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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

CHRISTY-HOUSTON FOUNDATION INC

Number and street (or P O box number if mail is not delivered to street address)

1296 DOW STREET

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

MURFREESBORO, TN 37130

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)

\$ 84,279,249

J Accounting method

☐ Cash

☒ Accrual

☐ Other (specify)

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

A Employer identification number

62-1280998

B Telephone number (see instructions)

(615) 898-1140

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)	20,000		
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B			
	3 Interest on savings and temporary cash investments	13,387	13,387	
	4 Dividends and interest from securities	1,607,701	1,607,701	
	5a Gross rents			
	b Net rental income or (loss)			
	6a Net gain or (loss) from sale of assets not on line 10	1,354,080		
	b Gross sales price for all assets on line 6a			
	7 Capital gain net income (from Part IV, line 2)		1,354,080	
	8 Net short-term capital gain			
	9 Income modifications			
	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)	-583,288	-583,288		
12 Total. Add lines 1 through 11	2,411,880	2,391,880		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	329,542	12,667	316,875
	14 Other employee salaries and wages	63,242	6,324	56,918
	15 Pension plans, employee benefits	27,867	2,787	25,080
	16a Legal fees (attach schedule)	1,700		1,700
	b Accounting fees (attach schedule)	23,325	10,687	12,638
	c Other professional fees (attach schedule)	321,792	321,792	
	17 Interest			
	18 Taxes (attach schedule) (see instructions)	19,957	19,957	
	19 Depreciation (attach schedule) and depletion	10,494	10,494	
	20 Occupancy	19,023	1,902	17,121
	21 Travel, conferences, and meetings	27,115	4,067	23,048
	22 Printing and publications			
	23 Other expenses (attach schedule)	58,983	5,489	53,494
	24 Total operating and administrative expenses. Add lines 13 through 23	903,040	396,166	506,874
	25 Contributions, gifts, grants paid	4,225,903		4,225,903
26 Total expenses and disbursements. Add lines 24 and 25	5,128,943	396,166	4,732,777	
	27 Subtract line 26 from line 12			
	a Excess of revenue over expenses and disbursements	-2,717,063		
	b Net investment income (if negative, enter -0-)		1,995,714	
c Adjusted net income (if negative, enter -0-)				

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		195,037	376,572	376,572
	2	Savings and temporary cash investments		498,208	662,702	662,702
	3	Accounts receivable ▶ <u>1,112</u>				
		Less allowance for doubtful accounts ▶ _____		1,297	1,112	1,112
	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 ▶ _____				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges		182,323	162,366	172,189
	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)		83,096,125	80,043,351	82,591,174	
14	Land, buildings, and equipment basis ▶ <u>512,068</u>					
	Less accumulated depreciation (attach schedule) ▶ <u>290,898</u>		212,321	221,170	475,000	
15	Other assets (describe ▶ _____)		500	500	500	
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)		84,185,811	81,467,773	84,279,249	
Liabilities	17	Accounts payable and accrued expenses		77,100	76,125	
	18	Grants payable				
	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 ▶ _____)				
	23	Total liabilities (add lines 17 through 22)		77,100	76,125	
	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		84,108,711	81,391,648	
25		Temporarily restricted				
26		Permanently restricted				
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)		84,108,711	81,391,648	
31		Total liabilities and net assets/fund balances (see instructions) .		84,185,811	81,467,773	

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	84,108,711
2	Enter amount from Part I, line 27a	2	-2,717,063
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	81,391,648
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	81,391,648

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)
1a			

(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			
b			
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			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) <div style="float:right; font-size: small;"> { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div>	2	1,354,080
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	

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	4,151,123	90,852,806	0 04569
2016	4,494,377	83,798,005	0 05363
2015	4,487,486	91,452,357	0 04907
2014	4,455,100	94,402,877	0 04719
2013	4,099,415	90,635,070	0 04523

2 Total of line 1, column (d)	2	0 240815
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 048163
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	91,665,405
5 Multiply line 4 by line 3	5	4,414,881
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	19,957
7 Add lines 5 and 6	7	4,434,838
8 Enter qualifying distributions from Part XII, line 4	8	4,732,777

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	19,957
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	19,957
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	19,957
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	182,323
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	182,323
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" 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	162,366
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 162,366 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). <i>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</i>	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? <i>If "Yes," attach a detailed description of the activities</i>	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? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
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	No
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	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? <i>If "Yes," complete Part II, col (c), and Part XV</i>	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? <i>If "No," attach explanation</i> .	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. <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	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 ▶ N/A	13	Yes	
14	The books are in care of ▶ ANNE C DAVIS PRESIDENT Telephone no ▶ (615) 898-1140			

Located at **▶** 1296 DOW ST MURFREESBORO TNZIP+4 **▶** 37130

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?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

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 checked="" type="checkbox"/> Yes <input 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. <input type="checkbox"/>	1b		No
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? <input type="checkbox"/>	1c		No
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		No
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		No
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)

		Yes	No
5a	During the year did the foundation pay or incur any amount to		
(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	No
	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 checked="" 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
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870	6b	No
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
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b	No
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
DEBORAH L TILLER	ADMIN MANAGER	63,242	1,550	
312 ROSEMARY ST SMYRNA, TN 37167	36 00			
Total number of other employees paid over \$50,000.				

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
TAYLORWEBSTER ATTORNEYS	ATTORNEYS	1,700
100 WINNERS CIRCLE N BRENTWOOD, TN 37027		
PINNACLE NATIONAL BANK	SECURITIES CUSTODIAN	1,292
BOX 188 MURFREESBORO, TN 371330188		
HALL DAVIDSON & ASSOCIATES CPAS PC	ACCOUNTANTS	21,850
BOX 1234 MURFREESBORO, TN 371331234		
ALPHA CAPITAL MANAGEMENT	INVESTMENT ADVISOR	40,000
3630 PEACHTREE ST NE ATLANTA, GA 30326		
MANGHAM ASSOCIATES INC	INVESTMENT ADVISOR	280,500
630 PETER JEFFERSON PKWY SUITE 250 CHARLOTTESVILLE, VA 22911		

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 NOT APPLICABLE - THE FOUNDATION ONLY MAKES GRANTS TO OTHER QUALIFYING CHARITABLE ORGANIZATIONS OR GOVERNMENTAL UNITS FOR USE IN OR FOR THE BENEFIT OF CITIZENS OF RUTHERFORD COUNTY, TENNESSEE	0
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	
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	92,400,376
b	Average of monthly cash balances.	1b	256,956
c	Fair market value of all other assets (see instructions).	1c	403,993
d	Total (add lines 1a, b, and c).	1d	93,061,325
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	93,061,325
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	1,395,920
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	91,665,405
6	Minimum investment return. Enter 5% of line 5.	6	4,583,270

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	4,583,270
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	19,957
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	19,957
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	4,563,313
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	4,563,313
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	4,563,313

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	4,732,777
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	4,732,777
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	19,957
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	4,712,820

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				4,563,313
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			4,225,903	
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 ▶ \$ <u>4,732,777</u>				
a Applied to 2017, but not more than line 2a			4,225,903	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2018 distributable amount.				506,874
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				4,056,439
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 ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
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 ☐ 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

CHRISTY-HOUSTON FOUNDATION
1296 DOW ST
MURFREESBORO, TN 37130
(615) 898-1140
christyhouston@bellsouth.net

b The form in which applications should be submitted and information and materials they should include

SEE ATTACHED FORMS

c Any submission deadlines

NONE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

GRANTS MUST BENEFIT CITIZENS OF RUTHERFORD OR NEIGHBORING COUNTIES

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>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

(See worksheet in line 13 instructions to verify calculations)

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

Form **990-PF** (2018)

Part XVII

- | | | | |
|---------------------------------------------------------------------------------------------|----|--|----|
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. | 1c | | No |
|---------------------------------------------------------------------------------------------|----|--|----|

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

- 2d Is the foundation an entity or individual, animated (with) or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 5373? ☐ Yes ☒ No

- b** If "Yes," complete the following schedule

**Sign
Here**

Paid Preparer Use Only	DAVID B HALL CPA			
	Firm's name ► Hall Davidson & Assoc CPAs Firm's EIN ► 62-1296805			

Form 990FP 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
ANNE C DAVIS	President 36 00	126,667	4,132	
1296 DOW STREET MURFREESBORO, TN 37130				
HENRY KING BUTLER MD	DIR EMERITUS 0 00	0	5,220	
511 COUNCIL BLUFF PARKWAY MURFREESBORO, TN 37127				
HUBERT L MCCULLOUGH JR	DIR EMERITUS 0 00	0	6,390	
2555 SALEM ROAD MURFREESBORO, TN 37129				
ED ELAM	DIR EMERITUS 0 00	0	2,674	
3302 ELAM ROAD MURFREESBORO, TN 37130				
GRANVILLE S R BOULDIN	DIR EMERITUS 0 00	0	6,260	
1911 WINDSOR COURT MURFREESBORO, TN 37130				
MARK FOLLIS	Director 1 00	1,450	2,000	
630 S CHURCH ST MURFREESBORO, TN 37130				
LARRY N HAYNES	DIR EMERITUS 0 00	0	5,775	
1603 RIVERVIEW DRIVE MURFREESBORO, TN 37129				
WIDOWS OF DIRECTORS EMERITUS	President 0 00	0		
1296 DOW ST MURFREESBORO, TN 37130				
MICHAEL JORDAN MD	Director 1 00	1,250	2,000	
1702 SHAGBARK TRAIL MURFREESBORO, TN 37130				
EDWARD E MILLER JR	DIR EMERITUS 0 00	0		
1618 HAYNES DRIVE MURFREESBORO, TN 37129				
G SUMNER R BOULDIN JR	Director 1 00	1,450	2,000	
1627 SE BROAD ST MURFREESBORO, TN 37130				
MYERS B PARSONS	DIR EMERITUS 0 00	0	6,688	
926 EAST MAIN STREET MURFREESBORO, TN 37130				
ROBERT B MIFFLIN	FORMER PRESIDEN 0 00	36,000	2,832	
1117 GOLD VALLEY DRIVE MURFREESBORO, TN 37130				
JAMES R ARNHART	FORMER PRESIDEN 0 00	54,000	3,343	
2516 SOUTH JEFFERSON ROANOKE, VA 24014				
ED C LOUGHRY JR	Director 0 00	0	5,858	
2645 CHESTERFIELD CT MURFREESBORO, TN 37129				

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
DAVID C DAVIS	DIR EMERITUS 0 00	0	5,220	
1523 VERANDA CIRCLE MURFREESBORO, TN 37130				
HUBERT L MCCULLOUGH III	DIRECTOR 1 00	1,450	2,000	
1408 W NORTHFIELD BLVD MURFREESBORO, TN 37129				
NEWTON F MOLLOY	DIRECTOR 1 00	1,650	6,837	
2226 NORTHWOODS DRIVE MURFREESBORO, TN 37130				
GEORGE W WHITE	DIRECTOR 1 00	1,750	6,768	
506 EAST MAIN STREET MURFREESBORO, TN 37130				
THOMAS E HORD III	DIR EMERITUS 0 00	0	4,996	
124 NORTH HIGHLAND AVE MURFREESBORO, TN 37130				
WILLIAM S JONES	CHAIRMAN 1 00	2,150	2,000	
2806 WINDSONG PLACE MURFREESBORO, TN 37129				
H DAVIS YOUNG III	DIRECTOR 1 00	1,750	2,000	
2256 OAKLEIGH DRIVE MURFREESBORO, TN 37129				
PAMELA KIOUS	Director 1 00	1,650	2,000	
1115 GLASGOW DRIVE MURFREESBORO, TN 37130				
ROBERT M USSERY	Director 1 00	0	2,000	
2508 BELFAST COURT MURFREESBOR, TN 37129				
WIDOWS OF DIRECTORS EMERITUS	DIRECTOR WIDOWS 0 00	0	9,332	
1296 DOW ST MURFREESBORO, TN 37130				

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>				
DOORS OF HOPE428 E BELL ST MURFREESBORO TN, TN 37130	N/A	501C3	PURCHASE BUILDING	125,000
AMERICAN RED CROSS 501 MEMORIAL BLVD MURFREESBORO, TN 37129	N/A	501C3	DISASTER RELIEF	72,000
ALIVE HOSPICE 1639 MEDICAL CENTER PARKWAY MURFREESBORO, TN 37129	N/A	501C3	NEW FACILITY	734,433
Total ▶ 3a				4,225,903

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>				
SPECIAL KIDS2208 E MAIN ST MURFREESBORO, TN 37130	N/A	501C3	PROGRAM SERVICES FOR SPECIAL NEEDS CHILDREN	87,220
CHARITY CIRCLEBOX 11125 MURFREESBORO, TN 37130	N/A	501C3	MATCHING GRANT FOR LOCAL CHARITIES	181,510
SALVATION ARMY2106 EAST MAIN ST MURFREESBORO, TN 37130	N/A	501C3	VAN, KIOTCHEN, & HVAC EQUIPMENT	70,000
Total ▶ 3a				4,225,903

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 Paid during the year				
CITY OF MURFREESBORO 111 W VINE ST MURFREESBORO, TN 37130	N/A	PF	COMMUNITY TECHNOLOGY BUILDING	500,000
MID CUMBERLAND HUMAN RESOURCES 1101 KERMIT DR NASHVILLE, TN 37217	N/A	GOVT	MEALS ON WHEELS PROGRAM	26,000
ST THOMAS RUTHERFORD HOSPITAL 1700 MEDICAL CENTER PKWY MURFREESBORO, TN 37129	N/A	501C3	EXPANSION OF HOSPITAL	1,000,000
Total ► 3a				4,225,903

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 Paid during the year				
DOMESTIC VIOLENCE PROGRAM 2106 E MAIN ST MURFREESBORO, TN 37130	N/A	501C3	BLDG RENOVATIONS	50,000
UNITED WAY OF RUTHERFORD COUNTY 3050 MEDICAL CENTER PKWY MURFREESBORO, TN 37129	N/A	501C3	LEADERSHIP PROGRAM	7,940
MURFREESBORO CITY SCHOOLS 2552 S CHURCH ST MURFREESBORO, TN 37127	N/A	GOVT	MOBILE LIBRARY	39,800
Total ▶ 3a				4,225,903

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>				
OAKLAND MANSION900 N MANEY AVE MURFREESBORO, TN 37130	N/A	501C3	OUTSIDE CLASSROOM & SIDEWALK	93,000
SECOND HARVEST FOOD BANK 331 GREAT CIRCLE DR NASHVILLE, TN 37240	N/A	501C3	EQUIPMENT	350,000
SECOND HARVEST FOOD BANK 331 GREAT CIRCLE ROAD NASHVILLE, TN 37228	N/A	501C3	FOOD FOR NEEDY	10,000
Total ▶ 3a				4,225,903

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>				
VANDERBILT SCHOOL OF NURSING 461 21ST AVE SOUTH NASHVILLE, TN 37240	N/A	501C3	SCHOOL OF NURSING EXPANSION	250,000
RUTHERFORD COUNTY 1 PUBLIC SQUARE MURFREESBORO, TN 37130	N/A	GOVT	RENOVATE BLDG FOR RECOVERY COURT	250,000
LEUKEMIA LYMPHOMA SOCIETY 404 BNA DRIVE NASHVILLE, TN 37217	N/A	501C3	TRAVEL ASSISTANCE	15,000
Total ▶ 3a				4,225,903

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>				
ANDREW JACKSON FOUNDATION 4850 RACHELS LANE HERMITAGE, TN 37248	NONE	501C-3	EDUCATIONAL VISITS FOR CHILDREN	25,000
NOURISH FOOD BANK 1809 MEMORIAL BLVD MURFREESBORO, TN 37129	N/A	501C-3	HELP PURCHASE BUILDING	249,000
INTERFAITH DENTAL CLINIC 210 ROBERT ROSE DR MURFREESBORO, TN 37129	N/A	501C-3	PROGRAM SERVICES	10,000
Total ▶ 3a				4,225,903

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>				
GOVERNORS BOOKS FROM BIRTH 312 ROSA PARKS AVE NASHVILLE, TN 37243	N/A	501C3	BOOKS FOR CHILDREN	10,000
A SOLDIERS CHILD 1197 HAZELWOOD DR SMYRNA, TN 37167	N/A	501C3	PROGRAM SERVICES	10,000
GOOD SHEPHERD CHILDRENS HOME 230 WOODCRAFT DRIVE MURFREESBORO, TN 37127	NONE	501C3	PROGRAM SERVICES	10,000
Total ► 3a				4,225,903

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>				
JOURNEYS IN COMMUNITY LIVING 1130 HALEY ROAD MURFREESBORO, TN 37129	NONE	501C3	PROGRAM SERVICES	10,000
CASA OF RUTHERFORD COUNTY 447 N FRONT ST MURFREESBORO, TN 37130	NONE	501C3	PROGRAM SERVICES	10,000
DISCOVERY CENTER502 S E BROAD ST MURFREEBORO, TN 37130	NONE	501C-3	PROGRAM SERVICES	10,000
Total ▶ 3a				4,225,903

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>				
NOURISH FOOD BANK 1809 MEMORIAL BLVD MURFREESBORO, TN 37129	NONE	501C-3	PROGRAM SERVICES	20,000
Total ▶ 3a				4,225,903

TY 2018 Accounting Fees Schedule**Name:** CHRISTY-HOUSTON FOUNDATION INC**EIN:** 62-1280998**Software ID:** 18007218**Software Version:** 2018v3.1

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
HALL, DAVIDSON & ASSOC CPA'S	21,375	10,687	0	10,688
AUDIT FEE	1,950	0	0	1,950

TY 2018 Contractor Compensation Explanation**Name:** CHRISTY-HOUSTON FOUNDATION INC**EIN:** 62-1280998**Software ID:** 18007218**Software Version:** 2018v3.1

Contractor	Explanation
TAYLORWEBSTER ATTORNEYS	LEGAL SERVICES
MANGHAM ASSOCIATES INC	MANAGEMENT OF INVESTMENTS
PINNACLE NATIONAL BANK	CUSTODIAN OF INVESTMENT FUNDS
HALL DAVIDSON & ASSOCIATES CPAS PC	ACCOUNTING WORK, FINANCIAL REPORTS, 990-PF & 990-T RETURNS
ALPHA CAPITAL MANAGEMENT	INVESTMENT ADVISOR FEES

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

TY 2018 Depreciation Schedule

Name: CHRISTY-HOUSTON FOUNDATION INC

EIN: 62-1280998

Software ID: 18007218

Software Version: 2018v3.1

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
OFFICE BUILDING	1991-09-01	260,784	162,445	SL		6,687			
FURNITURE & EQUIPMENT	2000-01-01	129,749	98,297	SL		3,807			

TY 2018 General Explanation Attachment

Name: CHRISTY-HOUSTON FOUNDATION INC

EIN: 62-1280998

Software ID: 18007218

Software Version: 2018v3.1

General Explanation Attachment

Identifier	Return Reference	Explanation	
1		General Explanation Supplemental Information for Form 990-PF	<p>METHODS OF ACCOUNTING AND REPORTING-----THE FOUNDATION'S BOOKS ARE KEPT ON THE FULL ACCRUAL METHOD, WITH MONTHLY ENTRIES BEING MADE TO RECORD UNRECOGNIZED GAINS AND LOSSES BASED ON THE MARKET VALUE OF THE SECURITIES INTO THE INCOME ACCOUNTS. FEDERAL EXCISE TAX ON THE NET INVESTMENT INCOME IS ACCRUED AT YEAR END, BASED ON COMPUTATION ON THE FORM 990-PF. THE FOUNDATION'S ATTACHED FINANCIAL REPORT REFLECTS THIS METHOD OF REPORTING FOR THE COMPUTATION OF AVERAGE VALUE OF INVESTMENTS IN PART V FOR DETERMINING REQUIRED ANNUAL DISTRIBUTIONS, ESTIMATED FAIR MARKET VALUES AS REPORTED BY THE INVESTMENT MANAGERS ARE USED, AS A MAJOR PORTION OF THE INVESTMENTS ARE IN FUNDS NOT PUBLICLY TRADED. THE FORM 990-PF IS PREPARED ON A MODIFIED CASH BASIS FOR TAX PURPOSES, CARRYING THE SECURITIES AT COST BASIS AND NOT RECOGNIZING CHANGES IN MARKET VALUE. GAINS AND LOSSES ARE REPORTED ONLY UPON SELLING INDIVIDUAL SECURITIES, OR AS REPORTED ON K-1'S FROM PARTNERSHIPS. THE FOLLOWING ADJUSTMENTS ARE NECESSARY TO RECONCILE THE FOUNDATION'S ATTACHED FINANCIAL STATEMENTS WITH THE AMOUNTS REPORTED ON THE FORM 990-PF: NET LOSS FOR FYE 12-31-2018 PER FINANCIAL REPORT \$10,654,110- ADD DECREASE IN DEFERRED INCOME TAXES BASED ON 2% TAX ON UNREALIZED GAINS 161,981- LESS ESTIMATED DECREASE IN UNREALIZED GAIN IN MARKET VALUE OF SECURITIES HELD NOT INCLUDED IN INCOME ON FORM 990-PF 8,099,028 _____ NET LOSS PER FORM 990-PF, PART 1, LINE 27-A \$ 2,707,240 NET ASSETS PER 990 RECON 12-31-17 \$84,108,711 _____ NET ASSETS PER 990 RECON 12-31-18 \$81,391,648 _____ NET ASSETS-UNRESTRICTED 12-31-2018 PER FINANCIAL REPORT \$83,888,515 ADD BACK DEFERRED TAX LIABILITY ON FINANCIAL REPORT 50,956 SUBTRACT ADJUSTMENT TO MARKET VALUE FOR UNREALIZED LOSS ON SECURITIES HELD AT 12-31-18 2,547,823- _____ NET ASSETS-UNRESTRICTED PER FORM 990-PF BAL SHEET \$81,391,648 (USING ONLY COST BASIS FOR SECURITIES) _____</p>

General Explanation Attachment

Identifier	Return Reference	Explanation	
2		General Explanation Supplemental Information for Form 990-PF	UNRELATED 2018 BUSINESS INCOME PER FORMS 1065 K-1 ATTACHED TRG FORESTRY FUND 8-B 1,200- MIT PRIVATE EQUITY FUND IV LPS 320 880- _____ NET UBI (LOSS) CARRIED OVER FROM 2016 RETURN \$677,061- _____ NET UBI (LOSS) CARRIED FORWARD TO 2019 \$677,941- _____

General Explanation Attachment

Identifier	Return Reference	Explanation	
3		General Explanation Supplemental Information for Form 990-PF	PART IV, LINE 1a CAPITAL GAINS & LOSSES FROM INVESTMENTSTHE FOUNDATION'S INVESTMENTS ARE LARGELY HELD IN LIMITED PARTNERSHIPS, FUNDS OF FUNDS, AND PRIVATE EQUITIES, WHICH REPORT INTEREST, DIVIDENDS ANDVARIOUS OTHER TYPES OF INCOME AND DEDUCTGIONS ON SCHEDULES K-1 FOR 2018, THE AMOUNT OF CAPITAL GAINS REPORTED ON THE VARIOUS SCHEDULES K-1 WITH VARIOUS ACQUISITION AND SALES DATESTOTALED \$1 354 080 OUR LACERTE TAX SOFTWARE IS NOT ABLE TOPRINT THIS INFORMATION ON LINE 1a WITHOUT IT BEING ALSO AUTOMATICALLY SHOWN ON THE 990-T AS UUNRELATED BUSINESS INCOME, WHICH IT IS NOT

**TY 2018 Land, Etc.
Schedule****Name:** CHRISTY-HOUSTON FOUNDATION INC**EIN:** 62-1280998**Software ID:** 18007218**Software Version:** 2018v3.1

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Furniture and Fixtures	129,747	100,608	29,139	50,000
Buildings	260,784	169,132	91,652	300,000
Improvements	21,158	21,158		25,000
Land	100,379		100,379	100,000

TY 2018 Legal Fees Schedule**Name:** CHRISTY-HOUSTON FOUNDATION INC**EIN:** 62-1280998**Software ID:** 18007218**Software Version:** 2018v3.1

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAYLOR/WEBSTER ATTORNEYS	1,700	0	0	1,700

TY 2018 Other Assets Schedule**Name:** CHRISTY-HOUSTON FOUNDATION INC**EIN:** 62-1280998**Software ID:** 18007218**Software Version:** 2018v3.1**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
UTILITY DEPOSIT	500	500	
UTILITY DEPOSITS			500

TY 2018 Other Expenses Schedule

Name: CHRISTY-HOUSTON FOUNDATION INC

EIN: 62-1280998

Software ID: 18007218

Software Version: 2018v3.1

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TELEPHONE	6,752			6,752
INSURANCE	17,858			17,858
AUTOMOBILE EXPENSE	434			434
BANK SERVICE CHARGES	630			630
CATERING FOR BOARD MEETINGS	4,266			4,266
DUES	11,090			11,090
OFFICE SUPPLIES & EXPENSE	9,654			9,654
PUBLICATION & BOOKS\	190			190
MISCELLANEOUS EXPENSE	2,622			2,622
OTHER EXPENSE	5,489	5,491		

Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ROUNDING	-2	-2		-2

TY 2018 Other Income Schedule**Name:** CHRISTY-HOUSTON FOUNDATION INC**EIN:** 62-1280998**Software ID:** 18007218**Software Version:** 2018v3.1**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Other Investment Income	-583,288	-583,288	

TY 2018 Other Professional Fees Schedule**Name:** CHRISTY-HOUSTON FOUNDATION INC**EIN:** 62-1280998**Software ID:** 18007218**Software Version:** 2018v3.1

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MANGHAM ASSOCIATES	280,500	280,500	0	0
CUSTODIAN-PINNACLE NATIONAL BANK	1,292	1,292	0	0
ALPHA CAPITAL MANAGEMENT	40,000	40,000	0	0

TY 2018 Taxes Schedule**Name:** CHRISTY-HOUSTON FOUNDATION INC**EIN:** 62-1280998**Software ID:** 18007218**Software Version:** 2018v3.1

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX ON INVESTMENT INCOME	19,957	19,957		

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491315012049	
<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</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>
		<div>Name of the organization</div> <div>CHRISTY-HOUSTON FOUNDATION INC</div>			<div>Employer identification number</div> <div>62-1280998</div>
<div>Organization type (check one)</div>					
<div>Filers of:</div> <div>Form 990 or 990-EZ</div> <div>Form 990-PF</div>					
<div>Section:</div> <div><div><input type="checkbox"/> 501(c)() (enter number) organization</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation</div><div><input type="checkbox"/> 527 political organization</div><div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div><div><input type="checkbox"/> 501(c)(3) taxable private foundation</div></div>					
<div>Check if your organization is covered by the General Rule or a Special Rule.</div> <div>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</div>					
<div>General Rule</div> <div><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</div>					
<div>Special Rules</div> <div><input type="checkbox"/> For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹ 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</div> <div><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</div> <div><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 ▶ \$</div>					
<div>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)</div>					
<div>For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF</div> <div>Cat No 30613X</div> <div>Schedule B (Form 990, 990-EZ, or 990-PF) (2018)</div>					

Name of organization CHRISTY-HOUSTON FOUNDATION INC	Employer identification number 62-1280998
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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	ADAMS FAMILY FOUNDATION 801 MORELAND LANE MURFREESBORO, TN 37128	 \$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II for noncash contributions)</small>
(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"/> <small>(Complete Part II for noncash contributions)</small>
(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"/> <small>(Complete Part II for noncash contributions)</small>
(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"/> <small>(Complete Part II for noncash contributions)</small>
(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"/> <small>(Complete Part II for noncash contributions)</small>
(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"/> <small>(Complete Part II for noncash contributions)</small>
(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"/> <small>(Complete Part II for noncash contributions)</small>
(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"/> <small>(Complete Part II for noncash contributions)</small>

Employer identification number

62-1280998

Part II	Noncash Property
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Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization CHRISTY-HOUSTON FOUNDATION INC	Employer identification number 62-1280998
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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
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	