Form 990-PF

Return of Private Foundation

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

2018

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.

Open to Public Inspection

	me of for		and ending		A Emplo	oyer identification number	
140					A Empire	yer identification number	
7	SHB	URN FAMILY FOUNDATION			63.	-1228439	
		d street (or P O box number if mail is not delivered to street address)	R	oom/suite	+	none number (see instruction	s)
4	010	PEPPERWOOD CIRCLE SW			250	6-382-5263	•
	-	n, state or province, country, and ZIP or foreign postal code	·		C If exer	nption application is pending,	ahaak hara
H	UNT	SVILLE AL 35801		<u> </u>	C li exer	inplion application is pending,	uleck field
G	Check	all that apply 🔃 Initial return 🔃 Initial retu	rn of a former public o	harity	D 1. Fo	reign organizations, check he	ere 🕨
		Final return Amended	return		2 Fo	reign organizations meeting t	he
		Address change Name cha	inge		85	% test, check here and attach	computation ►
н	Check	type of organization X Section 501(c)(3) exempt private	foundation	(1/2	E If priva	ate foundation status was terr	ninated under
			le private foundation	UM	1	n 507(b)(1)(A), check here	▶
		ket value of all assets at J Accounting method	X Cash Acc	crual	F If the f	oundation is in a 60-month te	rmination
е	nd of y	ear (from Part II, col (c), Other (specify)			1	section 507(b)(1)(B), check h	. 1
	ne 16)		be on cash basis)		}		
	art I		(a) Revenue and	40.3.81		4-3-4-111	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	(b) Net in inco		(c) Adjusted net income	for charitable purposes
	т.	the amounts in column (a) (see instructions))	DOORS	ļ. ————			(cash basis only)
2	1	Contributions, gifts, grants, etc , received (attach schedule)		 			
1/	2	Check ▶ X if the foundation is not required to attach Sch B		<u> </u>			
//	3	Interest on savings and temporary cash investments	90		90	· · · · · · · · · · · · · · · · · · ·	
4	4	Dividends and interest from securities	111,636	1	11,636		
`	5a	Gross rents					
re	b	Net rental income or (loss)		ļ			
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	20,793	 -			
ě	b	Gross sales price for all assets on line 6a					
œ	7	Capital gain net income (from Part IV The 2)		 	20,793		
8	8	Net short-term capital dain		<u> </u>		0	<u> </u>
2020	9	Net short-term capital gain Income modifications Gross sales less returns and allowances Less Cost of goods sold	\	 			
-	10a	Gross sales less returns and allowances					
-	b	Less Cost of goods sold Gross profit or (loss) (attach schedule) Other income (attach schedule)		ļ		<u> </u>	<u> </u>
æ	С	Gross profit or (loss) (attach schedule) Other income (attach schedule) Total. Add lines 1 through 1		 			
FEB	11	Other income (attach schedule)	120 510		20 510		• ,
	12	Total. Add lines 1 through 1	132,519		32,519	0	10.500
回 s	13	Compensation of officers, directors, trustees, etc	12,500	<u> </u>			12,500
Z S	14	Other employee salaries and wages	 _	<u> </u>			
E B	15	Pension plans, employee benefits		 		 	
S _M	16a	Legal fees (attach schedule)	2 475	 -			2 475
ه در	b	Accounting fees (attach schedule) Other professional fees (attach schedule) STMT 1 STMT 2	2,475 18,000				2,475 18,000
aţį	C 47		18,000	 			18,000
štri	17	Interest 57 Taxes (attach schedule) (see instructions) STMT 3	1,215	 			1,215
. <u>E</u>	18		1,213	 			1,215
Ξ	19	Depreciation (attach schedule) and depletion		 			
Αd	20	Occupation		 			
ρ	21 22	Travel, conferences, and meetings Printing and publications		 			
-	l	- · · · · · · · · · · · · · · · · · · ·		 			
ing	23	Other expenses (att sch) Total operating and administrative expenses.					
ati	44	Add lines 13 through 23	` 34,190		o		34,190
SCANNED Operating and Administrative Expenses	25	Contributions-grifts, grants paid	255,000				255,000
ō	26	Total expenses and disbursements. Add lines 24 and 25	289,190			0	289,190
-	27	Subtractline 26 from line 12			-	,	
	1	Excess of revenue over expenses and disbursements	-156,671	٠, د			
	a	Net investment income (if negative, enter -0-)			32,519		
	b c	Adjusted net income (if negative, enter -0-)		<u></u>	,	0	
	<u> </u>	Adjusted Het Income (il negative, enter -0-)					<u>-</u> -

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with 2,871,740 end-of-year figure reported on prior year's return) -156,671 2 2 Enter amount from Part I, line 27a 3 3 Other increases not included in line 2 (itemize) ▶ 2,715,069 4 4 Add lines 1, 2, and 3 5 5 Decreases not included in line 2 (itemize) ▶ 2,715,069 6 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Form 990-PF (2018)

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

8

Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

Forn	1 990-PF (2018) ASHBURN FAMILY FOUNDATION 63-1228439			Р	age 4	,
<u>Pa</u>	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)			_		
1a	Exempt operating foundations described in section 4940(d)(2), check here X and enter "N/A" on line 1					ĺ
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)					l
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check N/A					
_	here and enter 1% of Part I, line 27b		_			l
^	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of					1
·						
_	Part I, line 12, col (b)				_	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				0	
3	Add lines 1 and 2					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				<u> </u>	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				0	
6	Credits/Payments					
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a					
b	Exempt foreign organizations – tax withheld at source 6b					
С	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld 6d					
7	· · · · · · · · · · · · · · · · · · ·					
						
8	——————————————————————————————————————					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					
<u> 11 </u>	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ Refunded ▶ 11					
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No_	
	participate or intervene in any political campaign?		1a_		<u> </u>	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the					
	instructions for the definition		1b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		*."		1	
	published or distributed by the foundation in connection with the activities		Ì	ll		
С	Did the foundation file Form 1120-POL for this year?		1c		X	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
_	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$					
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
е			ļ			
_	on foundation managers > \$				X	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				<u>-^</u> -	
	If "Yes," attach a detailed description of the activities		₹		ĺ	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		<u>X</u>	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a_		X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	/A	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		<u>x</u>	
	If "Yes," attach the statement required by General Instruction T				ĺ	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				Į	
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				J	
	conflict with the state law remain in the governing instrument?		6	$\overline{\mathbf{x}}$		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	X		
	Enter the states to which the foundation reports or with which it is registered. See instructions.		<u> </u>			
ъa					l	
	NONE					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	/-				
	(/A	_8b_			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
	4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See instructions for Part XIV If "Yes,"					
	complete Part XIV		9	X		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		_]		_	
	names and addresses		10		X	
		 F:		0-PF		
		F	orm 99	0-PF	(2018)	

l 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		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 applica	ition?		13	X	
	Website address ► N/A					
14	The books are in care of ▶ CHRISTINE SAMPSON HINSON Telep	hone no 🕨	256-3	82-	586	3
	4010 PEPPERWOOD CIRCLE SW					
	Located at ► HUNSTVILLE AL	ZIP+4 ▶	35801	L		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here	1				▶ _
	and enter the amount of tax-exempt interest received or accrued during the year	.▶ [15			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority				Yes	No
	over a bank, securities, or other financial account in a foreign country?			_16_	}	_X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of					i
1 5	the foreign country		 -	L		
<u>I Pa</u>	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required				<u>, </u>	
_	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			 	Yes	No
1a	During the year, did the foundation (either directly or indirectly)	□. v	X No			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	∐· Yes	X No	1 1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No X No	1 1	İ	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No] ₃ ,		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			-	ĺ	
	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			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulat	ions				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here		▶ 📙			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		/-			
	were not corrected before the first day of the tax year beginning in 2018?		N/A	1c		·
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			j		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and	□ v ₂₂	X No			
	6e, Part XIII) for tax year(s) beginning before 2018?	Yes	X No		.]	
b	If "Yes," list the years ▶ 20 , 20 , 20 , 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)				İ	
b	(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		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		•			
_	▶ 20 , 20 , 20 , 20				ĺ	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise				j	
	at any time during the year?	Yes	X No	İ	l	1
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or				ļ	
	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			,	Į	
	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		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes			4a		<u> </u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its				 -∤	Ţ
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20	ארע		4b	n PE	X

Form 990-PF (2018) ASHBURN FAMILY FOUNDATION

63-1228439

Form 990-PF (2018) ASHBURN FAMILY FOUNDATI	ION 63-1228439	Page 7
PartVIII Information About Officers, Directors,	Trustees, Foundation Managers, Highly Paid En	nployees,
and Contractors (continued)		
3 Five highest-paid independent contractors for professional	services. See instructions. If none, enter "NONE."	
(a) Name and address of each person paid more than \$	\$50,000 (b) Type of service	(c) Compensation
NONE		
·		
·		
		
		
Total number of others receiving over \$50,000 for professional service	ac	-
Rartix-A Summary of Direct Charitable Activities	es	
List the foundation's four largest direct charitable activities during the tax year. Include rele	evant statistical information such as the number of	
organizations and other beneficiaries served, conferences convened, research papers pro-	duced, etc	Expenses
1 CONTRIBUTIONS TO QUALIFIED CHAR	RITABLE	
ORGANIZATIONS		
		255,000
2		
3		
4		
Part(IX:B Summary of Program-Related Investment	nents (see instructions)	
Describe the two largest program-related investments made by the foundation during the ta		Amount
1 N/A		
2		
All other program-related investments See instructions		
3		
	ı	

Total. Add lines 1 through 3

31.74	'TIVII	Qualityiii	g Distributi	Ons (300 ii	1311 40110113	,
1	Amounts	naid (including	administrative	expenses) to	accomplish	charital

а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	289,190
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	289,190
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	289,190

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2018)

<u>Forn</u>	1 990-PF (2018) ASHBURN FAMILY FOUNDATI	ON	Page		
l Pa	art XIII ! Undistributed Income (see instructions)				
		(a)	(b)	(c)	(d)
1	Distributable amount for 2018 from Part XI,	Corpus	Years prior to 2017	2017	2018
	line 7				
2	Undistributed income, if any, as of the end of 2018				
	Enter amount for 2017 only				
þ	Total for prior years 20 , 20 , 20	** , .			· ** ** *** ** -
3	Excess distributions carryover, if any, to 2018				
а	From 2013				
b					
C	From 2015				
ď	From 2016				
e	From 2017				
	Total of lines 3a through e				
4	Qualifying distributions for 2018 from Part XII, line 4 > \$ 289,190				
•	Applied to 2017, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required – see instructions)				
c	Treated as distributions out of corpus (Election				
	required – see instructions)				
d	Applied to 2018 distributable amount		·		
	Remaining amount distributed out of corpus	289,190			
5	Excess distributions carryover applied to 2018				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))		,		
6	Enter the net total of each column as	i			
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	289,190			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
a	Subtract line 6c from line 6b Taxable				
_	amount – see instructions Undistributed income for 2017 Subtract line				
e	4a from line 2a Taxable amount – see			ii:	
	Instructions				
f	Undistributed income for 2018 Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2019				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2013 not	J	ļ		
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2019.				
	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9				
а	Excess from 2014				
b	Excess from 2015				
С	Excess from 2016	1			
d	Excess from 2017		j		
е	Excess from 2018		1		

c Any submission deadlines

NO DEADLINES

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

į

NONE

Dod XV (Complement of the continue of			<u></u>	Page II	
Part XV Supplementary Information (c		- Eutura Baymant			
3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual,					
Recipient	show any relationship to	Foundation status of	Purpose of grant or	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution		
a Paid during the year					
FRIENDS INC.					
PO BOX 608	N/A	501 (C) (3)			
HUNTSVILLE AL 35804	COMMU	ITY VOLUNTEE	R SERVICE	10,000	
VAD TOOM 1 G3 D FING. TWG					
MADISON ACADEMY INC 325 SLAUGHTER ROAD	N/A	E01 (C) (2)			
MADISON AL 35758	N/A	501 (C) (3)	EDUCATION	50,000	
MAD130N AL 33730		•	DOCATION	50,000	
BOYS AND GIRLS CLUB OF NOR	TH AL				
203 EASTSIDE SQUARE	N/A	501 (C) (3)			
HUNTSVILLE AL 35801	COMMU	ITY VOLUNTEE	R SERVICE	25,000	
_					
FREE 2 TEACH	la= / m	504 (6) (0)			
3054 LEEMAN FERRY ROAD	N/A	501 (C) (3)	appuran	15.000	
HUNTSVILLE AL 35801	COMMU	IITY VOLUNTEEI	R SERVICE	15,000	
HUDSON ALPHA					
601 GENOME WAY NW	N/A	501 (C) (3)			
HUNTSVILLE AL 35806	1 *	ITY VOLUNTEE	R SERVICE	25,000	
			1	•	
HUNTSVILLE YOUTH ORCHESTRA					
6806 COLE DRIVE SE	N/A	501 (C) (3)			
HUNTSVILLE AL 35802	COMMUN	IITY VOLUNTEE	R SERVICE	5,000	
HUNTSVILLE LIBRARY FOUNDAT	TON				
P.O. BOX 443	N/A	501 (C) (3)			
HUNTSVILLE AL 35804		VITY VOLUNTEE	R SERVICE	10,000	
		-		•	
HUNTSVILLE HOSPITAL FOUNDA					
101 SIVLEY ROAD	N/A	501 (C) (3)			
HUNTSVILLE AL 35801	COMMUN	IITY VOLUNTEE	R SERVICE	5,000	
NORTH ALABAMA VETERAN'S CO	A T T T T ()				
P.O. BOX 511]	501 (C) (3)			
HUNTSVILLE AL 35804		IITY VOLUNTEE	R SERVICE	20,000	
				,	
COMMUNITY FOUNDATION					
		501 (C) (3)			
HUNTSVILLE AL 35801	COMMUNI	TY VOLUNTEER		10,000	
Total			> 3a	255,000	
b Approved for future payment N/A					
N/A					
ı					
		ľ			
		ļ			
_		J			
·					
Total			▶ 3b		
				Farm 990-PF (2018)	

		Analysis of Income-Producing Ac			1 -	—————	
≿n	ter gross amo	ounts unless otherwise indicated	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(e)
			(a)	(p)	(c)	(d)	Related or exempt
1	Program ser	vice revenue	Business code	Amount	Exclusion	Amount	function income (See instructions)
	a		-				
	p				ļ		
	c				ļ		
	e				<u> </u>		
	f		-				
		d contracts from government agencies			- 		
		dues and assessments			 		
		avings and temporary cash investments				_	90
		nd interest from securities	<u> </u>		 		111,636
5		come or (loss) from real estate			 		
		anced property	ļ -		 		
_		-financed property			 		
		come or (loss) from personal property			 		
	Other investr				 		20,793
		from sales of assets other than inventory	 		 		20,193
		or (loss) from special events			 		
		or (loss) from sales of inventory			+		
• •	h	ue a	-		 		
					+		
	e		·		 		
12		d columns (b), (d), and (e)	· -			0	132,519
		ne 12, columns (b), (d), and (e)	<u> </u>			13	132,519
		n line 13 instructions to verify calculations)					
	art XVI-B	Relationship of Activities to the A	ccomplishm	ent of Exempt P	urpose		
	Line No.	Explain below how each activity for which income					
	▼	accomplishment of the foundation's exempt purp	•			_	ons)
	N/A						
							
							
							
							
							
_							

_Part	XAIII	Organization Reg	arding ira	ansters to an	id Fransactio	ons and Relationships V	With Noncharitable Ex	rempt	Ċ
1 Di	d the orga		rectly engag	e in any of the fo	flowing with any	other organization described		Yes	No
		01(c) (other than sect							
	ganization					•		1 1	
a Tra	ansfers fr	om the reporting found	lation to a no	ncharitable exem	pt organization o	of			l
(1)	Cash				-		1a(1)		X
(2)	Other a	ssets					1a(2)		X
b Oti	her transa	actions							
(1)	Sales o	f assets to a noncharit	able exempt (organization			1b(1)		X
(2)	Purchas	ses of assets from a no	oncharitable e	exempt organizat	ion		1b(2)		X
(3)	Rental	of facilities, equipment,	or other ass	ets			1b(3)		X
(4)	Reimbu	rsement arrangements	;				1b(4)		Х
(5)	Loans o	r loan guarantees					1b(5)		X
(6)	Perform	ance of services or me	embership or	fundraising solic	itations		1b(6)	1	Х
c Sh	aring of f	acılıtıes, equipment, m	ailing lists, ot	ther assets, or pa	iid employees		1c_		X
d If t	he answe	er to any of the above i	s "Yes," com	plete the following	g schedule Colu	mn (b) should always show the	: fair market		
		-	•	•	•	the foundation received less th			
						the goods, other assets, or se			
	ne no	(b) Amount involved	(c) Name	of noncharitable exem	npt organization	(d) Description of transfers	, transactions, and sharing arrangeme	ents	
A/N									
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des	scribed in Yes," con	ation directly or indirect section 501(c) (other inplete the following science) Name of organization	than section :		ection 527?	c-exempt organizations	Cription of relationship	es 🗓	No
N/2		-,amo or organization		(S) Type of	80122(1011	(c) Desi			
/-									
									
ign lere		nd complete Declaration of p	reparer (other th		I on all information of	edules and statements, and to the best which preparer has any knowledge	May the IRS discuss this n with the preparer shown b See instructions	etum	No
	Signa	ture of officer or trustee			Date	Title			
	Print/Tyj	pe preparer's name			Preparer's signatu	re	Date	Check self-emp	ıf oloyed
aid 		N R. STRICKL	UND			STRICKLAND	11/12/19		
reparer	1 Firm's na	ame ► WEAR,	HOWEL	L, STRIC	KLAND, Q	UINN &LAW, LLC	PTIN P01211		
se Only	Firm's a	ddress ▶ 1323	STRATE	ORD RD SI			Firm's EIN ▶ 63-051		
		DECAT	UR, AL	35601-	6029		Phone no 256-35		
							Form 99	30-PF	(2018)

Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year LYMAN WARD MILITARY ACADEMY 174 WARD CIRCLE N/A 501 (C) (3) CAMP HILL AL 36850 EDUCATION 50,000 MOVEMENT CHURCH 9580 MADISON BLVD N/A 501 (C) (3) COMMUNITY VOLUNTEER SERVICE MADISON AL 35758 10,000 HEART OF THE VALLEY YMCA 120 HOLMES AVE NW #300 N/A 501 (C) (3) HUNTSVILLE AL 35801 COMMUNITY VOLUNTEER SERVICE 5,000 WORLD SURGICAL INFECTION SOCIETY N/A 501 (C) (3) 6005 GIVEN ROAD COMMUNITY VOLUNTEER SERVICE CINCINNATI OH 45243 15,000 ▶ 3a Total b Approved for future payment N/A ▶ 3b Total

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11/12/2019 1:48 PM		Charitable Purpose \$ 2,475		Charitable Purpose \$ 18,000		Charitable Purpose \$\frac{1,215}{1,215}\$		Fair Market Value 3,545,573 3,545,573	4-
ements	Line 16b - Accounting Fees	Investment s S S O	Line 16c - Other Professional Fees	Net Adjusted Net State S	Part I, Line 18 - Taxes	Investment s s 0	Line 10b - Corporate Stock Investments	End of Basis of Year Valuation \$ 1,992,917 COST	
Federal Statements	Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees	Total \$ 2,475 \$ \$ 2,475 \$ = 2,475	Statement 2 - Form 990-PF, Part I, Line	Total FEES \$ 18,000 \$ \$ \$ 18,000 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Statement 3 - Form 990-PF, Part I, Line 18 - Taxes	Fotal \$ 1,215 \$ \$ \$ 1,215 \$ \$ \$	- Form 990-PF, Part II,	Beginning of Year \$ 1,964,870 \$ 1,964,870	
30085 Ashburn Family Foundation 63-1228439 FYE: 12/31/2018		Description	Stat	Description INDIRECT OTHER PROFESSIONAL H TOTAL		Description EXCISE TAX TOTAL	Statement 4	Description	

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Federal Statements

30085 Ashburn Family Foundation 63-1228439 FYE: 12/31/2018

	•	10	0	0	0	0
	Expenses					
Statement 5 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.	Benefits	0	0	0	0	0
	Compensation	2,500	2,500	2,500	2,500	2,500
	Average Hours	5.00	1.00	1.00	5.00	1.00
990-PF, Part VIII, Line	Title	BOARD MEMBER	BOARD MEMBER	BOARD MEMBER	BOARD MEMBER	BOARD MEMBER
Statement 5 - Form 9	Name and Address	CHRISTINE SAMPSON HINSON 4010 PEPPERWOOD CIRCLE SW HUNTSVILLE AL 35801	JUDY NAYMAN 4010 PEPPERWOOD CIRCLE SW HUNTSVILLE AL 35801	JEREMY FARBER 4010 PEPPERWOOD CIRCLE SW HUNTSVILLE AL 35801	JOHN ASHBURN 4010 PEPPERWOOD CIRCLE SW HUNTSVILLE AL 35801	MARGARET HENDON 4010 PEPPERWOOD CIRCLE SW HUNTSVILLE AL 35801

30085 Ashburn Family Foundation 63-1228439

Federal Statements

11/12/2019 1:48 PM

FYE: 12/31/2018

Statement 6 - Form 990-PF, Part XV, Line 2a - Name, Address and Email for Applications

Description

CHRISTINE SAMPSON HINSON 256-382-5263 4010 PEPPERWOOD CIRCLE SW HUNTSVILLE AL 35801 CHINSON@HINSONLAW.COM

Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

SUBMIT WRITTEN REQUEST

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

NO DEADLINES

Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

NONE