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Form 990-PF

Department of the Treasury
Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

2018

Open to Public Inspection

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation
THE WEST END HOME FOUNDATION

Number and street (or P O box number if mail is not delivered to street address)
109 KENNER AVE SUITE 202

City or town, state or province, country, and ZIP or foreign postal code
NASHVILLE, TN 37205

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

H Check type of organization

☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 40,637,169

J Accounting method

☐ Cash

☒ Accrual

☐ Other (specify) (Part I, column (d) must be on cash basis)

A Employer identification number
62-0516508

B Telephone number (see instructions)
(615) 383-1395

C If exemption application is pending, check here

D 1. Foreign organizations, check here

2 Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	138,081		
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B			
	3 Interest on savings and temporary cash investments			
	4 Dividends and interest from securities	921,957	921,957	921,957
	5a Gross rents			
	b Net rental income or (loss)			
	6a Net gain or (loss) from sale of assets not on line 10	1,056,543		
	b Gross sales price for all assets on line 6a			
		2,835,274		
	7 Capital gain net income (from Part IV, line 2)		1,056,543	
	8 Net short-term capital gain			197,396
	9 Income modifications			
Operating and Administrative Expenses	10a Gross sales less returns and allowances			
	b Less Cost of goods sold			
	c Gross profit or (loss) (attach schedule)			
	11 Other income (attach schedule)	2,022		2,022
	12 Total. Add lines 1 through 11	2,118,603	1,978,500	1,121,375
	13 Compensation of officers, directors, trustees, etc	118,711		117,476
	14 Other employee salaries and wages	58,259		57,763
	15 Pension plans, employee benefits	19,712		20,278
	16a Legal fees (attach schedule)	1,444		1,444
	b Accounting fees (attach schedule)	27,975	12,750	15,225
	c Other professional fees (attach schedule)	74,429	63,357	63,357
	17 Interest			
	18 Taxes (attach schedule) (see instructions)	19,195		240
	19 Depreciation (attach schedule) and depletion	1,903		
	20 Occupancy	38,848		35,958
	21 Travel, conferences, and meetings			
	22 Printing and publications			
23 Other expenses (attach schedule)	65,116	6,921	6,921	
24 Total operating and administrative expenses. Add lines 13 through 23	425,592	83,028	70,278	
25 Contributions, gifts, grants paid	2,010,000		1,678,000	
26 Total expenses and disbursements. Add lines 24 and 25	2,435,592	83,028	70,278	
	27 Subtract line 26 from line 12			
	a Excess of revenue over expenses and disbursements	-316,989		
	b Net investment income (if negative, enter -0-)		1,895,472	
c Adjusted net income (if negative, enter -0-)			1,051,097	

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2018)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing				
	2 Savings and temporary cash investments		1,903,339	2,351,938	2,351,938
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____		101,184		
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges			5,109	5,109
	10a Investments—U S and state government obligations (attach schedule)				
	b Investments—corporate stock (attach schedule)				
	c Investments—corporate bonds (attach schedule)				
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
	12 Investments—mortgage loans				
	13 Investments—other (attach schedule)		42,706,339	38,200,296	38,200,296
	14 Land, buildings, and equipment basis ▶ _____ 30,897 Less accumulated depreciation (attach schedule) ▶ 19,424		13,377	11,473	
	15 Other assets (describe ▶ _____)			79,826	79,826
	16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)		44,724,239	40,648,642	40,637,169
Liabilities	17 Accounts payable and accrued expenses			1,410	
	18 Grants payable			2,000,000	
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable (attach schedule)				
	22 Other liabilities (describe ▶ _____)		2,122	3,286	
	23 Total liabilities (add lines 17 through 22)		2,122	2,004,696	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted		43,894,713	37,884,082	
	25 Temporarily restricted				
	26 Permanently restricted		827,404	759,864	
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds				
	28 Paid-in or capital surplus, or land, bldg , and equipment fund				
	29 Retained earnings, accumulated income, endowment, or other funds				
	30 Total net assets or fund balances (see instructions)		44,722,117	38,643,946	
	31 Total liabilities and net assets/fund balances (see instructions) .		44,724,239	40,648,642	

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	44,722,117
2 Enter amount from Part I, line 27a	2	-316,989
3 Other increases not included in line 2 (itemize) ▶ _____	3	
4 Add lines 1, 2, and 3	4	44,405,128
5 Decreases not included in line 2 (itemize) ▶ _____	5	5,761,182
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	38,643,946

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a VANGUARD LT GAIN	P		
b BNY MELLON ST GAIN	P		
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 2,048,490		1,778,731	269,759
b 197,396			197,396
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			269,759
b			197,396
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	1,056,543
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	197,396

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	1,660,724	41,583,112	0 039937
2016	2,041,657	38,582,085	0 052917
2015	1,940,001	40,417,860	0 047999
2014	2,300,609	42,259,981	0 054439
2013	1,368,863	41,088,444	0 033315

2 Total of line 1, column (d)	2	0 228607
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	3	0 045721
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	42,328,733
5 Multiply line 4 by line 3	5	1,935,312
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	18,955
7 Add lines 5 and 6	7	1,954,267
8 Enter qualifying distributions from Part XII, line 4	8	1,994,337

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part 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 <input type="checkbox"/> 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 here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	18,955
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	18,955
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	18,955
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	98,756
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	98,756
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶	10	79,801
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 79,801 Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). 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	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
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 ▶ \$ _____		
e 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? If "Yes," attach a detailed description of the activities	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	Yes
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5	No
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	Yes
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	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ TN _____		
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	Yes
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 the instructions for Part XIV. If "Yes," complete Part XIV	9	No
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WESTENDHOMEFOUNDATION.ORG	13	Yes	
14	The books are in care of DIMETA SMITH KNIGHT Telephone no (615) 383-1395			

Located at **109 KENNER AVE SUITE 202 NASHVILLE TN** ZIP+4 **37205**

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶	16	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
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. Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to		Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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 53.4945 or in a current notice regarding disaster assistance? See instructions.		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input checked="" type="checkbox"/>		
c	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)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 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) Expense account, other allowances
CINDY DICKENSON 7355 NORTHWEST HWY FAIRVIEW, TN 37062	ADMIN/TECH M 40 00	58,259	2,234	
Total number of other employees paid over \$50,000.				<input checked="" type="checkbox"/>

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-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		
Total number of others receiving over \$50,000 for professional services. ►		

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 THE WEST END HOME FOUNDATION FUNCTIONS AS A GRANT- MAKING FOUNDATION BY GRANTING MONIES TO NONPROFIT ORGANIZATIONS TO CARRY OUT CHARITABLE CAUSES	1,994,337
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	42,649,488
b	Average of monthly cash balances.	1b	323,845
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	42,973,333
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	42,973,333
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	644,600
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	42,328,733
6	Minimum investment return. Enter 5% of line 5.	6	2,116,437

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	2,116,437
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	18,955
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	18,955
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	2,097,482
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	2,097,482
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	2,097,482

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	1,994,337
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		
a	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	1,994,337
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	18,955
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,975,382

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				2,097,482
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			1,720,844	
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2018				
a From 2013.				
b From 2014.				
c From 2015.				
d From 2016.				
e From 2017.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 1,994,337				
a Applied to 2017, but not more than line 2a			1,720,844	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2018 distributable amount.				273,493
e Remaining amount distributed out of corpus				
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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e 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				1,823,989
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2014.				
b Excess from 2015.				
c Excess from 2016.				
d Excess from 2017.				
e Excess from 2018.				

Part XIV Private Operating Foundations (see instructions and Part 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 Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

Part XV	
1 Information Regarding Foundation Managers:	
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here <input type="checkbox"/> if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.	
a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed DIANNE OLIVER 109 KENNER AVENUE SUITE 202 NASHVILLE, TN 37205 (615) 383-1395 DIANNE.OLIVER@WESTENDHOMEFOUNDATION.ORG	
b The form in which applications should be submitted and information and materials they should include SEE LINE 2A	
c Any submission deadlines SEE LINE 2A	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors SEE LINE 2A	

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total ▶ 3a				
b <i>Approved for future payment</i> See Additional Data Table				
Total ▶ 3b				

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities. . . .			14	921,957	
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory					1,056,543
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a BOOK SALES _____			41	220	
b OTHER INCOME _____			1	1,802	
c _____					
d _____					
e _____					
12 Subtotal Add columns (b), (d), and (e). .				923,979	1,056,543
13 Total. Add line 12, columns (b), (d), and (e).			13		1,980,522

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here	*****	2019-08-07	*****	May the IRS discuss this return with the preparer shown below? (see instr.)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee	Date	Title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	TYSON JONES CPA		2019-10-17		P01809536
	Firm's name ▶ GRANNIS & ASSOCIATES PC				Firm's EIN ▶ 20-0188015
Firm's address ▶ 515 W BURTON ST MURFREESBORO, TN 371303549					Phone no (615) 895-1040

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
DIANNE OLIVER	EXECUTIVE DI 40 00	118,711	3,374	600
5736 KNOB RD NASHVILLE, TN 37209				
MARGARET SMITH	PRESIDENT 10 00	0	0	0
3421 HAMPTON AVE NASHVILLE, TN 37215				
CAROLINE SHOCKLEY	VICE PRESIDE 5 00	0	0	0
2413 FAIRFAX AVE NASHVILLE, TN 37212				
MARGARET C CRAIG	TREASURER 10 00	0	0	0
4525 HARDING ROAD STE 300 NASHVILLE, TN 37205				
MARIBETH FARRINGER	SECRETARY 5 00	0	0	0
243 HAVERFORD AVE NASHVILLE, TN 37205				
KIM HARDIN	PAST PRESIDE 1 00	0	0	0
5912 ROBERT E LEE DR FOREST HILLS, TN 37215				
LAURA BROWN	BOARD MEMBER 1 00	0	0	0
1006 HARWICK DRIVE FRANKLIN, TN 37067				
ANNE CARGILE	BOARD MEMBER 1 00	0	0	0
1600 DIVISION STREET SUITE 700 NASHVILLE, TN 37203				
TANZA FARR	BOARD MEMBER 1 00	0	0	0
1607 LINDEN AVENUE GOODLETTSVILLE, TN 37072				
KELLY GRAHAM	BOARD MEMBER 1 00	0	0	0
3102 WEST END AVE SUITE 750 NASHVILLE, TN 37203				
PAULA HUGHEY	BOARD MEMBER 1 00	0	0	0
5120 BOXCROFT PL NASHVILLE, TN 37205				
SUSAN KAESTNER	BOARD MEMBER 1 00	0	0	0
3210 DEL RIO PIKE FRANKLIN, TN 37069				
LYNN LASSITER KENDRICK	BOARD MEMBER 1 00	0	0	0
2324 GOLF CLUB LANE NASHVILLE, TN 37215				
DIMETA SMITH KNIGHT	TREASURER 1 00	0	0	0
109 KENNER AVE SUITE 202 NASHVILLE, TN 37205				
VANITA LYTLE-SHERRILL	BOARD MEMBER 1 00	0	0	0
1505 JOE PYRON DRIVE MADISON, TN 37115				

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ARIE NETTLES 605 BOWLING AVE NASHVILLE, TN 37215	BOARD MEMBER 1 00	0	0	0
SALLIE NORTON 4213 SNEED RD NASHVILLE, TN 37215				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BETHLEHEM CENTERS 1417 CHARLOTTE AVE NASHVILLE, TN 37203			GRANT DISTRIBUTION	70,000
CATHOLIC CHARITIES OF TN INC 2806 MCGAVOCK PIKE NASHVILLE, TN 37214			GRANT DISTRIBUTION	30,000
CEDAR SENIORS INC 226 UNIVERSITY AVENUE LEBANON, TN 37087			GRANT DISTRIBUTION	20,000
Total ▶ 3a				1,678,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COMMUNITY HELPERS INC 1020 NORTH HIGHLAND AVE SUITE D MURFREESBORO, TN 37130			GRANT DISTRIBUTION	12,000
COMMUNITY RESOURCE CENTER 218 OMOHUNDRO PLACE NASHVILLE, TN 37120			GRANT DISTRIBUTION	5,000
COUNCIL ON AGING 95 WHITE BRIDGE RD SUITE 114 NASHVILLE, TN 37205			GRANT DISTRIBUTION	85,000
Total ▶ 3a				1,678,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FAITH FAMILY MEDICAL CENTER 326 21ST AVE NORTH NASHVILLE, TN 37203			GRANT DISTRIBUTION	60,000
FRIENDS IN GENERAL INC 1818 ALBION ST NASHVILLE, TN 37208			GRANT DISTRIBUTION	40,000
INSIGHT COUNSELING CENTERS 100 VINE COURT NASHVILLE, TN 37205			GRANT DISTRIBUTION	10,000
Total ▶ 3a				1,678,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
INTERFAITH DENTAL CLINIC 600 HILL AVE SUITE 101 NASHVILLE, TN 37210			GRANT DISTRIBUTION	85,000
LEBANON SENIOR CITIZENS CENTER 670 COLES FERRY PIKE LEBANON, TN 37087			GRANT DISTRIBUTION	50,000
MARTHA O'BRYAN CENTER 711 SOUTH 7TH STREET NASHVILLE, TN 37205			GRANT DISTRIBUTION	50,000
Total ► 3a				1,678,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MATTHEW WALKER COMPREHENSIVE HEALTH 1035 14TH AVENUE NORTH NASHVILLE, TN 37208			GRANT DISTRIBUTION	75,000
MENTAL HEATLH ASSOCIATION OF MID TN 446 METROPLEX DRIVE SUITE A-224 NASHVILLE, TN 37211			GRANT DISTRIBUTION	30,000
MID-CUMBERLAND HUMAN RESOURCE AGENC 1101 KERMIT DR SUITE 300 NASHVILLE, TN 37217			GRANT DISTRIBUTION	25,000
Total			3a	1,678,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MUSIC FOR SENIORS161 RAINS AVE NASHVILLE, TN 37203			GRANT DISTRIBUTION	5,000
NASHVILLE FOOD PROJECT 3605 HILLSBORO PIKE NASHVILLE, TN 37215			GRANT DISTRIBUTION	45,000
NASHVILLE PUBLIC LIBRARY FOUNDATION 615 CHURCH STREET NASHVILLE, TN 37219			GRANT DISTRIBUTION	45,000
Total ▶ 3a				1,678,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NASHVILLE PUBLIC TELEVISION 161 RAINS AVE NASHVILLE, TN 37203			GRANT DISTRIBUTION	90,000
NATIONS MINISTRY CENTER PO BOX 128154 NASHVILLE, TN 37212			GRANT DISTRIBUTION	25,000
NEEDLINK NASHVILLE 1600-56TH AVENUE NORTH NASHVILLE, TN 37209			GRANT DISTRIBUTION	20,000
Total ▶ 3a				1,678,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ROOFTOP NASHVILLE 108 7TH AVENUE SOUTH NASHVILLE, TN 37203			GRANT DISTRIBUTION	5,000
ROOM IN THE INN INCPO BOX 25309 NASHVILLE, TN 37202			GRANT DISTRIBUTION	17,500
SENIOR CITIZENS INC DBA FIFTYFORWARD174 RAINS AVE NASHVILLE, TN 37203			GRANT DISTRIBUTION	160,000
Total ▶ 3a				1,678,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SENIOR RIDE NASHVILLE 95 WHITE BRIDGE RD SUITE 114 NASHVILLE, TN 37205			GRANT DISTRIBUTION	80,000
SILOAM FAMILY HEALTH CENTER 820 GALE LN NASHVILLE, TN 37204			GRANT DISTRIBUTION	100,000
ST LUKE'S COMMUNITY HOUSE 5601 NEW YORK AVE NASHVILLE, TN 37209			GRANT DISTRIBUTION	65,000
Total ▶ 3a				1,678,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TENNESSEE JUSTICE CENTER 211 7TH AVE N SUITE 100 NASHVILLE, TN 37219			GRANT DISTRIBUTION	50,000
TENNESSEE KIDNEY FOUNDATION 37 PEABODY STREET SUITE 206 NASHVILLE, TN 37210			GRANT DISTRIBUTION	31,500
TENNESSEE RESPITE COALITION 2200 21ST AVE SOUTH SUITE 310 NASHVILLE, TN 37212			GRANT DISTRIBUTION	38,000
Total			▶ 3a	1,678,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CENTER FOR NONPROFIT MANAGEMENT 37 PEABODY STREET SUITE 201 NASHVILLE, TN 37210			GRANT DISTRIBUTION	10,000
VANDERBILT UNIVERSITY 2301 VANDERBILT PLACE NASHVILLE, TN 372407749			GRANT DISTRIBUTION	49,000
WESTMINSTER HOME CONNECTION 3900 WEST END AVENUE NASHVILLE, TN 37205			GRANT DISTRIBUTION	190,000
Total ▶ 3a				1,678,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
YOU HAVE THE POWER KNOW HOW TO USE 2401 WHITE AVENUE NASHVILLE, TN 37204			GRANT DISTRIBUTION	5,000
Total ▶ 3a				1,678,000

TY 2018 Accounting Fees Schedule**Name:** THE WEST END HOME FOUNDATION**EIN:** 62-0516508

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTANTS - AUDIT/TAX	25,500	12,750		12,750
ACCOUNTANTS - BOOKKEEPING	2,475			2,475

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2018 Depreciation Schedule

Name: THE WEST END HOME FOUNDATION

EIN: 62-0516508

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
1 ORIENTAL RUGS	1992-03-31	2,500	2,500	S/L	7 0000				
DESK	1985-02-21	88	79	S/L	10 0000				
3 - PAINTINGS	1988-12-31	300	300	S/L	10 0000				
(10) DINING ROOM CHAIRS	1989-04-30	4,452	4,452	S/L	10 0000				
2 CHAIRS - REUPHOLSTERED	1989-12-01	1,260	1,260	S/L	10 0000				
4 PICTURES	1991-05-31	125	125	S/L	7 0000				
TABLE	2007-12-07	4,078	4,078	S/L	7 0000				
COMPUTER W/ PRINTER	2009-02-18	1,117	987	S/L	10 0000	112			
OFFICE CREDENZA	2011-07-14	525	341	S/L	10 0000	53			
(2) HERMAN MILLER OFFICE CHAIRS	2012-01-10	655	393	S/L	10 0000	66			
ANTIQUE WALNUT 30" ROUND TABLE BREAK ROOM	2012-01-10	337	289	S/L	7 0000	48			
HP OFFICE COMPUTER	2012-01-17	1,136	672	S/L	10 0000	114			
MILANO2 72WX24D LH SINGLE PEDESTAL CRENDENZA	2016-01-13	679	194	S/L	7 0000	97			
MILANO2 72WX30D UNIVERSAL FREESTANDING PENINS	2016-01-13	698	200	S/L	7 0000	99			
ONE TOUCH TABLE W/ ELECTRICAL	2016-08-24	532	101	S/L	7 0000	76			
BUFFET HT CRENDENZAALIMO25568	2016-08-24	1,026	196	S/L	7 0000	146			
(2) TAYCO GO TABLE W ELEC, DATA 28X72	2016-11-14	1,208	201	S/L	7 0000	173			
COMPUTER (AMAZON)	2016-01-22	1,039	398	S/L	5 0000	208			
OPTOMA HD141X 1080P 3DDL HOME THEATER PROJEC	2016-06-30	600	129	S/L	7 0000	85			
LEASEHOLD IMPROVEMENTS	2016-12-30	7,795	520	S/L	15 0000	519			

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
FRONT OFFICE RUG	2016-12-30	747	107	S/L	7 0000	107			

TY 2018 Investments - Other Schedule**Name:** THE WEST END HOME FOUNDATION**EIN:** 62-0516508**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ALTERNATIVE INVESTMENTS		2,034,774	2,034,774
FIXED INCOME		10,252,344	10,252,344
EQUITY		25,913,178	25,913,178

**TY 2018 Land, Etc.
Schedule****Name:** THE WEST END HOME FOUNDATION**EIN:** 62-0516508

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
EQUIPMENT	3,892	2,705	1,187	
FURNITURE AND FIXTURES	19,210	15,680	3,530	
LEASEHOLD IMPROVEMENTS	7,795	1,039	6,756	

TY 2018 Legal Fees Schedule**Name:** THE WEST END HOME FOUNDATION**EIN:** 62-0516508

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL - OTHER	1,444			1,444

TY 2018 Other Assets Schedule**Name:** THE WEST END HOME FOUNDATION**EIN:** 62-0516508**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
ACCOUNTS RECEIVABLE		25	25
PREPAID EXCISE TAX		79,801	79,801

TY 2018 Other Decreases Schedule**Name:** THE WEST END HOME FOUNDATION**EIN:** 62-0516508

Description	Amount
UNREALIZED LOSS ON INVESTMENT	4,168,946
CHANGE IN ACCOUNTING METHOD	1,592,235
ROUNDING	1

TY 2018 Other Expenses Schedule**Name:** THE WEST END HOME FOUNDATION**EIN:** 62-0516508**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
ADP	2,260			2,260
GRANT RECIPIENT EVENT	2,262			2,262
HC-INVESTMENT EXPENSES	6,921	6,921	6,921	
ADMIN-DUES / SUBS / MBRSHIPS	8,750			8,750
ADMIN-GIFTS AND ACKNOWLEDGEME	1,054			1,054
ADMIN - MISCELLANEOUS OFFICE	1,504			1,504
FOOD, TABLE, SUPPLIES	504			504
ADMIN-OFFICE SUPPLIES & PRINT	2,331			2,331
SENIOR TRUST	396			396

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MAINTENANCE AND REPAIRS	4,390			4,390
COMMITTEE EXPENSE	15,592			15,592
INSURANCE	5,600			5,600
ADMIN-BOARD RETREAT	1,500			1,500
CONTINUING EDUCATION	1,841			1,841
OPERATING	10,211			8,897

TY 2018 Other Income Schedule**Name:** THE WEST END HOME FOUNDATION**EIN:** 62-0516508**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
BOOK SALES	220		220
OTHER INCOME	1,802		1,802

TY 2018 Other Liabilities Schedule**Name:** THE WEST END HOME FOUNDATION**EIN:** 62-0516508

Description	Beginning of Year - Book Value	End of Year - Book Value
PAYROLL LIABILITIES	2,122	1,555
ACCRUED VACATION		1,731

TY 2018 Other Notes/Loans Receivable Short Schedule**Name:** THE WEST END HOME FOUNDATION**EIN:** 62-0516508

Name of 501(c)(3) Organization	Balance Due
FUNDS HELD BY HIRTLE CALLAGHAN	

TY 2018 Other Professional Fees Schedule**Name:** THE WEST END HOME FOUNDATION**EIN:** 62-0516508

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
HC-INVESTMENT MANAGEMENT FEES	20,005	20,005	20,005	
COMMUNICATIONS-WEBSITE & TECHNOL	6,309			6,309
COMMUNICATIONS-MARKETING & COMMU	4,763			4,763
VANGUARD INVESTMENT MANAGEMENT F	43,352	43,352	43,352	

TY 2018 Taxes Schedule**Name:** THE WEST END HOME FOUNDATION**EIN:** 62-0516508

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADMIN-EXCISE TAX	18,955			
ACCOUNTANTS - LICENSES & PERMITS	240			240

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491295004119	
<div>Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small></div>		<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF</div> <div>▶ Go to www.irs.gov/Form990 for the latest information</div>			<div>OMB No 1545-0047</div> <div>2018</div>
Name of the organization THE WEST END HOME FOUNDATION				Employer identification number 62-0516508	
Organization type (check one)					
Filers of: Section:					
Form 990 or 990-EZ		<input type="checkbox"/> 501(c)() (enter number) organization			
		<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation			
		<input type="checkbox"/> 527 political organization			
Form 990-PF		<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation			
		<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation			
		<input type="checkbox"/> 501(c)(3) taxable private foundation			
Check if your organization is covered by the General Rule or a Special Rule .					
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.					
General Rule					
<input checked="" type="checkbox"/> For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules					
<input type="checkbox"/> For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
<input type="checkbox"/> For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
<input type="checkbox"/> For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . ▶ \$					
Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					
For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF		Cat No 30613X		Schedule B (Form 990, 990-EZ, or 990-PF) (2018)	

Name of organization THE WEST END HOME FOUNDATION	Employer identification number 62-0516508
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Part I **Contributors** (See instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ESTATE OF VIRGINIA TIPTON CRAIG 40 BURTON HILLS BOULEVARD SUITE 300 NASHVILLE, TN 37215	 \$ 137,731	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.	 	 \$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.	 	 \$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.	 	 \$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.	 	 \$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.	 	 \$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
.	 	 \$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Employer identification number

62-0516508

Part II

[illegible]

Name of organization THE WEST END HOME FOUNDATION	Employer identification number 62-0516508
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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<div></div> <div></div>	<div></div> <div></div>	<div></div> <div></div>
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee
	<div></div> <div></div>	<div></div> <div></div>	