2949134114408

EXTENDED TO NOVEMBER 15, 2019
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.

For calendar year 2018 or tax year be	ginning		, and ending		· · · · · · · · · ·
Name of foundation				A Employer identification	number
DESHAZO FOUNDATI		7 50171777		62 1100020	
F/K/A - MITCHELL			Room/suite	63-1190038	_
Number and street (or P O box number if ma		adress)	Room/suite	B Telephone number 205-982-55	0.0
200 KILSBY CIRCL				_	
City or town, state or province, count BESSEMER, AL 35	ry, and ZIP or foreign p 022	ostal code		C If exemption application is pe	ending, check here
	utial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	check hare
	nal return	Amended return	The public charity	1. Poreign organizations	, Check here
=	ddress change	Name change	1	Foreign organizations med check here and attach cou	eting the 85% test,
H Check type of organization:		empt private foundation		1	
Section 4947(a)(1) nonexempt			tion UH	If private foundation state under section 507(b)(1)	
I Fair market value of all assets at end			Accrual	F If the foundation is in a (• • •
(from Part II, col. (c), line 16)	· —	ther (specify)		under section 507(b)(1)	
		nn (d) must be on cash basis	.)	(// /	
Part I Analysis of Revenue and E	xpenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
necessarily equal the amounts in	column (a))	expenses per books	ıncome	income	(cash basis only)
1 Contributions, gifts, grants,	etc., received	459,083.		. <u>N/A</u>	***
2 Check Interest on savings and temporary	not required to attach Sch. B				1
3 cash investments	1		.		
4 Dividends and interest from	securities				
5a Gross rents		<u> </u>	*** ·		
b Net rental income or (loss)		<u></u>			•
6a Net gain or (loss) from sale of assi	ets not on line 10				A
D assets on line 6a		-		<u> </u>	
	t IV, line 2)	ļ	0.	<u>-</u>	
o Net Short-term capital gain			·	ļ	
9 Income modifications Gross sales less returns		-		1	<u> </u>
10a and allowances	· · · · · · · · · · · · · · · · · · ·			· - ·	<u> </u>
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income 12 Total. Add lines 1 through 1	11	459,083.	0.		
13 Compensation of officers, directo		0.	0.	· ·	0.
14 Other employee salaries and	•			· -	•
15 Pension plans, employee be	•				
	STMT 1	971.	0.	-	0.
b Accounting fees c Other professional fees	STMT 2	7,376.	0.	-	0.
c Other professional fees			·		\
9 17 Interest				TITEL	78/
18 Taxes				SECENT.	101
19 Depreciation and depletion				RECEIVED 2019	121
20 Occupancy	1			1 101 Kg	
21 Travel, conferences, and me	etings			8/ 10	ران
22 Printing and publications				18 OPEN	
23 Other expenses	STMT 3	5,872.	0.	OGDEN	0.
24 Total operating and admini	strative				
expenses Add lines 13 thro	ough 23	14,219.	0.		0.
25 Contributions, gifts, grants r	oaid	271,215.			271,215.
26 Total expenses and disburs	ements				
Add lines 24 and 25		285,434.	0.		271,215.
27 Subtract line 26 from line 12	2:				
a Excess oftevenue over expenses		173,649.			
b Net investment income (if no	egative, enter -0-)				<u> </u>
c Adjusted net income (if nega		نے با	-	N/A_	
823501 12-11-18 LHA For Paperwo	rk Reduction Act Notice	e, see instructions.		12.1	Form 990-PF (2018)

Form 990-PF (2018) F/K/A - MITCHELL INDUSTRIES FOUNDATION 63-1190038

Б	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	18,774.	192,423.	192,423.
		Savings and temporary cash investments	·		
		Accounts receivable			-
	•	Less: allowance for doubtful accounts			·
	4	Pledges receivable	-		7
	,	Less: allowance for doubtful accounts			
		Grants receivable		· · · · · ·	
	0				
	0	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons			
	7	Other notes and loans receivable		- -	
		Less: allowance for doubtful accounts			
şţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
•		Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans		;	· · · ·
	13	Investments - other			
	14	Land, buildings, and equipment: basis		-	
		Less accumulated depreciation			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	18,774.	192,423.	192,423.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ś	19	Deferred revenue			<u> </u>
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
	22	Other liabilities (describe >)			
				_	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31			
Ses		Unrestricted			
lan	25	Temporarily restricted			
Ba	26	Permanently restricted			-
핕		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	18,774.	192,423.	
Š	30	Total net assets or fund balances	18,774.	192,423.	<u> </u>
	١		18,774.	192,423.	
_	31	Total liabilities and net assets/fund balances	7.0	194,443.	
P	<u>art</u>	III Analysis of Changes in Net Assets or Fund Ba	alances		
1	Tota	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	18,774.
		r amount from Part I, line 27a		2	173,649.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	192,423.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	192,423.
					Form 990-PF (2018)

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		of property sold (for exam r common stock, 200 shs.		te,	Ι Р	low acc - Purch - Donat	ase i	(c) Date : (mo., d	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
<u>1a</u>	NTD				_					
b NO	NE		<u> </u>		+					<u>.</u>
d d	<u>-</u>	-					$\overline{}$			
e		•		·						-
(e) Gross sales price		epreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss (f) minus (
<u>a</u>										
<u>b</u> /				 						
<u>c</u>				=	-+					
e										. <u> </u>
Complete only for assets shown	ng gain in c	olumn (h) and owned by th	ne foundation	on 12/31/69.	<u> </u>		() Gains (C	ol. (h) gain	minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E>	cess of col. (I)				l. (k), but r	ot less that (from col. (1 - 0-) or
a										
<u>b</u>	ļ	<u> </u>								
<u>c</u>			~							
<u>d</u>										
<u>e</u>		1			$\overline{}$	Ĭ				
2 Capital gain net income or (net ca	apıtal loss)	$\begin{cases} \text{ If gain, also enter} \\ \text{If (loss), enter -0-} \end{cases}$	in Part I, line in Part I, line	7 7)	2				
3 Net short-term capital gain or (lo			i (6):		٦					
If gain, also enter in Part I, line 8 If (loss), enter -0- in Part I, line 8) .			1	,				
Part V Qualification U	nder Se	ction 4940(e) for I	Reduced	Tax on Net	Inve	stme	nt Inco	ome		
If section 4940(d)(2) applies, leave t Was the foundation liable for the sec If "Yes," the foundation doesn't quali 1 Enter the appropriate amount in	tion 4942 to fy under sec	ax on the distributable amo tion 4940(e). Do not comp	olete this part	<u>. </u>						Yes X No
(a) Base period years	each colum	(b)			(c)				Dietrih	(d)
Calendar year (or tax year beginn	ng in)	Adjusted qualifying distr		Net value of no	onchar					ided by col. (c))
2017			2,785.				,159			4.025235
2016			0,035.				793			1.531482
2015			2,000. 5,532.				,989 ,913			8.454613 6.960373
2014 2013			5,900.				827			15.977608
2010			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•		7 4 - 7		_	
2 Total of line 1, column (d)								2		36.949311
3 Average distribution ratio for the	5-year base	period - divide the total of	n line 2 by 5.0), or by the numbe	er of y	ears				
the foundation has been in existe	nce if less t	han 5 years						3	_	7.389862
4 Enter the net value of noncharital	ole-use asse	ets for 2018 from Part X, II	ne 5					4		112,462.
5 Multiply line 4 by line 3								5		831,079.
6 Enter 1% of net investment incor	ne (1% of P	art I, line 27b)						6		0.
7 Add lines 5 and 6								7		831,079.
8 Enter qualifying distributions from	n Part XII, I	ine 4						8	_	271,215.
If line 8 is equal to or greater tha See the Part VI instructions.	n line 7, che	ck the box in Part VI, line	1b, and comp	lete that part usin	g a 1%	6 tax ra	te			

DESHAZO FOUNDATION

Form	990-PF (2018) F/K/A - MITCHELL INDUSTRIES F			<u>63-11</u>	90038	Page 4	
Pa	rt VI Excise Tax Based on Investment Income (Section 49	40(a), 4940(b), 4	940(e), or 49	48 - se	e instruc	tions)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and	l enter "N/A" on line 1.	j				l
	Date of ruling or determination letter: (attach copy of letter if n	ecessary-see instruct	tions)				l
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1	% }	1		0.	1
	of Part I, line 27b						1
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter $\frac{1}{2}$	4% of Part I, line 12, c	ol. (b). 丿				J
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only;	others, enter -0-)		2		0.	
3	Add lines 1 and 2			_3		0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only;	others, enter -0-)		_4		<u>0.</u>	,
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5		0.	ì
6	Credits/Payments:	1 1	•	'		1	ł
	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	0.	'			ł
	Exempt foreign organizations - tax withheld at source	6b	0.				ł
	Tax paid with application for extension of time to file (Form 8868)	6c	0.	·			ł
	Backup withholding erroneously withheld	6d	0.				Į
7	Total credits and payments. Add lines 6a through 6d			7		0.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is a	ttached		8			
40	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		l Datum dad	10			
	Enter the amount of line 10 to be: Credited to 2019 estimated tax rt VII-A Statements Regarding Activities		Refunded >	11			,
_	During the tax year, did the foundation attempt to influence any national, state, or local let	riciation or did it partie	unata ar intariona	.n	1	Yes No	
14	any political campaign?	Jisiation of the it partit	ipate of intervene	111	1a	X	
h	Did it spend more than \$100 during the year (either directly or indirectly) for political pur	onses? See the instruc	tions for the defini	tion	1b	X	
Ū	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copie						l
	distributed by the foundation in connection with the activities.	o or any materiale pue	noned of				1
c	Did the foundation file Form 1120-POL for this year?				10	X	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during t	he vear:					1
-	(1) On the foundation. ▶ \$ 0. (2) On foundation manager		0.				1
е	Enter the reimbursement (if any) paid by the foundation during the year for political exper						1
	managers. ▶ \$0 .	•					
2	Has the foundation engaged in any activities that have not previously been reported to the	IRS?			2	X	
	If "Yes," attach a detailed description of the activities.,						1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing	g instrument, articles o	of incorporation, or				1
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3	X	
	Did the foundation have unrelated business gross income of \$1,000 or more during the y	ear?			4a	X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N/A	4 <u>b</u>	<u> </u>	,
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year	ır?			5	X	ı
	If "Yes," attach the statement required by General Instruction T.						l
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied	either:					l
	By language in the governing instrument, or			_			1
	By state legislation that effectively amends the governing instrument so that no mandat	ory directions that cor	iflict with the state	law			l
_	remain in the governing instrument?		10.1101		6	X	
7	Did the foundation have at least $5,000$ in assets at any time during the year? If "Yes," con	npiete Part II, col. (c),	and Part XV		7	 ^ 	l
•	Catanatha atabana ta uuhush tha fauradatuan vananta ar uuth uuhush it in vanastavad. Caa inateria						l
8a	Enter the states to which the foundation reports or with which it is registered. See instruct ${f AL}$	lions			— <u>I</u> ,		l
L	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attornov Constal (st	decianato)		— I		
Ð		ALLOTTIES GETTERAL (OF	ucsiyiidik)		8b	x	
9	of each state as required by <i>General Instruction G?</i> If "No," attach explanation is the foundation claiming status as a private operating foundation within the meaning of	section ADA2(1)(2) or a	1942(1)/5) for onlar	ıdar	00	 	
3	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," co	*** *	TOTE (I)(O) TO CATE	iuai	9	X.	
_10	Did any persons become substantial contributors during the tax year? If "Yes," attach a sche		d addresses		10	X '	_
_,,,	200 201 Per cours accounts accounting countries against the mary four 11 165, dilatel a solit	noung tries flattes at	- 400103353			0-PF (2018)	

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Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		<u> </u>
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		<u>X</u>
13		13	_X_	
	Website address NONE			
14	The books are in care of ► CYNTHIA GRIFFITH Telephone no. ► (205)9		550	0
	Located at ► 1121 RIVERCHASE OFFICE ROAD, BIRMINGHAM, AL ZIP+4 ►35	<u> 244</u>		_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		, •	·
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
n.	foreign country			-
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	-	Vaa	NI-
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	a During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X 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.) Yes X No			
	termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	. 10		$\overline{}$
,	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
•	before the first day of the tax year beginning in 2018?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
_	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?			
	If "Yes," list the years \blacktriangleright ,,,,			
t	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.) N/A	2b		
(c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	,		
	>			
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
્ા	b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after	`		
-	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2018.) N/A	3b		
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			لــــا
	had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		X
	For	m 99 ()-PF	(2018)

Part VII-B	Statements Regarding Activities for Which F	orm 4/20 May Be R	equired <u>(contin</u>	ued)			
•	year, did the foundation pay or incur any amount to:					Yes	No
	on propaganda, or otherwise attempt to influence legislation (section			es X No			
• •	nce the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire		(32)			
=	oter registration drive?	•		es X No		1 1	
	le a grant to an individual for travel, study, or other similar purposes		Y(es X No			
	le a grant to an organization other than a charitable, etc , organization d)(4)(A)? See instructions	ii described iii section		es X No	1		
•	le for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or f		55 <u>LL</u> 110			
	evention of cruelty to children or animals?	or deductional perposes, or t		es X No		ŀ	
•	ver is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i					
	4945 or in a current notice regarding disaster assistance? See instru		-	N/A	5b		
Organizatio	ons relying on a current notice regarding disaster assistance, check t	nere					
c If the answ	er is "Yes" to question 5a(4), does the foundation claim exemption fi						
•	e responsibility for the grant?	Ŋ	I/A Y	es LLI No			
	each the statement required by Regulations section 53.4945-5(d).						
	indation, during the year, receive any funds, directly or indirectly, to benefit contract?	pay premiums on		es X No		l.	
	indation, during the year, pay premiums, directly or indirectly, on a p	personal hanefit contract?	11	es LALINO I	6b		X
	6b, file Form 8870.	ersonal benefit contract.		ŀ	-		
	e during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y	es X No			,
-	d the foundation receive any proceeds or have any net income attribu			Ŋ/A	7b		
8 Is the foun	dation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or					
excess par	achute payment(s) during the year?			s X No			
Part VIII	Information About Officers, Directors, Truste Paid Employees, and Contractors	es, Foundation Mar	nagers, Highly				
l List all offi	cers, directors, trustees, and foundation managers and the	neir compensation					
List all offi	ocis, ancocos, a ascess, and roundation managers and t	r '' '	(c) Compensation	(d) Contributions to	I	(e) Exp	ense
	(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	⁵ a	(e) Exp ccount, allowai	other
		to position	Cinci o j	compensation	†	unotra	
SEE STA	TEMENT 4		0.	0.			0.
		<u>[</u>					
			ļ		∔_		
		-					
	-	1	+				
					+		
 -		1					
		1					
2 Compensa	tion of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."				
(a) Na	me and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	, a	(e) Exp ccount,	ense other
		hours per week devoted to position	(c) compensation	compensation		allowa	nces
N	ONE						
				- "	+-		
		1					
<u> </u>	<u> </u>				+		
	-	1					
 -			1	_	T		
		1					
					1		
Total number o	of other employees paid over \$50,000			•			0
				Forn	n 99 (D-PF	(2018)

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Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, en	ter "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		▶ 0
Part IX-A Summary of Direct Charitable Activities	· · · · · · · · · · · · · · · · · · ·	
List the foundation's four largest direct charitable activities during the tax year. Include relevant st number of organizations and other beneficiaries served, conferences convened, research papers p	atistical information such as the roduced, etc.	Expenses
2		
3		
4		
Part IX-B Summary of Program-Related Investments	22/22/42/40	
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 <u>N/A</u>		0.
2		
All other program-related investments. See instructions.		
		

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Total. Add lines 1 through 3

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) 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 Average of monthly cash balances 1b c Fair market value of all other assets 1c d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 114.175Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 112,462. Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 623 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.) 5,623. Minimum investment return from Part X, line 6 1 Tax on investment income for 2018 from Part VI, line 5 Income tax for 2018. (This does not include the tax from Part VI.) b Add lines 2a and 2b 2c 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 A Recoveries of amounts treated as qualifying distributions 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 5,623 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part:XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 271,215. 1a Program-related investments - total from Part IX-B 1b b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: 3 Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b h 271,215. Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 6 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

Form **990-PF** (2018)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

		(a)	(b)	(c)	(d)
		Corpus	Years prior to 2017	2017	2018
1 D	istributable amount for 2018 from Part XI,		-		
h	ne 7			<u>-</u>	5,623.
2 U	ndistributed income, if any, as of the end of 2018				
аE	nter amount for 2017 only			0.	
ЬT	otal for prior years:				
_	,,	'	0.		
3 E	xcess distributions carryover, if any, to 2018:				
аF	rom 2013 236,159.			.•	
bF	rom 2014 324, 186.				
	rom 2015 260,451.				
_	rom 2016 251,816.	,			
	rom 2017 338,527.	1 411 120			ļ
	otal of lines 3a through e	1,411,139.			
	ualifying distributions for 2018 from				
	art XII, line 4: ► \$ 271,215.			0	
	pplied to 2017, but not more than line 2a			0.	-
	pplied to undistributed income of prior		0.		
_	ears (Election required - see instructions)	.,	<u> </u>		
	reated as distributions out of corpus	0.		1	
•	Election required - see instructions)	0.			5,623.
	pplied to 2018 distributable amount lemaining amount distributed out of corpus	265,592.	<u> </u>		7,023.
	xcess distributions carryover applied to 2018	203,332.			0.
(1	an amount appears in column (d), the same amount	•			
6 E	nust be shown in column (a)) nter the net total of each column as ndicated below:				·
	orpus Add lines 3f, 4c, and 4e Subtract line 5	1,676,731.	•	:	
	rior years' undistributed income. Subtract	2,070,732.			
	ne 4b from line 2b		0.		
	nter the amount of prior years'			· · · -	
u d	ndistributed income for which a notice of eficiency has been issued, or on which ne section 4942(a) tax has been previously				
	ssessed		0.		
d S	ubtract line 6c from line 6b. Taxable				
a	mount - see instructions	1	. 0.		
еl	Indistributed income for 2017. Subtract line				
4	a from line 2a. Taxable amount - see instr.			0.	
	Indistributed income for 2018. Subtract				
	nes 4d and 5 from line 1. This amount must	i			_
	e distributed in 2019				0.
	mounts treated as distributions out of				
	orpus to satisfy requirements imposed by	:			
	ection 170(b)(1)(F) or 4942(g)(3) (Election	0.			
	nay be required - see instructions)	0.			
	xcess distributions carryover from 2013	236,159.			•
	ot applied on line 5 or line 7 xcess distributions carryover to 2019.	230,133.	-		
	ubtract lines 7 and 8 from line 6a	1,440,572.			
	nalysis of line 9:	1,120,3120		•	• ·
	xcess from 2014 324, 186.				
	xcess from 2015 260, 451.				
	xcess from 2016 251,816.			İ	
	xcess from 2017 338,527.				
	xcess from 2018 265, 592.				

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Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year ALABAMA BALLET N/A NON-PROFIT UNRESTRICTED 2726 1ST AVE S DRGANIZATION BIRMINGHAM, AL 35233 45,000. ALABAMA WILDLIFE FEDERATION N/A NON-PROFIT UNRESTRICTED 3050 LANARK RD ORGANIZATION MILLBROOK, AL 36054 1,000. ALLEGHANY MEMORIAL HOSPITAL N/A NON-PROFIT UNRESTRICTED 233 DOCTORS ST ORGANIZATION 20,000. SPARTA, NC 28675 N/A INRESTRICTED BAYLOR SCHOOL NON-PROFIT 171 BAYLOR SCHOOL RD ORGANIZATION CHATTANOOGA, TN 37405 50,000. UNRESTRICTED BIRMINGHAM MUSEUM OF ART N/A NON-PROFIT ORGANIZATION 2000 REVEREND ABRAHAM WOODS JR. BOULEVARD BIRMINGHAM, AL 35203 10,000. CONTINUATION SHEET(S) **▶** 3a SEE 271,215, b Approved for future payment NONE 0. Total Form 990-PF (2018)

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor UNRESTRICTED COLLEGE FOUNDATION OF UVA N/A NON-PROFIT 248 MCCORMICK RD DRGANIZATION CHARLOTTESVILLE, VA 22904 5,000. FIREHOUSE MINISTRIES UNRESTŔICTED N/A NON-PROFIT 1501 3RD AVE N DRGANIZATION BIRMINGHAM, AL 35203 62,500. FOUNDATION MARSHALL MEDICAL CENTER NON-PROFIT UNRESTRICTED N/A 2320 HOMER CLAYTON DR ORGANIZATION GUNTERSVILLE, AL 35976 2,500. GLENWOOD INC. N/A NON-PROFIT UNRESTRICTED 150 GLENWOOD LN ORGANIZATION BIRMINGHAM, AL 35242 35,715. HOMEWOOD CITY SCHOOLS FOUNDATION N/A NON-PROFIT UNRESTRICTED DRGANIZATION PO BOX 59764 2,000. HOMEWOOD, AL 35259 MONDAY MORNING QUARTERBACK CLUB UNRESTRICTED N/A NON-PROFIT 2019 4TH AVE N. SUITE 101 ORGANIZATION BIRMINGHAM, AL 35203 2,500. THE ALTAMONT SCHOOL N/A NON-PROFIT UNRESTRICTED 4801 ALTAMONT RD S ORGANIZATION BIRMINGHAM, AL 35222 10,000. N/A UNRESTRICTED THE ROARING GAP FUND NON-PROFIT ORGANIZATION 2663 ROARING GAP DR ROARING GAP, NC 28668 12,500. UNITED WAY OF CENTRAL ALABAMA N/A NON-PROFIT UNRESTRICTED 3600 8TH AVE S ORGANIZATION BIRMINGHAM, AL 35222 10,000. * VESTAVIA HILLS HIGH SCHOOL N/A NON-PROFIT UNRESTRICTED 2235 LIME ROCK RD ORGANIZATION VESTAVIA HILLS, AL 35216 2,500. 145,215. Total from continuation sheets

F/K/A - MITCHELL INDUSTRIES FOUNDATION

<u>·1190038</u> Page 1	1100020 04
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Part XVI-A	Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code	7	Code	, who drive	- Tanotion modifie
<u> </u>					
b	-		 		
c					
· · · · · · · · · · · · · · · · · · ·					
e			+-		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property				<u> </u>	
6 Net rental income or (loss) from personal					
property 7 Other investment income	<u> </u>		+		
8 Gain or (loss) from sales of assets other			+		
than inventory					
9 Net income or (loss) from special events	1		<u> </u>	··-· ··	
10 Gross profit or (loss) from sales of inventory			1		
11 Other revenue:					
a					
b					
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0	•	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	0.
(See worksheet in line 13 instructions to verify calculations.)					- <u>-</u> -

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

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

Form **990-PF** (2018)

823621 12-11-18

Form 990-PF (2	2018) F/K/A	- MITCHELL IND	USTRIES FOUND	DATION	63-11	90038	Page 13
Part XVII	Information Re Exempt Organ	egarding Transfers to a izations	nd Transactions ar	nd Relationsh	ps With Noncha	ritable	
1 Did the or	rganization directly or indi	rectly engage in any of the followin	g with any other organization	on described in secti	on 501(c)	1	es No
		izations) or in section 527, relating			()		
•		ation to a noncharitable exempt or					
(1) Cash	, ,	mon to a nononanable exempt or	gamzation or,			10/11	X
	* ***					1a(1)	X
(2) Other				•	•	1a(2)	- ^- -
b Other trai	·						
	s of assets to a noncharital	-		••	••••	1b(1)	X
		ncharitable exempt organization			•	1b(2)	<u> X</u>
• •	al of facilities, equipment,	or other assets				1b(3)	X
(4) Reim	nbursement arrangements	***				16(4)	X
(5) Loan	is or loan guarantees				••	1b(5)	X
(6) Perfo	ormance of services or me	mbership or fundraising solicitatio	ns			1b(6)	X
c Sharing o	of facilities, equipment, ma	ılıng lists, other assets, or paıd em	ployees .			1c	X
d If the ans	wer to any of the above is	"Yes," complete the following sche	dule. Column (b) should al	ways show the fair n	narket value of the good:	s, other asset	s,
or service	es given by the reporting fo	oundation. If the foundation receive	ed less than fair market valu	e in any transaction	or sharing arrangement	show in	
column (d	d) the value of the goods, (other assets, or services received					
(a)Line no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description	of transfers, transactions, ar	d shanng arrang	gements
		N/A					
							
· · · · · · · · · · · · · · · · · · ·			· <u> </u>				
- · · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			<u> </u>		
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<u> </u>				+			
					 		
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	············	<u>.</u>		 			
On In the fee		h. efficient of with an elected to an		Tobana dagarihad			
	•	tly affiliated with, or related to, one	or more tax-exempt organi	zauons described			X No
		n 501(c)(3)) or in section 527?	•		*****	Yes	<u>▼</u> 140
b IT Yes, c	omplete the following sche		Its Time of accounts		(-) Description of volution		
	(a) Name of org	anization	(b) Type of organization		(c) Description of relation	lisilib	
	N/A						
							
		_					
	<u> </u>						
1,				<u></u>			
		hat I have examined this return, including plete Declaration of preparer (other than			n and knowledge	May the IRS dis	cuss this
Sign L	M 11.	11 610 11	11.11.11.0		1 ;	eturn with the p shown below?	ee instr
Here	7 Callina	M. Cliate	ey 11/6/19	DIRECT	OR	X Yes	L No
Sigi	nature of officer or trustee	······	, Date	Title	L		
	Print/Type preparer's na	me Preparer's \$1	gňature	Date	Check if PTI	N	
			11/1 VODA		self- employed		
Paid	JOHN P. SH	ANK, CPA † /_/	1/MUA	<u> </u>		001673	
Preparer	Firm's name ► BMS	S, LLC			Firm's EIN ► 46-	1498 8 7	0
Use Only	L						
	Firm's address ▶ 11	21 RIVERCHASE OF	FFICE RD				
	BI	RMINGHAM, AL 35	244		Phone no. 205-	982-55	00
						Form 990-	

· · · · · · · · · · · · · · · · · · ·				
FORM 990-PF	LEGAL	FEES	S	TATEMENT 1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
MAYNARD, COOPER, & GALE	971.	0.		0.
TO FM 990-PF, PG 1, LN 16A	971.	0.		0.
FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS			(D) CHARITABLE PURPOSES
BARFIELD, MURPHY, SHANK, & SMITH, LLC	7,376.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	7,376.	0.		0.
FORM 990-PF	OTHER E	XPENSES	s	TATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
BANK CHARGES	378.	0.		0.
OFFICE, GENERAL AND ADMINISTRATIVE EXPENSE	5,494.	0.		0.
TO FORM 990-PF, PG 1, LN 23	5,872.	0.		0.

	LIST OF OFFICERS, DI AND FOUNDATION MANAG		STAT	EMENT 4
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
MALVINA M. WHATLEY 10 PINE CREST ROAD BIRMINGHAM, AL 35223	DIRECTOR 0.50	0.	0.	0.
KATHARINE J MITCHELL 401 SABAL PALM LANE VERO BEACH, FL 32963	VICE PRESIDENT 0.50	. 0.	0.	0.
GUY K MITCHELL, III 3249 DELL ROAD BIRMINGHAM, AL 35223	DIRECTOR 0.50	0.	0.	0.
DOROTHY L. MITCHELL 2400 CAHABA ROAD, SUITE 130 BIRMINGHAM, AL 35223	DIRECTOR 0.50	0.	0.	0.
GUY K MITCHELL, JR. 401 SABAL PALM LANE VERO BEACH, FL 32963	PRESIDENT 0.50	0.	0.	0.
	_			
TOTALS INCLUDED ON 990-PF, PAGE	E 6, PART VIII	0.	0.	0.

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2018

Name of the organization

DESHAZO FOUNDATION

F/K/A - MITCHELL INDUSTRIES FOUNDATION

Employer identification number

63-1190038

Organization type (check one)		
Filers of:	:	Section:
Form 990	0 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	0-PF	501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		X 501(c)(3) taxable private foundation
	, ,	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions
General	Rule	
X	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions.
Special	Rules	
	sections 509(a)(1) any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under nd 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 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, line 1. Complete Parts I and II
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the ions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the y to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address),
	year, contributions is checked, enter he purpose Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., inplete any of the parts unless the General Rule applies to this organization because it received nonexclusively, etc., contributions totaling \$5,000 or more during the year
but it mu	ust answer "No" on f	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 be filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

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

Name of organization

DESHAZO FOUNDATION

Employer identification number

F/K/A - MITCHELL INDUSTRIES FOUNDATION

63-1190038

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	MITCHELL INDUSTRIES, INC. 200 KILSBY CIRCLE BESSEMER, AL 35022	\$\$59,083.	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 Occupate 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 Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occuplete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Ocomplete Part II for noncash contributions)

Name of organization

Employer identification number

DESHAZO FOUNDATION

F/K/A - MITCHELL INDUSTRIES FOUNDATION

63-1190038

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if ac	dditional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	. (d) Date received
		\$	<u>-</u>
(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
		\$	
(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
		\$	

Employer identification number

DESHAZO FOUNDATION

$\mathbf{F}/\mathbf{K}/\mathbf{A}$	- MITCHELL INDUSTRIES	FOUNDATION	63-1190038
Part III	Exclusively religious, charitable, etc., contri	butions to organizations described in secti	on 501(c)(7), (8), or (10) that total more than \$1,000 for the ye

	se duplicate copies of Part III if additional	space is needed	SS for the year (Enler this info once) \$
No. m tl	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
- 		(e) Transfer of gift	
	Transferee's name, address, ar		Relationship of transferor to transferee
o. n	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
D. 1	(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
D. 1	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
- -		(a) Transfer of site	
1		(e) Transfer of gift	