2949133407314 9

# EXTENDED TO NOVEMBER 15, 2019 Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

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

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

For	calendar y	ear 2018 or tax year beginn	ing		, and ending		
Na	me of found	dation		× .	,	A Employer identification	number
_		UM FAMILY FO				62-1871174	
		et (or PO box number if mail is n OWRING PARK	ot delivered to street a	address)	Room/suite	B Telephone number (615) 383-	4965
Cıt	ty or town, s	state or province, country, a		ostal code		C If exemption application is p	
	IASHVI Check all th		15-2456	Initial return of a f	ormer public charity	D 1. Foreign organizations	chack here
u	Olicok ali til	at appriy. Final re		Amended return	ornici public charity		
	7		ss change	Name change	54.	2. Foreign organizations me check here and attach co	eting the 85% test, imputation
H_		of organization: X Solution Solution Solution (1) on the August (1) of the August (1		kempt private foundation Other taxable private founda	ation (')U	E If private foundation sta under section 507(b)(1)	
	air market v	alue of all assets at end of y	ear J Account	ing method: X Cash	Accrual	F If the foundation is in a	60-month termination
	rom Part II, ►\$	, col. (c), line 16) 2 , 264 , 76		ther (specify) mn (d) must be on cash basi	S.)	under section 507(b)(1)	)(B),¹check here
P	(The	Ilysis of Revenue and Exper total of amounts in columns (b), (i essarily equal the amounts in colu	c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income.	(d) Disbursements for charitable purposes (cash basis only)
	1 .	ributions, gifts, grants, etc.,		20,145.	mongot van displantinis is displatific di mandaminga Litari		
X	2 Check	st on savings and temporary	quired to attach Sch B	(**!(`\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	9.	( <u>1)                                    </u>	STATEMENT 1
)		investments lends and interest from secu	ırıtıes	27,477.	27,477.	27,477.	STATEMENT 2
	5a Gros	s rents					<b>多一种的 以为某种</b>
	I	ental income or (loss)		70.075			
9	62 Netg	ain or (loss) from sale of ascots no s sales price for all	79,150.	78,075.	- จะเกาะ แนะเกาะเกาะเกาะ เกาะก็การการการการการการการการการการการการการก	apanimus kang mang kang mangkan nama saya sa	
91.0	D asset	s on line baal gain net income (from Part IV, Iii			78,075.	14. 12. 12. 12. 12. 12. 12. 12. 12. 12. 12	-07 S W 3225 W 34
. 6		short-term capital gain		* * * * * * * * * * * * * * * * * * * *	maki ji ne	N/A	
•		me modifications s sales less returns	•	111910			
	10a and a	llowances		MAC			
		Cost of goods sold		ำ ข้องเกาะเกาะสายเล่ารักกระบารราชายาสายเกาะเกาะเกาะเกาะเกาะเกาะเกาะเกาะเกาะเกาะ	to to a militario de la companio del companio de la companio del companio de la companio del companio de la companio del compa	- maringhabata - mate Tal to Mark in the falling	
	1	r income			1000 100 100 100 100 100 100 100 100 10		
		I. Add lines 1 through 11		125,706.	105,561.	27,486.	77. 5 5 7 7 7 7 7 7 7 8 7 8 7 8 7 8 7 8 7 8
	13 Comp	pensation of officers, directors, tru	stees, etc	. 0.	0.	0.	0.
	1	r employee salaries and wag					,
j	40-1	sion plans, employee benefit	S I				
9	16a Lega	ESEIVED 7	STMT 3	4,358.	4,358.	0.	0.
, ,	Othe	Junting fees 77	STMT 4	343.	343.	0.	0.
٩	9	EST 2 5 2013 )	_			_	't
, <u>;</u>	ì8 <del>□ T</del> axe		STMT 5	7,405.	105.	0.	0.
<u>.</u>	19 Debr	eciation and depletion	}				
	20 Occu 21 Trav	ipancy el, <u>co</u> nferences, and meeting	ıs				
Ţ	22 Print	ingand publications	, <b>o</b>				,
, 5	23 Othe	r expenses					-2
į	24 Tota	l Öperating and administrat					
Onerating and Administrative Evnense	expe	nses. Add lines 13 through	23 .	12,106.	4,806.	0.	0.
	20 0011	ributions, gifts, grants paid Expenses and disburseme	nto	229,244.		, A. 1985	229,244.
,		lines 24 and 25	illa.	241,350.	4,806.	0.	229,244.
_		ract line 26 from line 12:	-				
	a Exces	ss of revenue over expenses and o		-115,644.		***	SECULAR SECULAR SECULAR SECULAR SECULAR SECULAR SECULAR SECULAR SECULAR SECURITARISTS
		Westment income (if negative			100,755.	00.406	
	uihA o	sted net income (if negative, o	enter -0-)			27,486.	INTERNATION OF THE PARTY OF THE

62-1871174

PD	à't	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End C	or year
	ai t	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	178,856.	78,831.	78,831.
	2	Savings and temporary cash investments	4,855.	4,857.	4,857.
	3	Accounts receivable	24 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		25 M - 188 -
	"	Less: allowance for doubtful accounts			5
	١.		2 (1865-2080) William 1860 (18		U-1200 - 1600 T-2002 - 100 T-30
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			,
		disqualified persons			,
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
S	8	Inventories for sale or use		•	
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U.S. and state government obligations			1
		Investments - corporate stock			
		Investments - corporate bonds			-
		Investments - land, buildings, and equipment basis	THE THE PARTY OF		
	l ' '	Less accumulated depreciation		A STATE OF THE PARTY OF THE PAR	Andrew Marie
	12	Investments - mortgage loans	<del></del>		
	13	Investments - other STMT 6	1,211,316.	1,101,292.	2,181,081.
	14	Land, buildings, and equipment: basis	KO SO BOOK OF THE PROPERTY OF THE PARTY OF T		5-2-2-3-3-3-3-3-4-1
	'*	Less accumulated depreciation			2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	4-		<u> </u>	<u>-</u>	
		Other assets (describe			
	16	Total assets (to be completed by all filers - see the	1 205 027	1 104 000	2 264 760
_		instructions. Also, see page 1, item I)	1,395,027.	1,184,980.	2,264,769.
	17	Accounts payable and accrued expenses			
	18	Grants payable			<ul> <li>(2) 一緒は ・3×××・・ (3) (4 × 2 × 3) (6 × 6 × 6 × 7 × 7 × 7 × 7 × 7 × 7 × 7 ×</li></ul>
es	19	Deferred revenue		• •	(i)
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons		<b>→</b>	
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe >)			
		T 4 18 1884 (add been 47 through 00)	0.	0.	
_	23	Total liabilities (add lines 17 through 22)	0.		
		Foundations that follow SFAS 117, check here	`		
es	24	and complete lines 24 through 26, and lines 30 and 31.		,	
ဦ	25	Unrestricted Temporarily restricted		,	
<b>Assets or Fund Balanc</b>	1	Permanently restricted			ENTERNA SINA PROPERTY.
B	26	Foundations that do not follow SFAS 117, check here			
Ë		and complete lines 27 through 31.		· ·	
<u>-</u>	27	Capital stock, trust principal, or current funds	1,395,027.	1,184,980.	
ş	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
SS	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
Net /	30	Total net assets or fund balances	1,395,027.		
Ž	30	\	2,030,02,0		55. 76. 20. 20. 20. 20. 20. 20. 20. 20. 20. 20
	31	Total liabilities and net assets/fund balances	1,395,027.	1,184,980.	
_		<u> </u>			Dates of the Table of The Control of
ĽΡ	art	Analysis of Changes in Net Assets or Fund Ba	aiances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)	•	1	1,395,027.
		amount from Part I, line 27a		2	-115,644.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add I	lines 1, 2, and 3		4	1,279,383.
5	Decr	eases not included in line 2 (itemize) DECREASE IN FU	ND BALANCE	. 5	94,403.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	1,184,980.
_					Form <b>990-PF</b> (2018)

_	orm 990-PF (2018) THE BLUM FAMILY FOUNDATION Part IV Capital Gains and Losses for Tax on Investment Income			62-1871174 Pa			Page			
۲	<del></del>				(b) How	acquired	(c) Date a	- aurad	(d) Dot	
		the kind(s) of property sold (for examarehouse; or common stock, 200 shs.		ie,	P - Pi	acquired irchase onation	(mo., day	y, yr.)	( <b>d)</b> Date (mo., da	
1a	200 SHARES OF	TJX COS INC NEW C	MO	-		D			01/25	5/18
b	BELLE MEADE AS	SOC. NT LP - LONG	TERM			P			12/31	
C	BELLE MEADE AS	SOC. NT LP - SHOR	TERM	[	_	P			12/33	L/18
d	<u> </u>									
e					Ц		4) 0	(1222)	<del></del> _	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				n or (loss) (f) minus (		_
a	15,787.			1,07	5.					,712.
b			_ <del></del>							,647.
C							<del></del>			, 284
đ								<del>.</del>		
е		l ng gain in column (h) and owned by t	he foundation	on 12/31/69			(I) Gains (Co	l (b) gain	minuc	
	Complete only for assets shown	(j) Adjusted basis		cess of col. (I)	-		ol. (k), but no			
	(i) FMV as of 12/31/69	as of 12/31/69		col. (j), if any			Losses (f	from col. (I	h))	
a	· · · · · · · · · · · · · · · · · · ·					_			14	712
b										,647.
C									-9,	, 284
d										
е						<del></del>				
2	Capital gain net income or (net ca	If gain, also enter apital loss) If (loss), enter -0-			} _2				78	,075
		ss) as defined in sections 1222(5) and								
•	If gain, also enter in Part I, line 8,		- (v).		}					
_	If (loss), enter -0- in Part I, line 8	nder Section 4940(e) for	<u> </u>	Tawan Nat	3				-9,	, 284
Wa		his part blank. tion 4942 tax on the distributable ami y under section 4940(e). Do not com		•	iod?				Yes	X No
1		each column for each year; see the in	structions bef	ore making any er	ntries.					
	<b>(a)</b> Base period years Calendar year (or tax year beginni	(b) Adjusted qualifying dist	ributions	Net value of no	(c) ncharitab	le-use asset	s l	Distrib	(d) ution ratio ided by col.	(c))
	2017		7,570.		2,2	75,30		(4) 4.1	.08	3243
	2016		3,994.			04,36				14459
	2015		1,513.			10,19				95699
	2014		8,275.	_		99,42				20144
	2013		9,694.		2,4	62,38	5.		.09	3281
2	Total of line 1, column (d)						2		.53	36020
		5-year base period - divide the total o	n line 2 by 5.0	), or by the numbe	er of years	3				
	the foundation has been in exister						3		.10	7204
4	Enter the net value of noncharitab	ole-use assets for 2018 from Part X, I	ine 5				4		2,262	,320
5	Multiply line 4 by line 3						5		242	, 530 <u>.</u>
6	Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6		1	,008
7	Add lines 5 and 6						7		243	,538
	Enter qualifying distributions from	n Part XII. line 4					8		229	, 244.
	, , ,	n line 7, check the box in Part VI, line	1b, and comp	lete that part usin	g a 1% ta	x rate.	ــــــــــــــــــــــــــــــــــــــ			
	See the Part VI instructions.				J =	<del></del>				

Form 990-PF (2018) THE BLUM FAMILY FOUNDATION		<u>-18711</u>		age 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), o	r 4948	- see ins	tructions	<u>)                                    </u>
1a Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1.				
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here   ▶ □ and enter 1%	1 27 1/20	(\$1 /7 /Julyson/ 4- 1/0)	2,01	<u> </u>
of Part I, line 27b				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b). $\mathcal{Y}$			<u> </u>	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2	<del>                                     </del>		0.
3 Add lines 1 and 2	3	<del> </del> .	2,01	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4		2 01	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	<u>5</u> ≥≥∴⊚		2,01	- <b>5</b> •
6 Credits/Payments:	1			
a 2018 estimated tax payments and 2017 overpayment credited to 2018  6a 3,32	<del>                                      </del>			197.
2 Example for eight or gain a same of the control o				
	0.			
	7	<u> </u>	4,32	الأنسك 1 .
7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	+	- 2,32	0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>▶</b>   ° 9	+		<u> </u>
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	<del></del>	2,30	06.
11 Enter the amount of line 10 to be: Credited to 2019 estimated tax 2, 306. Refunded	_			0.
Part VII A Statements Regarding Activities	<u> </u>			
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inter	vene in	. 9	Yes	No
any political campaign?		` <b>[</b>	1a	x
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the	definition	Γ	1b	x
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				3.2. (4
distributed by the foundation in connection with the activities.				4
c Did the foundation file Form 1120-POL for this year?		् [	1c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		, [	A.V	
(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	<u>o.</u>	Į.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
managers. ► \$0		3		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		Ļ	2	<u>X</u>
If "Yes," attach a detailed description of the activities.		l <sub>x</sub>		thing is
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	n, or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	<u>X</u>
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	,	N7 / N	4a	<u> </u>
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b	X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		4	5	<del>7</del> ~
If "Yes," attach the statement required by <i>General Instruction T</i> 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		, j		
By language in the governing instrument, or		1		
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the</li> </ul>	state law	å		Na A
remain in the governing instrument?	31410 1411	1.4	6 X	<u> </u>
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		F	7 X	
		- 1	10 Sal	
8a Enter the states to which the foundation reports or with which it is registered. See instructions.		[7]		
TN				2.4
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		ľ	8b X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for	calendar	1	322	
year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV			9	$\overline{\mathbf{x}}$
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10	X
· ,		Form	990-PF (	2018)′

P	art VII-A Statements Regarding Activities (continued)			
		18 - 5843 21 - Acts	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	_
	Website address ► N/A			
14	The books are in care of ▶ JOAN B. SHAYNE Telephone no. ▶ (615)	383	-49	65
	Located at ▶909 BOWRING PARK, NASHVILLE, TN ZIP+4 ▶37		-24	56
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		<b></b>	•
-	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	£ \$ 15	1.4	Sept my
	foreign country		geragerate geragerate	
Pa	art 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.	Sandyought San F	Yes	No
1:	a During the year, did the foundation (either directly or indirectly):	8.60 J.	多香香	4.0
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No	沙野李		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			4
	a disqualified person?	***		1 de 1 de 1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	of Lieve	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	100	\$ 196.4	
	(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)?	\$~\#\\	See Aller	وُ لِلْمِينَةِ اللَّهِ اللَّه
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	£ 4	18 Mar	
	If the foundation agreed to make a grant to or to employ the official for a period after	\$ 16.50	19 - 28 cm	1
	termination of government service, if terminating within 90 days.)	4 49 H	\$ - \$600 \$ 600 c	1 6 6 7 1 6 7
	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		製の対象	
١	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions  N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	参婚の	* *	raghashi y
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	表,豪华 逐 表示		
١	before the first day of the tax year beginning in 2018?	1c	-	X
2		* 8 ·	N de	, Av est-
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	\$ %\.	\$ 1860 W. W.	
	defined in section 4942(j)(3) or 4942(j)(5)):  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	學學		
č	before 2018?	海・多ツ 海・多ツ		
	If "Yes," list the years >	**	5.2 To A	5 1 W
	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect		· Mark Mr. o	* 4
•	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		1.45.4	- G-9
		2b	2 (4 x y y y y	Contraction of
	statement - see instructions.)  If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20		F
•	the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	100 P	人。 企业、通	8 17 18 85 18 18
٥.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	·安.		g- x-4
38				
				1.
ı	of "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after	Commission Sales and S	\$ \$6.00 \$ 18.00 \$ 18.00	\$036 2. 5.24
	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	1		
	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.)	- 100 - 24.	<u> </u>	<u> </u>
,		3b		X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	10 M	883 N =08
t	bild the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	3 · · · · · · · · · · · · · · · · · · ·	5 3 3	v
	had not been removed from jeopardy before the first day of the tax year beginning in 2018?	i 4n i		

Form **990-PF** (2018)

Part VII-B	Statements Regarding Activities for Which	Form 4720 May Be R	equired (continu	ued)				
5a During the	year, did the foundation pay or incur any amount to:					Yes	No	
_	on propaganda, or otherwise attempt to influence legislation (section	es 🗓 No						
	2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,							
any voter registration drive?								
-	e a grant to an individual for travel, study, or other similar purpose	s?	Y6	s X No				
• •	(4) Provide a grant to an organization other than a charitable, etc., organization described in section							
` '	d)(4)(A)? See instructions		☐ Ye	s X No				
•	e for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f						
	evention of cruelty to children or animals?	, or constraint purposse, or r		s X No				
•	ver is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify u	nder the excentions described i						
-	4945 or in a current notice regarding disaster assistance? See inst	·	in regulations	N/A	5b			
	ins relying on a current notice regarding disaster assistance, check			▶				
-	er is "Yes" to question 5a(4), does the foundation claim exemption		inod					
			—	es 🗆 No				
·	e responsibility for the grant?	•	1/12 16					
	ach the statement required by Regulations section 53.4945-5(d).							
	ndation, during the year, receive any funds, directly or indirectly, to	pay premiums on		s X No				
•	benefit contract?		Y6	S A NO	<u>^</u>		X	
	ndation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		}	<u>6b</u>	$\vdash$	<u> </u>	
	6b, file Form 8870.			चि⊤				
•	during the tax year, was the foundation a party to a prohibited tax		Ye	es X No		$\vdash$	-	
	the foundation receive any proceeds or have any net income attrib		•	N/A	7b		-	
	dation subject to the section 4960 tax on payment(s) of more than	\$1,000,000 in remuneration or						
excess para	achute payment(s) during the year?			s X No				
Part VIII	Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Mai	nagers, Hignly					
4 1 1 2 4 2 11 - 45		th air a ama an anti-m						
1 List all onic	cers, directors, trustees, and foundation managers and		(c) Compensation	(d) Contributions to	_	(a) Eyr	0000	
	(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	i a	(e) Exp ccount,	, other	
		to position	`enter -0-) '	compensation	—	allowar	nces	
JOAN B.	SHAYNE	TRUSTEE						
	RING PARK						_	
NASHVILI		0.00	0.	0.			0.	
<b>JENNIFE</b>		TRUSTEE						
	PLE STREET							
SANTA MO	ONICA, CA 90405	0.00	0.	0.	.		0.	
LAUREN E	BLUM	TRUSTEE						
35 EAST	85TH STREET							
NEW YORK	K, NY 10028	0.00	0.	0.			0.	
EMILY BI	LUM HASLETT	TRUSTEE						
26 BAKE	R BRIDGE ROAD					-		
LINCOLN	, MA 01773	0.00	0.	0.			0.	
2 Compensa	tion of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."					
(a) Nar	ne 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 deterred compensation	a	(e) Exp ccount, allowar	, other	
No	ONE		<u> </u>	Companisation				
	<u></u>	<b></b>						
					+-			
		1						
		<u> </u>			+			
		┥						
		<del>                                     </del>	<del> </del>		+			
		┥ ・						
			<del>                                     </del>		+			
		-						
		1	I	<u> </u>			0	
Total number o	f other employees paid over \$50,000		· · · · · · · · · · · · · · · · · · ·	<u> </u>				

Form 990-PF (2018) THE BLUM FAMILY FOUNDATION		1871174 Page 7
Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. 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		• 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers produced.	stical information such as the	Expenses
1 N/A	Juceu, etc.	· · · · · · · · · · · · · · · · · · ·
2		
3		
4		
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on N/A	lines 1 and 2.	Amount
2		
All other program-related investments. See instructions.  3		
Total. Add lines 1 through 3	<b>&gt;</b>	0.

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Page 8

4940(e) reduction of tax in those years.

P	art X Minimum Investment Return (All domestic foundations	must co	mplete this part. Foreign fou	ndations, se	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charita	ble. etc p	urposes:	T	
٠,	Average monthly fair market value of securities	,, բ		1a	0.
	Average of monthly cash balances			1b	115,691.
	Fair market value of all other assets			1c	2,181,081.
	Total (add lines 1a, b, and c)			1d	2,296,772.
	Reduction claimed for blockage or other factors reported on lines 1a and				
·	1c (attach detailed explanation)	1e	0.	1 1	
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	2,296,772.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amounts)	nt. see inst	ructions)	4	34,452.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and			5	2,262,320.
6	Minimum investment return. Enter 5% of line 5	o u v,	1110	6	113,116.
ĬΡ	art XI Distributable Amount (see instructions) (Section 4942(j)(3)	and (1)(5)	nrivate operating foundations a		<u> </u>
_	foreign organizations, check here and do not complete this pai		private operating restrictions a		
1	Minimum investment return from Part X, line 6	,		1	113,116.
	Tax on investment income for 2018 from Part VI, line 5	2a	2,015.		· · · · ·
ь	Income tax for 2018. (This does not include the tax from Part VI.)	2b		1	
c	Add lines 2a and 2b	<del></del>		20	2,015.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	111,101.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	111,101.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pa	rt XIII, line	:1	7	111,101.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	irposes:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	229,244.
b	Program-related investments - total from Part IX-B			1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charit	able, etc.,	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:				
a	Suitability test (prior IRS approval required)			3a	<del></del>
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 X	(III, line 4	4	229,244.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inv	vestment			_
	income. Enter 1% of Part I, line 27b			5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			_6	229,244.
	Note: The amount on line 6 will be used in Part V, solumn (b) in subsequent verse	when calc	ulating whether the foundation	auglifies for t	he section

Form **990-PF** (2018)

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,	00.700			
line 7				111,101.
2 Undistributed income, if any, as of the end of 2018			0.	
a Enter amount for 2017 only				
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2018;			and the state of t	de ndu Yilka shifan olini d
	onean confinince anneanos animantes ECCOS aniffichio surfer anabili	я перинарны олијјинен гајинког в гобобрбо ликот кал	опшия спининия спинамя запина в в в в в в в в в в в в в в в в в в в	भिद्रः बात्तास्यामीतित्वः स्थातातात्वः स्थातातात
	000 00 T T T T T T T T T T T T T T T T		nn ' '	' ' ""
•	669,144.			
f Total of lines 3a through e	003,144.			
4 Qualifying distributions for 2018 from Part XII, line 4: ►\$ 229, 244.				
· · · · · · · · · · · · · · · · · · ·			0.	
a Applied to 2017, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)			1 1 11	nu u w
c Treated as distributions out of corpus	0.	'mursole aminint' and aminint Aminint	animaning the committee of the contraction of the c	rangetien Americani (************************************
(Election required - see instructions)	0.			111,101.
d Applied to 2018 distributable amount	118,143.			111,101.
e Remaining amount distributed out of corpus	0.	1 1111		0.
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount				<u> </u>
must be shown in column (a))		an wa wan	· · · · · · · · · · · · · · · · · · ·	WINN WINNS
6 Enter the net total of each column as indicated below.		त्राताहरू व्यवस्थाति अत्राताहरू	कामात्रक र भागात्राच मामाणकः काम	ни онина инивал енги
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	787,287.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				Ĭ
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		}
e Undistributed income for 2017. Subtract line				ĺ
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2019				0.
7 Amounts treated as distributions out of		, w.	. # w , \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	A <sub>11</sub> 590461 /9899 YY
corpus to satisfy requirements imposed by		, w w	, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,	» v ^
section 170(b)(1)(F) or 4942(g)(3) (Election		kanama romana mana mana kan	, , , , , , , , , , , , , , , , , , ,	er en u e e muero m
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013				
not applied on line 5 or line 7	110,577.			
9 Excess distributions carryover to 2019.				
Subtract lines 7 and 8 from line 6a	676,710.			
10 Analysis of line 9:	( ) ( ) (0.00)	CV CA 400	CM CM CM CM	WY VI VIII W
a Excess from 2014 173, 992.	a.w.,	w,	"	W
b Excess from 2015 106,181.	manera manara canara canara	allen constitut alitiut	s Aldere processadillation Aller	AMMAN I I AMMANINI
c Excess from 2016 200, 640.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	cama, was as	W	( W.
d Excess from 2017 77, 754.	, , , , , , , , , , , , , , , , , , ,			
e Excess from 2018 118, 143.				5 <b>990</b> -PE (2010)

	M FAMILY FOU				71174 Page 10
Part:XIV Private Operating Fo	<del></del>		I-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for				14040(1)(2) 21	240(1)(5)
b Check box to indicate whether the found		toundation described i		4942(j)(3) or 49	942( <sub>J</sub> )(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2018	(b) 2017	Prior 3 years (c) 2016	(d) 2015	(e) Total
income from Part I or the minimum	(8) 2010	(0) 2017	(6) 2010	(0) 2010	(c) rotar
investment return from Part X for					
each year listed				<del>                                     </del>	
b 85% of line 2a				<del>                                     </del>	
c Qualifying distributions from Part XII,					
line 4 for each year listed  d Amounts included in line 2c not		<del></del>	<u> </u>	1/	
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			+		<u> </u>
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:					ĺ
(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					
(A) Gross investment income					
Part XV Supplementary Infor	rmation (Complet	e this part only i	f the foundation	had \$5,000 or mo	re in assets
<ol> <li>Information Regarding Foundation</li> <li>List any managers of the foundation who</li> </ol>	_	on 20/ of the total cont	ributions received by the	foundation before the elec-	a of any tay
year (but only if they have contributed m			indutions received by the	TOUTIOALION DETOIR THE CIOS	e of any tax
SEE STATEMENT 7					
b List any managers of the foundation who other entity) of which the foundation has			or an equally large portion	on of the ownership of a pa	artnership or
NONE					
2 Information Regarding Contribution	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here <b>X</b> if the foundation of the foundation makes gifts, grants, etc.,	nly makes contributions to	preselected charitable	organizations and does r		ests for funds. If
a The name, address, and telephone numb					
<b>b</b> The form in which applications should be	e submitted and informati	on and materials they st	nould include:	-	
c Any submission deadlines:					
		hand-bl- 6-11-	lendo of motivities		_
d Any restrictions or limitations on awards	s, such as by geographical	areas, charitable fields,	KINGS OF INSTITUTIONS, OF	ouner factors:	

THE BLUM FAMILY FOUNDATION 62-1871174 Form 990-PF (2018) Page 11 Part XV Supplementary Information (continued) Grants and Contributions Paul During the Year or Approved for Future Payment

3 Grants and Contributions Paid During the Recipient	If recipient is an individual,			
Name and address (home or business)	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
a Paid during the year	or substantial contributor	recipient		
- Tale daring the year				
SEE ATTACHED		PC	SEE ATTACHED	220 244
		<del> </del>		229,244.
			· ·	
Total	<u> </u>	<u>I</u>	<b>▶</b> 3a	229,244.
b Approved for future payment				
NONE				
· · · · · ·				
		-		
<b>\</b>				
Total			▶ 3b	0.
IULAI			- 30	orm <b>990-PF</b> /2018

THE BLUM FAMILY FOUNDATION

ter gross amounts unless otherwise indicated.	Unrelated b	usiness income		section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	( <b>d)</b> Amount	Related or exemp
•					
	1	<u>-</u>			
	l l		<del>                                     </del>		
d			+ + + -		
e			1		
g Fees and contracts from government agencies			† †		
Membership dues and assessments			+ + +	+	
Interest on savings and temporary cash			+ + +	-	
			14	9.	
investments	<del></del>	<del></del>	18	27,477.	
Dividends and interest from securities			1 1 9	21,2110	
Net rental income or (loss) from real estate:			+ +		
a Debt-financed property			+ +		
b Not debt-financed property			+ + -		
Net rental income or (loss) from personal					
property			11	-	
Other investment income	-		14	<del></del>	
Gain or (loss) from sales of assets other			10	70 075	
than inventory	<u> </u>		18	78,075.	
Net income or (loss) from special events			+		
Gross profit or (loss) from sales of inventory	-				
Other revenue:					
a	_	<del></del>	<del>                                     </del>		
b	_		<del></del>		
c	1 1		+		
d		<del></del>	+ +		
e	_		+ +	105 561	
Subtotal. Add columns (b), (d), and (e)		0	•	105,561.	105 54
Total. Add line 12, columns (b), (d), and (e)				13	105,5
e worksheet in line 13 instructions to verify calculations	5.)				·
art XVI-B Relationship of Activities	s to the Accom	olishment of Ex	cempt Pu	rposes	
•		olumn (a) of Part XVI-	A contributed	importantly to the accomp	lishment of
ne No. Explain below how each activity for which i					
ne No. Explain below how each activity for which in the foundation's exempt purposes (other the					<del></del>
ne No. Explain below how each activity for which i					
ne No. Explain below how each activity for which in the foundation's exempt purposes (other the					
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ne No. Explain below how each activity for which in the foundation's exempt purposes (other the					

Form 990-PF	(2018) THE B	LUM FAMIL	Y FOUNI	DATION		62-18	71174	Pa	ige 13
Part XVI	I Information Re	_	sfers to ar	nd Transactions ar	nd Relationsh	ips With Noncha	ritable		
	Exempt Organ				<del></del>	504()		Voc	No
	organization directly or indi				on described in sect	ion 501(c)		Yes	No
(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  a Transfers from the reporting foundation to a noncharitable exempt organization of:									
	, -	ation to a noncharitat	ole exempt org	janization of.			12/1)		X
(1) Ca							1a(1) 1a(2)	-	X
٠,	ner assets						14(2)		
	ransactions:	bla avamet aranguat	100				1b(1)		<u> </u>
` '	les of assets to a noncharita	· -					1b(2)	-	X
	rchases of assets from a no		rganization				1b(2)		X
	ntal of facilities, equipment,						1b(3)		X
• •	imbursement arrangements	•					15(5)	$\vdash$	X
	ans or loan guarantees rformance of services or me	mharchin ar fundrais	eina colicitatio	ne			1b(6)		X
• •	of facilities, equipment, ma						10(0)		X
_	nswer to any of the above is				wave chow the fair i	market value of the good		ets.	
	ices given by the reporting f							,010,	
	(d) the value of the goods,			to 1035 than law market valu	io in any transaction	or undring arrangement	,		
(a) Line no	(b) Amount involved			e exempt organization	(d) Description	n of transfers, transactions, ar	nd sharing arr	angemer	nts
(-/	(5)	(-/	N/A			· · · · · · · · · · · · · · · · · · ·			
					1				
$\overline{}$		-							
				-					
						<u> </u>			
$\overline{}$									
	· ·								
							_		
2a Is the f	oundation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt organi	zations described				
ın secti	on 501(c) (other than section	on 501(c)(3)) or in se	ction 527?				Yes	X	No
b If "Yes,"	complete the following sch								
_	(a) Name of or	ganization		(b) Type of organization		(c) Description of relation	nship		
	N/A						_		
	· · · · · · · · · · · · · · · · · · ·				<u> </u>				
					ļ				
					<b>ļ</b>				
						and and annual and an annual and an an			
	der penalties of perjury, I declare d belignatis true, correct, and con	that I have examined this hplete Peolaration of pre	return, including parer (other than	taxpayer) is based on all informa	tatements, and to the be ition of which preparer h	ast of my knowledge has any knowledge	May the IRS return with the	discuss t	his er
Sign Here	11/2 //	Viai		11/2/18			shown below	? See ins	str
1 2	your P	, sway		11/2/19	TRUST	SE	X Yes		No
	ignature of officer or trustee		Drancuele -	Date /	Title	Check If PTI	NI		
	Print/Type preparer's na	ame	Preparer's si	ignature / /	Date	self- employed	IV		
Paid	GAMEDON C	GIVEDON G. TOURISON				, ,	01202	005	
Prepare	CAMERON G.	RON G. JOHNSON Comerce 1 John 11/8/2019  THE DELOITTE TAX LLP				Firm's EIN ► 86 -	$\frac{01202}{10657}$		
Use Onl		OTTE TAX	דוחד	<i>(</i>		FIRM S EIN P 00-	T002/	14	
036 011	*	133 DEMOND	ס אווים ס	T., STE 400	· ·				—
		rm's address ► 1033 DEMONBREUN ST., STE 400 NASHVILLE, TN 37203				Phone no. (615	) 259	_12	0.0
NASAVILLE, IN 3/203 Phone no. (613) 239-1						<del></del>			

## Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

**Employer identification number** 

62-1871174 THE BLUM FAMILY FOUNDATION Organization type (check one): Filers of: Section: Form 990 or 990-EZ \_\_ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

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

Name of organization

Employer identification number

## THE BLUM FAMILY FOUNDATION

62-1871174

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_	JOAN B. SHAYNE  909 BOWRING PARK  NASHVILLE, TN 37215	\$ <u>15,787.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	JOAN B. SHAYNE  909 BOWRING PARK  NASHVILLE, TN 37215	\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occupate Part II for noncash contributions.)

Name of organization

Employer identification number

# THE BLUM FAMILY FOUNDATION

62-1871174

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	idditional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	200 SHARES OF TJX COS NEW COM COST: 1075		
1		\$15,787.	_01/29/18_
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
<del></del>		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

	di lizatio i		Employer Identification fluin				
	JM FAMILY FOUNDATION  Exclusively religious, charitable, etc., contributions	to organizations described in sect	62-1871174 (on 501(c)(7), (8), or (10) that total more than \$1,000 for the				
	from any one contributor. Complete columns (a) this completing Part III, enter the total of exclusively religious, char	rough (e) and the following line entry.	For organizations				
	Use duplicate copies of Part III if additional spa	itable, etc., contributions of \$1,000 of les	is for the year (chief this lift) blice)				
i) 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		Relationship of transferor to transferee				
-							
) No.							
n) 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				
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
_							
	(e) Transfer of gift						
-	Transferee's name, address, and		Relationship of transferor to transferee				
No. rom art 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		Relationship of transferor to transferee				

SOURCE	FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 1
CHECKING	SOURCE		REVE	NUE NET	INVESTMENT	(C) ADJUSTED NET INCOME
FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT    CAPITAL   (A)   (B)   (C)		EREST		9.	9.	9.
SOURCE GROSS AMOUNT DIVIDENDS PER BOOKS MENT INVEST- ADJUSTED NET INVEST	TOTAL TO PART I, LI	NE 3		9.	9.	9.
SOURCE GROSS AMOUNT DIVIDENDS PER BOOKS MENT INCOME NET INCEST- ADJUST NET INCOME ASSOCIATES NT. LP K-1	FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SEC	CURITIES	STATEMENT 2
FROM BELLE MEADE ASSOCIATES NT, LP K-1	SOURCE		GAINS	REVENUI	NET INVES	T- ADJUSTED
TO PART I, LINE 4 27,477. 0. 27,477. 27,4  FORM 990-PF ACCOUNTING FEES STATEMENT  (A) (B) (C) (D) (C) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	FROM BELLE MEADE ASSOCIATES NT, LP					
FORM 990-PF  ACCOUNTING FEES  (A)  EXPENSES  NET INVEST-  PER BOOKS  ACCOUNTING FEES  A,358.  A,358.  TO FORM 990-PF, PG 1, LN 16B  (A)  EXPENSES  A,358.  A,358.  A,358.  O.  FORM 990-PF  OTHER PROFESSIONAL FEES  (A)  EXPENSES  NET INVEST-  ADJUSTED  CHARITA  (C)  (D)  CHARITA  PURPOS  (A)  EXPENSES  NET INVEST-  ADJUSTED  CHARITA  PER BOOKS  MENT INCOME  PURPOS  BANKING FEES  343.  343.  O.						·
TO FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT  (A) (B) (C) (D) (D) (EXPENSES NET INVEST- ADJUSTED CHARITA PER BOOKS MENT INCOME PURPOS  4,358. 4,358. 0.  TO FORM 990-PF, PG 1, LN 16B 4,358. 4,358. 0.  FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT  (A) (B) (C) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	10 11111 1, 11111 1					
EXPENSES NET INVEST- ADJUSTED CHARITA PER BOOKS MENT INCOME NET INCOME PURPOS  ACCOUNTING FEES 4,358. 4,358. 0.  TO FORM 990-PF, PG 1, LN 16B 4,358. 4,358. 0.  FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT  (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITA PER BOOKS MENT INCOME NET INCOME PURPOS  BANKING FEES 343. 343. 0.	FORM 990-PF		ACCOUNTI	NG FEES		STATEMENT 3
TO FORM 990-PF, PG 1, LN 16B 4,358. 4,358. 0.  FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT  (A) (B) (C) (D)  EXPENSES NET INVEST- ADJUSTED CHARITA PER BOOKS MENT INCOME NET INCOME PURPOS  BANKING FEES 343. 343. 0.	DESCRIPTION		EXPENSES	NET INVEST-	- ADJUSTED	CHARITABLE
FORM 990-PF  OTHER PROFESSIONAL FEES  (A)  EXPENSES  NET INVEST- ADJUSTED  CHARITA PER BOOKS  BANKING FEES  343.  343.  0.	ACCOUNTING FEES	_	4,358.	4,358	 3.	0. 0.
(A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITA PER BOOKS MENT INCOME NET INCOME PURPOS BANKING FEES 343. 343. 0.	TO FORM 990-PF, PG	1, LN 16B	4,358.	4,358	3.	0. 0.
DESCRIPTION EXPENSES NET INVEST- ADJUSTED CHARITA PER BOOKS MENT INCOME NET INCOME PURPOS  BANKING FEES 343. 343. 0.	FORM 990-PF	0'	THER PROFES:	SIONAL FEES		STATEMENT 4
	DESCRIPTION		<b>EXPENSES</b>	NET INVEST	- ADJUSTED	CHARITABLE
	BANKING FEES	_	343.	343	3 <b>.</b> ,	0. 0.
TO FORM 990-PF, PG 1, LN 16C 343. 0.	TO FORM 990-PF, PG	1, LN 16C	343.	343	3.	0. 0.

FORM 990-PF	XAT	ES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
IRS TAXES FOREIGN TAXES PAID	7,300. 105.		0.	0.	
TO FORM 990-PF, PG 1, LN 18	7,405.	105.	0.	0.	

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 6
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
BELLE MEADE ASSOCIATES NT, LP	COST	1,101,292.	2,181,081.
TOTAL TO FORM 990-PF, PART II,	LINE 13	1,101,292.	2,181,081.

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FORM 990-PF	PART XV - LINE 1A	STATEMENT 7
	LIST OF FOUNDATION MANAGERS	

NAME OF MANAGER

JOAN B. SHAYNE LAUREN BLUM