945–5(d)  If "Yes," attach the statement required by Regulations sections \$3.4945–5(d)  If "Yes," attach the statement required by Regulations sections \$3.4945–5(d)  If "Yes," attach the statement required by Regulations sections \$3.4945–5(d)  If "Yes," attach the statement required by Regulations sections \$3.4945–5(d)  If "Yes," attach the statement required by Regulations sections \$3.4945–5(d)  If "Yes," attach the statement required by Regulations sections \$3.4945–5(d)  If "Yes," attach the statement required by Regulations sections \$3.4945–5(d)  If "Yes," attach the statement required by Regulations sections \$3.4945–5(d)  If "Yes," a		(2) Influence the outcome of any	y specific public election (see section 495	5), or to carry on,	_				}
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals?  (6) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals?  (7) If yes a station is a section 53 4945 or in a current notice regarding disaster assistance? See instructions  (8) Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions  (9) Organizations relying on a current notice regarding disaster assistance? See instructions  (1) Yes a station the statement required by Regulations section 53 4945–5(d)  (1) Description in the statement required by Regulations section 53 4945–5(d)  (1) Description in the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  (1) The station of the year, receive any premiums, directly or indirectly, to pay premiums on a personal benefit contract?  (1) The station of the foundation during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  (1) The station of the foundation receive any proceeds or have any net income attributable to the transaction?  (2) If Thes's did the foundation receive any proceeds or have any net income attributable to the transaction?  (3) If Thes's did the foundation subject to the section 4960 tax on payment(s) directly and prevage to the section 4960 tax on payment(s) directly and prevage to the section 4960 tax on payment(s) directly and prevage to the foundation managers and their compensation. See instructions.  (4) Name and address  (4) Name and		directly or indirectly, any vote	er registration drive?						l
section 4945(d)(4)(A)? See instructions  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to chidren or animals?  b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 534496 or in a current notice regarding disaster assistance? See instructions  Organizations relying on a current notice regarding disaster assistance? See instructions  Organizations relying on a current notice regarding disaster assistance? See instructions  Organizations relying on a current notice regarding disaster assistance. Ache here  If the answers "Yes" is outsine 54(4), does the foundation of the foundation from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 33 4945–5(d)  Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Organization that the statement required by Regulations section 33 4945–5(d)  Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes" to 5b, file Form 8870  At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  If "Yes" to did the foundation receive any proceeded or have any net income attributable to the transaction?  Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in yes.  N/A  The promise of the foundation of the section 4960 tax on payment(s) of more than \$1,000,000 in yes.  N/A  The promise of the foundation of the section 4960 tax on payment(s) of more than \$1,000,000 in yes.  N/A  The promise of the foundation of the section 4960 tax on payment(s) of more than \$1,000,000 in yes.  If (a) Name and address (a) Name and address (b) Name and address (b) Name and address (c) Organization (c) (d) Organization (e) (e) Or		(3) Provide a grant to an individu	ual for travel, study, or other similar purpo	ses?		Yes X No			
(5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of cruelly to children or animals?  If any answer is "Yes" to \$4(1)—(5), did any of the transactions fail to qualify under the exceptions described in Regulations section \$3.4945 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance. As there  If the answer is "Yes" to question 53.494, does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," statish the statement required by Regulations section 53.4945—5(d)  Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes," did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  If "Yes," did the foundation receive any net income attributable to the transaction?  If "Yes," did the foundation receive any net income attributable to the tr		(4) Provide a grant to an organiz	ation other than a charitable, etc , organiz	zation described in	<del>-</del>				ĺ
purposes, or for the prevention of cruelty to children or animals?  If any answer is 'Yes' to 5a(1)-(6), did any of the transactions fail to qualify under the exceptions described in Regulations section 53(4) does for in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here  If the answers is 'Yes' to question 53(4) does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If 'Yes' attach the statement required by Regulations section 53 4945–5(d)  By the foundation, during the year, peaver any funds, directly or indirectly, to pay premiums on a personal benefit contract?  If 'Yes' to 68, file Form 8870  By the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If 'Yes' to 68, file Form 8870  By the foundation during the year, was the foundation a party to a prohibited tax sheller transaction?  If 'Yes' to 68, file Form 8870  By the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  (a) Name and address  (b) Name and address  (c) Box 2533  CA 31799  O. 00  O.		· ·				Yes X No			l
a If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions  N/A  Sb  Organizations relying on a current notice regarding disaster assistance? See instructions  N/A  Sb  Organizations relying on a current notice regarding disaster assistance? See instructions  N/A  Sb  Organizations relying on a current notice regarding disaster assistance?  If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes" attach the statement required by Regulations section 53 4945–5(d)  Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes" to bit for mast?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  The state of the foundation receive any proceeds or have any net income attributable to the transaction?  N/A  The state of the foundation receive any proceeds or have any net income attributable to the transaction?  N/A  The state of the foundation and the foundation of the transaction?  Yes No  N/A  The state of the foundation receive any proceeds or have any net income attributable to the transaction?  Yes No  N/A  The state of the foundation receive any proceeds or have any net income attributable to the transaction?  Yes No  N/A  The state of the foundation receive any proceeds or have any net income attributable to the transaction?  Yes No  N/A  The state of the foundation receive any proceeds or have any net income attributable to t		(5) Provide for any purpose othe	r than religious, charitable, scientific, liter	ary, or educational		_			l
Regulations section \$3.4945 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions of if the answer is "Yes" to question 54(4) does not say assistance that the statement required by Regulations section \$3.4945–5(d) a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? if "Yes" to 6b, file Form 8870 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction? Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions (c) Compensation of physics benefit phis and directors of the part of the part of the phis of the part of the phis of the phis of the phis of		purposes, or for the prevention	on of cruelty to children or animals?		П	Yes X No			ĺ
Regulations section \$3.4945 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance? See instructions of if the answer is "Yes" to question 54(4) does not say assistance that the statement required by Regulations section \$3.4945–5(d) a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? if "Yes" to 6b, file Form 8870 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction? Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions (c) Compensation of physics benefit phis and directors of the part of the part of the phis of the part of the phis of the phis of the phis of	b	If any answer is "Yes" to 5a(1)-(5	b), did any of the transactions fail to qualif	fy under the exceptions of	described in	_		İ	l
Organizations relying on a current notice regarding disaster assistance, check here  If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grain?  If "Yes," attach the statement required by Regulations section 53 494-5(d) and the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the foundation, during the year, receive any funds, directly or indirectly, on a personal benefit contract?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  At any time during the tax year, was the foundation of the search and the search		•	· •	•		N/A	5b		ĺ
the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53 4945–5(d)  a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes" to 6b, file Form 8870  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?  If "Yes" to 6b, file Form 8870  At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?  If "Yes" to 6b, file Form 8870  At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?  If "Yes I was I was a transaction or the foundation of the foundation of the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachure payment(s) during the year?  Part VIII  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers, and their compensation. See instructions.  COLE FORSYTH  THOMASVILLE  CFO/SEC  O BOX 2533  GA 31799  O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		=				▶ 🗍			
because it maintained expenditure responsibility for the grant?  If Yes, "attach the statement required by Regulations section 53 4945—5(d)  a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Old the foundation, during the year, peave any funds, directly or indirectly, on a personal benefit contract?  Old the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If Yes, "did the foundation is to be file from 8870  a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  If Yes, "attach the statement required by Regulations section 4960 tax on payments," of more than \$1,000,000 in remuneration or excess parachute payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, and foundation managers and their compensation. See instructions  (a) Name and address  (a) Name and address  (a) Name and address  (a) Name and address  (b) Title, and average flowing the year of the paid, she and address of the paid, she and she payments of the paid, she and different compensation.  (b) Title, and average flowing the year of the paid the payments of the paid, she and different compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter "NONE."  (c) Did Compensation of five highest-paid employees pad more than \$50,000  DONE  Compensation of five highest-paid employees pad more than \$50,000  (d) Compensation of five highest-paid employees pad more than \$50,000  (e) Compensation of five highest-paid employees pad more than \$50,000  (e) Compensation of five highest-paid employees pad more than \$50,000  (e) Compensation of five highest-paid employees pad more than \$50,000  (e) Compensation of five highest-pai	С	• • •							1
If "Yes," attach the statement required by Regulations section 53 4945–5(d)  Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  If "Yes to 65, file Form 6870  Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes to 65, file Form 6870  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, and foundation managers and their compensation. See Instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See Instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See Instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See Instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See Instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See Instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See Instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See Instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See Instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See Instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See Instructi	-	·	·		n/a □	Yes No		ĺ	1
a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?    Yes   No		•	•	4)					1
on a personal benefit contract?  Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If 'Yes' 50, file Form 8870  A ray time during the tax year, was the foundation a party to a prohibited tax sheller transaction?  If 'Yes', 'did the foundation receive any proceeds or have any neither attributable to the transaction?  Is the foundation subject to the section 4950 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  Colle Forsyth Thomasville CPO/SEC  DO BOX 2533 GA 31799 0.00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	а	•	· · · · · · · · · · · · · · · · · · ·	•				<b>i</b>	1
Do Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If "Yes" to 6b, file Form 8870 at A any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If "Yes" to 6b, file Form 8870 at A any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  Part VIII  Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  (a) Name and address  (b) Title, and average board provided to position (if not paid, enter-0-)  (c) Compensation  (d) Contributions to employee and more than \$1,000,000 in remuneration of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter  "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average board payment and address of each employee fother than those included on line 1 – see instructions). If none, enter  "NONE."  (d) Compensation  (d) Contributions to employee benefit plan and deferred compensation  (d) Contributions to employee benefit plan and deferred compensation  (e) Compensation  (f) Compensation  (d) Contributions to employee benefit plan and deferred compensation	_		an, receive any rando, andony or mandony	, to pay promisino		Yes X No			ì
If "Yes" to 8b, file Form 8870  a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  b if "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  b is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachite payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  Colle Forsyth Thomasville CFO/SEC  O BOX 2533 GA 31799 0.00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	h	* •	ar nay premiums directly or indirectly or	a nersonal benefit cont		100 [22] 110	6b	i	х
At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  (a) Name and address  (b) Tills, and serage, devoted to position  (find paid, enter -0-)  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation.  (e) Exp. O BOX 2533  (GA 31799  O .00  O .00  CELLY GRIMSLEY  THOMASVILLE  (CEO O .00	•		ar, pay promiting, directly or manestry, on	a poroonal benone con	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1		
If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachule payment(s) of more than \$1,000,000 in remuneration or excess parachule payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  List all officers, directors, trustees, and foundation managers and their compensation.  List all officers, directors, trustees, and foundation managers and their compensation.  List all officers, directors, trustees, foundation Managers, Highly Paid Employees benefit of the paid and everage of the original and efferred devoted to position and the paid of the p	a	·	vas the foundation a party to a prohibited (	tay shelter transaction?		Yes X No			
Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachite payment(s) during the year?  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  (a) Name and address  (a) Name and address  (a) Name and address  (a) Name and address  (b) Tifle, and average hours per week devoted to position  (c) ECOLE FORSYTH  THOMASVILLE  CFO/SEC  DO BOX 2533  GA 31799  O 00  O 0  O 0  O 0  O 0  O 0  O 0							7b		
Part VIII   Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors   List all officers, directors, trustees, and foundation managers and their compensation. See instructions.   (a) Name and address   (b) Title, and average hours per week devoted to position (if in paid, enter 0-)   (e) Exp other compensation (if in paid, ent			•		Stion .	,			
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  (a) Name and address (b) Title, and average hours per week devoted to position  C COLE FORSYTH THOMASVILLE CFO/SEC O BOX 2533 GA 31799 O 0.0  ICHABL A GRIMSLEY THOMASVILLE CEO P.O. BOX 2533 GA 31799 O 0.0  CELLY GRIMSLEY THOMASVILLE DIRECTOR O 0 0 CELLY GRIMSLEY THOMASVILLE DIRECTOR O 0 0 COmpensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  COMPENSATION (c) Compensation  (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee paid more than \$50,000  (d) Explored benefit plants and deferred compensation (e) Explored benefit plants and deferred compensation (e) Explored benefit plants and deferred compensation (e) Explored benefit plants and deferred compensation (e) Explored benefit plants (e) Explored benefi		•	, , , , ,	an \$1,000,000 m		Yes X No			
List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  (a) Name and address (b) Title, and average hours per week devoted to position (f) FORSYTH (a) Name and address (b) Title, and average hours per week devoted to position (f) FORSYTH (f) F	) )			Foundation Man	agers Highly		205		
List all officers, directors, trustees, and foundation managers and their compensation. See instructions.  (a) Name and address  (b) Title, and average devoted to position  (c) Compensation ((f) not pass to employee benefit plans and deferred compensation.  (d) Contributions to employee benefit plans and deferred compensation.  (e) Exp (c) Compensation ((f) not pass to employee benefit plans and deferred compensation.  (e) Compensation ((f) not pass to employee benefit plans and deferred compensation.  (e) Compensation ((f) not pass to employee benefit plans and deferred compensation.  (e) Compensation ((f) not pass to employee paid more than \$50,000  (b) Title, and average hours per week devoted to position (e) Compensation (e) Compensation.  (d) Contributions to employee benefit plans and deferred compensation.  (e) Exp (e) Exp (f) Title, and average hours per week devoted to position (e) Compensation.  (d) Contributions to employee benefit plans and deferred compensation.				, i danaadon man	agoro, mgm,	r ala Employ	000,		
(a) Name and address by the compensation (b) Title, and average hours per week devoted to position (finite plant) and deferred compensation (finite plant) and plant and deferred compensation (finite plant) and finite plant and deferred compensation (finite plant) and finite plant and deferred compensation finite plant and finite plan	L			compensation. See in	structions.				_
(a) Name and address (b) Title, and average hours per week devoted to position (if not paid, enter 40-) (e) EXP (e) EX		,	<u> </u>			(d) Contributions to	Τ		
devoted to position enter -0-) plans and under compensation compensation of the highest-paid employee paid more than \$50,000 enter -0-) plans and under compensation of the highest paid employee paid more than \$50,000 enter -0-) plans and under compensation of the highest plans and deferred compensation of the highest plans and deferred police. The police is a second of the position enter -0-) plans and enter compensation of the position enter -0-) plans and enter compensation of the police police in the police police in the police police plans and deferred compensation of the police police in the police police plans and deferred plans and deferred compensation of the police police plans and deferred plans and deferred plans and deferred compensation of the police plans and deferred		(a) Na	me and address			employee benefit		pense ac	
T COLE FORSYTH  THOMASVILLE P O BOX 2533  GA 31799  O .00  O O  GELLY GRIMSLEY  THOMASVILLE P O BOX 2533  GA 31799  O .00  O O  GELLY GRIMSLEY  THOMASVILLE  DIRECTOR O .00  O O  COmpensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Tille, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Exployee benefit plans and deferred compensation  (o) Exployee benefit plans and deferred compensation  (e) Exployee benefit plans and deferred compensation  (b) Tille, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation		(-,					othe	r allowar	ces
GA 31799 0.00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	r (	OLE FORSYTH	THOMASULLE	CEO/SEC		<u> </u>	<del> </del>		
MICHAEL A GRIMSLEY P.O. BOX 2533 GA 31799 0 000 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				1	, ا		,		
RELLY GRIMSLEY THOMASVILLE DIRECTOR O. 00 O O O O O O O O O O O O O O O O O O					<del> </del>	<u>-</u>	<u> </u>		
EXELLY GRIMSLEY  THOMASVILLE O. BOX 2533  GA 31799  COmpensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Exploited to position  (o) Exploited to position					, ا		,		
Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Exprosition  (o) Exprosition					<u> </u>		1-		
Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter "NONE."  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (a) Exprior other compensation					, ا	,	,		
"NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expension of the compensation  (in) Title, and average hours per week devoted to position  (in) Title, and average hours per week devoted to position  (in) Title, and average hours per week devoted to position  (in) Title, and average hours per week devoted to position  (in) Title, and average hours per week devoted to position  (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Title, and average hours per week devoted to position  (in) Title, and average hours per week devoted to position  (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contribution (in)		. BOX 2333	GR 31/33	0.00		<u> </u>	+		
"NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expension of the compensation  (in) Title, and average hours per week devoted to position  (in) Title, and average hours per week devoted to position  (in) Title, and average hours per week devoted to position  (in) Title, and average hours per week devoted to position  (in) Title, and average hours per week devoted to position  (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Title, and average hours per week devoted to position  (in) Title, and average hours per week devoted to position  (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contributions to employee benefit plans and deferred compensation  (in) Expension (in) Contribution (in)									
(a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expt other		- · ·	aid employees (other than those include	ded on line 1 – see inst	tructions). If nor	ne, enter	<del></del> .		
(a) Name and address of each employee paid more than \$50,000  (b) Title, altit a verage hours per week devoted to position  (c) Compensation  employee benefit plans and deferred compensation  NONE  (a) Expt other	_		<del></del>			(d) Contributions to	Г		
devoted to position plans and objected compensation other compensation of compensation other compensation of		(a) Name and address of each on	nolovee paid more than \$50,000		(c) Compensation	employee benefit		ense ac	
NONE		(a) Name and address of each en	iployee paid more than \$50,000		(c) compensation		othe	r allowan	ces
	101					dompendation	<del>                                     </del>		
al number of other employees paid over \$50,000	ION	E				1			
al number of other employees paid over \$50,000						<del></del>			
tal number of other employees paid over \$50,000						l .			
al number of other employees paid over \$50,000			<del></del>	<del></del>	<del></del>		<del> </del>		
ral number of other employees paid over \$50,000				] ]					
tal number of other employees paid over \$50,000				<del></del>	<del></del>		<del> </del>		
al number of other employees paid over \$50,000						j			
al number of other employees paid over \$50,000							ļ		
al number of other employees paid over \$50,000									
al number of other employees paid over \$50,000									
<u> </u>	al ı	number of other employees paid o	ver \$50,000		<del></del> _		L	0.05	0

Form 990-PF (201	8) 10-1 FOUNDATION INC	59-3789335	Page Page
Part VIII	Information About Officers, Directors, Trustees	s, Foundation Managers, Highly Paid E	Employees,
	and Contractors (continued)		
3 Five highes	t-paid independent contractors for professional services.	See instructions. If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
<del></del>			
•			
Total number of ot	hers receiving over \$50,000 for professional services		<u> </u>
Part IX-A	Summary of Direct Charitable Activities		
	ur largest direct charitable activities during the tax year. Include relevant statistical in beneficiaries served, conferences convened, research papers produced, etc.	information such as the number of	Expenses
1 N/A			
·			
2			
			]
3	<b>,</b>		į
4			
Part IX-B	Summary of Program-Related Investments (se	ee instructions)	<del></del>
	t program-related investments made by the foundation during the tax year on lines	s 1 and 2	Amount
1 N/A	•		
2		· · · · · · · · · · · · · · · · · · ·	
•			
All other program-relate	d investments. See instructions		
3			
		<u> </u>	
		,	i

Total. Add lines 1 through 3

Fori	n 990-PF (2018) 10-1 FOUNDATION INC 59-3789335		Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Forei	gn fo	undations,
	see instructions )		,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	i	
а	Average monthly fair market value of securities	1a	1,721,194
b	Average of monthly cash balances	1b	463,573
С	Fair market value of all other assets (see instructions)	1c	528,083
d	Total (add lines 1a, b, and c)	1d	2,712,850
е	Reduction claimed for blockage or other factors reported on lines 1a and	]	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	2,712,850
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	40,693
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	2,672,157
6	Minimum investment return. Enter 5% of line 5	6	133,608
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	four	
	and certain foreign organizations, check here ▶ and do not complete this part )	,	
1	Minimum investment return from Part X, line 6	1	133,608
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)	1	
С	Add lines 2a and 2b	2c	269
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	133,339
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	133,339
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	133,339
_			
Pa	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	683,568
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	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	683,568
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions	_5	269
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	683,299
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	ation	
	qualifies for the section 4940(e) reduction of tax in those years		

Pa	rt XIII Undistributed Income (see instruction	ons)	T		
		(a)	(b)	(c)	( <b>d)</b> 2018
1	Distributable amount for 2018 from Part XI,	Corpus	Years prior to 2017	2017	
	line 7				133,339
2	Undistributed income, if any, as of the end of 2018				
	Enter amount for 2017 only				
	Total for prior years 20 , 20 , 20				
	Excess distributions carryover, if any, to 2018		′		
	From 2013 178,	072			
	From 2014 242,	678			
	From 2015 353,				
	From 2016 279,				
	From 2017 509,				
	Total of lines 3a through e	1,563,165			
	Qualifying distributions for 2018 from Part XII,		,		
	line 4 > \$683,568				
	Applied to 2017, but not more than line 2a		-		
D	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election	,			
	required – see instructions)				133,339
	Applied to 2018 distributable amount	550,229			
е	Remaining amount distributed out of corpus	550,229			<u></u>
5	Excess distributions carryover applied to 2018				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:	0 112 204			
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,113,394			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b		<del> </del>		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)		_		
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions				
е	Undistributed income for 2017 Subtract line				
	4a from line 2a Taxable amount – see				
	instructions				
f	Undistributed income for 2018 Subtract lines				
	4d and 5 from line 1. This amount must be				_
	distributed in 2019	<u> </u>			0
	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
	Excess distributions carryover from 2013 not				
	applied on line 5 or line 7 (see instructions)	178,072			
	Excess distributions carryover to 2019.	<u> </u>			_
	Subtract lines 7 and 8 from line 6a	1,935,322			
	Analysis of line 9 Excess from 2014 242,	678			
	252				
	070				
	2,000				
	Excess from 2017 509,				
е	Excess from 2018 550,	227		l	5em 990-PF (2018)

_	$\sim$	-3	7	$\sim$	$\sim$	~	~	_
~	u	_ <	•	×	ч	•	٠.	_

/Page 10

P	art XIV · Private Operating For	undations (see II	nstructions and Pa	art VII-A, question	9)			
	1a If the foundation has received a ruling or determination letter that it is a private operating							
	foundation, and the ruling is effective for 2018, enter the date of the ruling							
b								
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		1		
	income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total		
	investment return from Part X for		<del></del>					
	each year listed							
b	85% of line 2a	<del></del>						
c	Qualifying distributions from Part XII,	<del></del>						
•	line 4 for each year listed				1			
d	Amounts included in line 2c not used directly	<del></del>	· · · · · · · · · · · · · · · · · · ·					
•	for active conduct of exempt activities							
е	Qualifying distributions made directly		<del>                                     </del>	/	<del>                                     </del>			
•	for active conduct of exempt activities 1							
	Subtract line 2d from line 2c							
3	Complete 3a, b, or c for the							
•	alternative test relied upon					}		
а	"Assets" alternative test – enter			1				
-	(1) Value of all assets							
	(2) Value of assets qualifying under		<del>                                     </del>	<del></del>	<del> </del>			
	section 4942(j)(3)(B)(i)							
b	"Endowment" alternative test – enter 2/3	· <del></del>						
_	of minimum investment return shown in					,		
	Part X, line 6 for each year listed							
С	"Support" alternative test – enter		<del>                                     </del>			<del></del>		
•	(1) Total support other than gross				1			
	investment income (interest,	/	4					
	dividends, rents, payments on	/		1				
	securities loans (section				ı			
	512(a)(5)), or royalties)							
	(2) Support from general public							
	and 5 or more exempt organizations as provided in							
	section 4942(j)(3)(B)(iii)							
	(3) Largest amount of support from					<del> </del>		
	an exempt organization							
	(4) Gross investment income	/						
Pa	rt XV Supplementary Inform	ation (Complete	this part only if	the foundation ha	d \$5.000 or more	in assets at		
	any time during the ye	· ·	•					
1	Information Regarding Foundation Mai							
а	List any managers of the foundation who	•	e than 2% of the total	contributions received b	by the foundation			
	before the close of any tax year (but only				=			
	N/A	•		. , , , ,	•			
b	List any managers of the foundation who	own 10% or more of t	he stock of a corporat	on (or an equally large	portion of the			
	ownership of a partnership or other entity)		-		•	7		
	N/A		Ţ.					
2	Information Regarding Contribution, G	rant, Gift, Loan, Sch	olarship, etc., Progra	ims:				
	Check here ▶ ☐ If the foundation only	makes contributions t	to preselected charitat	ele organizations and do	oes not accept			
	unsolicited requests for funds. If the found			_				
	complete items 2a, b, c, and d See instru	• •		-				
	The name, address, and telephone number		f the person to whom a	pplications should be a	nddressed			
	MICHAEL A GRIMSLEY		•					
	P.O. BOX 2533 THOMAS	VILLE GA 31	1799					
b	The form in which applications should be s			y should include				
	N/A			,				
	Any submission deadlines							
	N/A							
	Any restrictions or limitations on awards, s	uch as by geographic	cal areas, charitable fie	elds, kinds of institution	s, or other			
	factors	, ggp	,		•			
	N/A							

Part XV Supplementary Information (co. 3 Grants and Contributions Paid During	ontinued)	z Eutura Daymant	<del></del>	
	If recipient is an individual,	,	T	<del></del> _
Recipient	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year	^	,	1	
SEE ATTACHED SCHEDULE				
-				683,56
		<i></i>	1	·
,				
			^	
		,		
	/	,	1	
		1	1	
	,			
•		1		
,				
,	•			
	!			
			1	
٠.			]	
	,			
Total	· · · · · · · · · · · · · · · · · · ·		<b>▶</b> 3a	683,568
b Approved for future payment			<b>P</b> 3a	003,300
N/A				
				,
	,			
		•		
Total	· · · · · · · · · · · · · · · · · · ·		<b>▶</b> 3b	

Part XVI			led business recess	Evaluda	d by cooling 512 512 or 514	<del></del>
J	amounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclusion code	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See instructions)
-	service revenue		<del> </del>	<del> </del>		
		-	<del></del>			
			<del> </del>	<del> </del>	<del></del>	<del></del>
			<del></del>	<del> </del>		
			<del> </del>	<del>                                     </del>	,	
·		-		+		
"	and contracts from government agencies	-	<del> </del>	<del> </del>		
•	ship dues and assessments	-		· · — ·		
	on savings and temporary cash investments		<del> </del>	<del>                                     </del>		1,321
	s and interest from securities			<del>                                     </del>		38,994
	I income or (loss) from real estate			<del> </del>		
	-financed property					<del></del>
	lebt-financed property		<del> </del>		<del></del>	
	I income or (loss) from personal property	- "		<del> </del> -	<del></del>	
	estment income					<del>- ·</del>
	oss) from sales of assets other than inventory		<u> </u>		<del></del>	8,695
	ne or (loss) from special events					
	ofit or (loss) from sales of inventory					<del></del>
11 Other rev	•					
b OTH	ER INCOME			1 1		-1,728
c PRO	SHARES ULTRA GOLD K-1					
d MGD	FUT STRAT ALT K-1					
e						
12 Subtotal	Add columns (b), (d), and (e)		0		0	47,282
13 Total. Add	d line 12, columns (b), (d), and (e)				13	47,282
(See workshe	et in line 13 instructions to verify calculations )					
Part XVI-	B Relationship of Activities to the A	ccomplishm	ent of Exempt Pu	urpose	S	
Line No.	Explain below how each activity for which income	e is reported in c	olumn (e) of Part XVI-	A contrib	uted importantly to the	
	accomplishment of the foundation's exempt purpo					ns )
3	THE MONEY CONTRIBUTED TO					<del> </del>
4	INVESTED IN INTEREST BEA					
8	SECURITIES, AND OTHER IN				OPHY IS THAT	<u>'</u>
11B	ADDITIONAL FUNDS WILL BE		THROUGH I			
11C	DIVIDEND INCOME, AND APP	PRECIATIO	ON OF THE F	OUND	ATION	
11D	INVESTMENTS, PROVIDING A					
	FOUNDATION TO CONTRIBUTE	TO WOR	THY NON PRO	ETT (	CAUSES.	
<del></del>	<del></del>	·				<del></del>
	<del> </del>	<del></del>	<del> </del>		<del></del>	<del></del>
				·· <del>·</del>		
	<del></del>					
	<del>                                     </del>					
					<del></del>	
	<del></del>		<del></del>			
	<del> </del>	. — — -	<del></del>		<del></del>	
<del></del>	<del>                                     </del>	<del></del>		·	<del></del>	
			<del></del>		<del></del>	<del></del>
		·			<del></del>	
	<del>                                     </del>			<u> </u>		
	1					

		<b>Organizations</b>									
1 D	old the orga	anization directly or in	directly enga	age in any of the follo	wing with any	other organization de	scribed		.	Yes	No
ın	section 5	01(c) (other than sec	ction 501(c)(3	B) organizations) or in	section 527,	relating to political			`		
OI	rganization	าร?									ĺ
a Tr	ransfers fr	om the reporting foun	idation to a n	oncharitable exempt	organization of	of					
(1	1) Cash								1a(1)		X
(2	2) Other a	ssets							1a(2)		X
bО	ther transa	actions									
(1	I) Sales o	f assets to a nonchar	ıtable exemp	t organization					1b(1)		X
(2	2) Purchas	ses of assets from a n	noncharitable	e exempt organization	1				1b(2)		X
(3	B) Rental o	of facilities, equipmen	it, or other as	sets					1b(3)		X
(4	l) Reimbu	rsement arrangement	ts						1b(4)		X
(5	) Loans o	r loan guarantees							1b(5)		X
(6	) Perform	ance of services or m	nembership o	or fundraising solicita	tions				1b(6)		X
c Si	haring of fa	acilities, equipment, n	nailing lists, i	other assets, or paid	employees				1c		X
	_	er to any of the above	<del>-</del>			mn (b) should always	show the f	aır market	·		
		goods, other assets,		· -							
		transaction or sharing									
	Line no	(b) Amount involved		ne of noncharitable exempt				ransactions, and share	ng arrangeme	nts	
N/A									<del></del>		
			<del></del>								
		<del></del>	<u> </u>	<del></del>		<del></del>			-		
		<del></del>		<del></del>				<del></del>			
			<del>                                     </del>						<del></del>		
			<del> </del>				·				
			<del> </del>								
			<del> </del>								
			<del> </del>		<del></del>	·					
			<del> </del>			<del></del>					
			<del> </del> -								
			<del> </del>								
		<del></del>	<del></del>					<del></del>			
	- 1		<u></u>								
		<del></del>									
			<u> </u>								
		ation directly or indirec	-			exempt organization	3				
des	scribed in	section 501(c) (other	than section			exempt organization	5		Ye	s X	No
des	scribed in	-	than section			exempt organization	S		Ye	s X	No
de: b If "	scribed in 'Yes," com	section 501(c) (other	than section		ion 527?	exempt organization		otion of relationship	Ye	s <b>X</b>	No
des	scribed in 'Yes," com	section 501(c) (other plete the following sc	than section	501(c)(3)) or in sect	ion 527?	exempt organization		otion of relationship	Ye	s <b>X</b>	No
de: b If "	scribed in 'Yes," com	section 501(c) (other plete the following sc	than section	501(c)(3)) or in sect	ion 527?	exempt organization		otion of relationship	Ye	s <b>X</b>	No
de: b If "	scribed in 'Yes," com	section 501(c) (other plete the following sc	than section	501(c)(3)) or in sect	ion 527?	exempt organization:		otion of relationship	Ye	s X	No
de: b If "	scribed in 'Yes," com	section 501(c) (other plete the following sc	than section	501(c)(3)) or in sect	ion 527?	exempt organization:		otion of relationship	Ye	s <b>X</b>	No
de: b If "	scribed in 'Yes," com	section 501(c) (other plete the following sc	than section	501(c)(3)) or in sect	ion 527?	exempt organization:		otion of relationship	Ye	s X	No
de: b If "	Scribed in 'Yes," com (a)  A	section 501(c) (other inplete the following sc) Name of organization	than section shedule	(b) Type of orga	nization	dules and statements, and	(c) Descrip			s <b>X</b>	No
de: b If "	Scribed in 'Yes," com (a)  A	section 501(c) (other inplete the following sc	than section shedule	(b) Type of orga	nization	dules and statements, and	(c) Descrip	my knowledge and be			No
des b If " N/A	Scribed in 'Yes," com (a)  A	section 501(c) (other inplete the following sc) Name of organization	than section shedule	(b) Type of orga	nization	dules and statements, and	(c) Descrip	my knowledge and bo May the IRS with the prep	elief, it is true, discuss this ret arer shown bel	um	,
de: b If "	Scribed in 'Yes," com (a)  A	section 501(c) (other inplete the following sc) Name of organization	than section shedule	(b) Type of orga	nization	dules and statements, and	(c) Descrip	my knowledge and be	elief, it is true, discuss this ret arer shown bel	um	No
b If " N/2	Scribed in 'Yes," com (a)  A	section 501(c) (other inplete the following sc) Name of organization	than section shedule	(b) Type of orga	nization	dules and statements, and	(c) Descrip	my knowledge and bo May the IRS with the prep	elief, it is true, discuss this ret arer shown bel	um	,
b If " N/2	Yes," com (a)  A  Under penacorrect, and	section 501(c) (other inplete the following sc) Name of organization	than section shedule	(b) Type of orga	nization	dules and statements, and	(c) Descrip	my knowledge and bo May the IRS with the prep	elief, it is true, discuss this ret arer shown bel	um	,
b If " N/2	Yes," com (a)  A  Under pena correct, and	section 501(c) (other inplete the following sc ) Name of organization	than section shedule	(b) Type of orga	nization  ccompanying sche all information of v	dules and statements, and which preparer has any kno	(c) Description to the best of wiedge	my knowledge and but May the IRS with the prep See instruction	elief, it is true, discuss this ret arer shown bel	um ow? 'es	,
b If " N/2	Yes," com (a)  A  Under pena correct, and	section 501(c) (other inplete the following sc ) Name of organization	than section shedule	(b) Type of orga	nization	dules and statements, and which preparer has any kno	(c) Description to the best of wiedge	my knowledge and bo May the IRS with the prep	elief, it is true, discuss this ret arer shown bel ons Y	urn ow? es	No
des b If " N/A	Correct, and Signature Print/Type	section 501(c) (other aplete the following sc) Name of organization  alties of perjury, declare to a complete Declaration of the perjury of officer or trustee the preparer's name	than section thedule	(b) Type of orga	nization  ccompanying sche all information of v	dules and statements, and which preparer has any kno	to the best of wledge  CEO Title	my knowledge and be May the IRS with the prep See instruction	elief, it is true, discuss this ret arer shown bell ons Y	um ow? 'es	No
b If " N/2	Under penacorrect, and	section 501(c) (other replete the following sc ) Name of organization  alties of perjury, declare to discomplete. Declaration of )  ure of officer or trustee. The preparer's name.	than section the dule	(b) Type of orga  (b) Type of orga  deathis return, including achan taxpayer) is based on	nization  ccompanying sche all information of vince all parer's signature.	dules and statements, and which preparer has any kno	(c) Description to the best of wiedge	my knowledge and be May the IRS with the prep See instruction	elief, it is true, discuss this ret arer shown belons Y	um 'es  Check  self-emple	No
Sign Here	Under penacorrect, and  Print/Type  GEORG	section 501(c) (other inplete the following so in plete of organization of incomplete declaration of incomplete declaratio	than section the dule that I have examinately the parer to ther the section of th	(b) Type of orga  (b) Type of orga  (b) Type of orga  ned this return, including an han taxpayer) is based on	companying sche all information of value of valu	dules and statements, and which preparer has any kno	to the best of wledge  CEO Title	May the IRS with the prep See instruction  Date of the IRS with the prep See instruction in the IRS with the prep See instruction in the IRS with th	elief, it is true, discuss this ret arer shown belons  Y 12/19 00141	um ow? es  Check  self-emple	No If
Sign Here	A  Under pena correct, and  Signate  Print/Type  GEORG.	section 501(c) (other inplete the following sc.) Name of organization  salties of perjury. Negate in discomplete Declaration of the preparer's name  E. F. GRIMSLES  me. GRIMS  GRIMS  1427	than section the dule that I have examinately the parer to ther the section of th	(b) Type of orga  (b) Type of orga  ned this return, including at han taxpayer) is based on   ID COMPANY,  ONT DRIVE E	nization  companying sche all information of value and parer's signature CPA S. AST, See AST,	dules and statements, and which preparer has any kno	to the best of wledge  CEO Title	my knowledge and be May the IRS with the prep See instruction  Dat  PTIN P Firm's EIN ▶ 20	elief, it is true, discuss this ret arer shown belons Y	um Dw? Des  Description Check  Self-emplo 559	No If I loyed

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

10-1 FOUNDA:	TION INC 59-37893.	35
Organization type (check	k 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	
	<u>-</u>	
• •	n is covered by the <b>General Rule</b> or a <b>Special Rule</b> . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See	
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 y or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributions.	
Special Rules		
regulations under s	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% support test of the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line and that received from any one contributor, during the year, total contributions of the greater of (1) of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	
contributor, during literary, or education	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one in the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, onal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering) or instead of the contributor name and address), II, and III	٩
contributor, during contributions totale during the year for General Rule appl	in described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, contributions exclusively for religious, charitable, etc., purposes, but no such ed more than \$1,000. If this box is checked, enter here the total contributions that were received or an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the object to this organization because it received nonexclusively religious, charitable, etc., contributions more during the year.	
990-EZ, or 990-PF), but it r	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 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 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

Name of organization

10-1 FOUNDATION INC

Employer identification number

59-3789335 Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (b) (c) (d) (a) No. Name, address, and ZIP + 4 Total contributions Type of contribution 1 KELLY B GRIMSLEY Person P.O. BOX 2533 Payroli 170,000 Noncash GA 31799 THOMASVILLE (Complete Part II for noncash contributions) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) Total contributions Type of contribution No Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions) (c) (b) (d) (a) Type of contribution No Name, address, and ZIP + 4 Total contributions Person Payroll \$ Noncash (Complete Part II for ... noncash contributions) (c) (d) (a) (b) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll \$ Noncash (Complete Part II for noncash contributions)

Depreciation Net Investment -1,728 -1,728 Adjusted Income Net Fet Ś Ś Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets Statement 2 - Form 990-PF, Part I, Line 11 - Other Income Expense 9,146 9,146 S -1,728 -1,728Revenue per Investment 336 160,111 38,076 291,205 534,688 44,960 Federal Statements Books Net Cost 160,056 \$ PURCHASE Received 287,104 PURCHASE PURCHASE PURCHASE PURCHASE How 37,146 44,944 529,250 9,146 9,146 Price Sale Total Date Sold Description Acquired Date Description PUBLICLY TRADED SECURITIES PUBLICLY TRADED SECURITIES PUBLICLY TRADED SECURITIES PUBLICLY TRADED SECURITIES 10F 10-1 FOUNDATION INC PROSHARES ULTRA GOLD K-1 Description FYE: 12/31/2018 Whom Sold OTHER INCOME TOTAL . 59-3789335 TOTAL ACCOUNTING TOTAL

-336

-4,101

-5,438

Adjusted Net

Income

Charitable Purpose

-55

S

Gain / Loss

Net

-16

-930

Page 1

10F 10-1 FOUNDATION INC 59-3789335 FYE: 12/31/2018	Federal Statements	Page 2
St	Statement 4 - Form 990-PF, Part I, Line 16c - Other Professional Fees	
Description INVESTMENT FEES TOTAL	Total         Investment         Adjusted           \$ 12,575         \$ 12,575         \$           \$ 12,575         \$ 12,575         \$	Charitable Purpose
	Statement 5 - Form 990-PF, Part I, Line 18 - Taxes	
Description EXCISE TAXES TOTAL	Net         Adjusted Net           \$         39         \$	Charitable Purpose
	Statement 6 - Form 990-PF, Part I, Line 23 - Other Expenses	,
Description	Net Adjusted Total Investment Net	Charitable Purpose
EXPENSES MISCELLANEOUS TOTAL	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	
State	Statement 7 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments	
MORGAN STANLEY STOCK TOTAL	Beginning of Year of Year         End of Pear Year         Basis of Valuation cost           \$ 402,272         \$ 466,911         \$ 5           \$ 402,272         \$ 466,911         \$ 5	Fair Market Value 550, 060 550, 060
		4-7

10F 10-1 FOUNDATION INC 59-3789335 FYE: 12/31/2018	Federal Statements	ements		Page 3
Statement 8 - Form 9	90-PF, Part II,	Line 13 - Other Investments	tments	,
Description AIP GLOBAL MORGAN STANLEY MUTUAL FUNDS E*TRADE PROSHARES_ULTRA GOLD E*TRADE SPDR GOLD TR TOTAL	Beginning of Year \$ 304,660 960,184 4,208 16,190 \$ 1,285,242	Fnd of Year \$     872,343 3,901 16,190 \$     892,434	Basis of Valuation COST COST COST COST COST	Fair Market  Value  \$ 889,296 3,741 12,125 \$ 905,162
Statement 9 - Form 990-PF	m 990-PF, Part II, Line 14	4 - Land, Building, and Equipment	nd Equipment	
Description JUBILATIÓN LOT 9 TOTAL	Beginning Net Book \$ 1,272,638 \$ 1,272,638	End Cost / Basis \$ 1,278,300 \$ 1,278,300	End Accumulated Depreciation	Net FMV \$ 500,000
,				
·				
			,	6-8

## `10-1 Foundation, Inc. FEI 59-3789335 Charitable Contributions Calendar Year 2018

## Page 11, Part IV, Attached Schedule

Frontier Fellowship	324,000
First Presbyterian Church Thomasville	40,815
Christian Outreach Ministries	40,000
Sacred Road Ministries	36,570
Life 2 Life/Christian Business Men's Connection	27,000
Young Life Thomas County	21,250
Messiah for Israel Ministries	18,000
Rivertown Community Church	15,000
Healing for the Nations	14,000
Joshua's Promise	12,200
Larry Nunnally Ministries	12,000
Next Level Training and Development	12,000
Goalline Ministries	11,858 <sup>.</sup>
Legacy Community Academy	10,500
Brookwood School	10,000
Cup of Joy	10,000
Inside Out Ministries	10,000
Thomas University	8,000
Christian Campus Fellowship/Georgia Tech	6,500
Frontiers	. 6,000
Intervarsity Christian Fellowship	6,000
Resurrection Brooklyn Heights	6,000
Thy Kingdom Comes Ministry	5,000
Reformed University Fellowship	4,500
Stonebridge Bible Church	4,500
Fellowship of Christian Athletes	3,300
Hamilton Mill Christian Church	3,000
Pregnancy Center of Southwest Georgia	1,200
Archbold Foundation	1,000
Thomasville City Schools Drama Department	1,000
Thomasville Music and Drama Troupe	800
Community Transformation, Inc.	500
Harper Elementary School	375
Celebration Church	250
Unite for Sight	250
Tall Timbers	200

683,568