efile GRAPHIC print - DO NOT PROCESS

Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491295008019

2018

OMB No 1545-0052

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

		ndar year 2018, or tax year	r beginning 01-01-20)18 , a	nd ei	nding 12-31-		
		THRASHER FOUNDATION INC					entification numbe	er
				T		74-3111939		
		d street (or P O box number if mail is n /ERWOOD PARKWAY NO 700	ot delivered to street address)	Room/suite		B Telephone nu	mber (see instructio	ns)
City or town, state or province, country, and ZIP or foreign postal code						(770) 396-2200)	
		n, state or province, country, and ZIP of A 30339	r foreign postal code			C If exemption	application is pendin	ng, check here
G Ch	neck al	I that apply	☐ Initial return of a	former public charity		D 1. Foreign or	ganizations, check h	ere
		☐ Final return	Amended return				ganizations meeting	
		Address chan	ige 🔲 Name change				k here and attach co	· -
l Ch	neck ty	pe of organization 🗹 Section	501(c)(3) exempt private	foundation			undation status was n 507(b)(1)(A), chec	
	Section	n 4947(a)(1) nonexempt charitabl	e trust 🔲 Other taxabl	e private foundation				
of '	year (f	xet value of all assets at end from Part II, col (c), ▶\$ 70,600	J Accounting method ☐ Other (specify) (Part I, column (d) must	Cash Accru	ıal		ation is in a 60-mont n 507(b)(1)(B), ched	
Pa	rt I	Analysis of Revenue and	Expenses (The total	(a) Revenue and		I		(d) Disbursements
		of amounts in columns (b), (c), and equal the amounts in column (a) (se		expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , schedule)	, received (attach	286,347				
	2	Check ▶ ☐ If the foundation is	not required to attach	,				
	3	Sch B	ary cash investments					
	4	Dividends and interest from secu	•					
	5a	Gross rents						
	ь	Net rental income or (loss)						
KIE	6a	Net gain or (loss) from sale of as	ssets not on line 10					
Revenue	ь 7	Gross sales price for all assets o Capital gain net income (from Pa				0		
ш.	8	Net short-term capital gain .	·					
	9	Income modifications						
	10a	Gross sales less returns and allo	wances					
	b	Less Cost of goods sold						
	С	Gross profit or (loss) (attach sch	edule)					
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11		286,347		0		
	13	Compensation of officers, director		С		0		
	14	Other employee salaries and war	-					
ses	15 16a	Pension plans, employee benefit Legal fees (attach schedule) .						
Ē	b	Accounting fees (attach schedule						
EX		Other professional fees (attach s	•					
e ≤	17	Interest	renedule) I I I					
<u> </u>	18	Taxes (attach schedule) (see ins	tructions)					
<u> </u>	19	Depreciation (attach schedule) a	•					
<u>=</u>	20	Occupancy	•					+
Ad	21	Travel, conferences, and meeting						
oue e	22	Printing and publications	-					1
<u>5</u>	23	Other expenses (attach schedule	e)	7,951		0		
Operating and Administrative Expenses	24	Total operating and administ	rative expenses.					
<u>B</u>		Add lines 13 through 23		7,951		0		
)	25	Contributions, gifts, grants paid		289,540				289,54
	26	Total expenses and disburser 25	ments. Add lines 24 and	297,491		0		289,54
	27	Subtract line 26 from line 12						
	а	Excess of revenue over expendishursoments	nses and	-11,144				
	ь	disbursements Net investment income (if neg	gative, enter -0-)	-11,144		0		
	c	Adjusted net income (if negat	•					
				I			1	1

42,001

42,001

42,001

42,001

0

9

70,600

39,743 39,743

30,857

30,857

70,600

2

3

4

5

6

42,001

-11,144

30,857

30,857 Form **990-PF** (2018)

0

0

70,600

	5
	6
	7
2	8
Assets	9
A _S	10a

b C

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

28

29

31

Part III

2

Liabilities

Balances

Fund

ŏ

Assets 27

Net 30 Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule) ▶

Total assets (to be completed by all filers—see the

Accounts payable and accrued expenses

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > .

Other liabilities (describe ▶_

Unrestricted

Permanently restricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) .

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

Temporarily restricted

Grants payable

Investments—U S and state government obligations (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Investments—corporate stock (attach schedule)

,	How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)

/L\

	-		·	D—Donation	(Ino, day, yr)	(mo, day
1a						
_						
_						
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or o	g) ther basis nse of sale	Gain o	h) r (loss)) minus (g)
а						
b						
С						
d						
e						
C	Complete only for assets show	wing gain in column (h) and owned by	the foundation o	n 12/31/69	(I)

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus (k) (j) (i) col (k), but not less than -0-) or Adjusted basis Excess of col (1) FMV as of 12/31/69 Losses (from col (h)) as of 12/31/69 over col (j), if any а b c

If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7

Net value of noncharitable-use assets

71,816

50,601

70,319

82,825

93,092

2

3

4

5

6

7

8

2 Capital gain net income or (net capital loss) Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

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

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the

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

336,657

208,791

262,370

226,644

149,047

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

2 3

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income) If section 4940(d)(2) applies, leave this part blank

(a)

Base period years Calendar

year (or tax year beginning in)

2017

2016

2015

2014

2013

2 Total of line 1, column (d)

5 Multiply line 4 by line 3

instructions

d е

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

number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

Adjusted qualifying distributions

(d) Distribution ratio

(col (b) divided by col (c))

4 687772

4 126223

3 731140

2 736420

1 601072

16 882627

3 376525

88,433

0

298,596

298,596

289,540

Form 990-PF (2018)

Page 3

Yes 🗸 No

Page **6**

1.	Statements Regard	iiiig	ACTIVITIES IOI WITHCIT	FOITH 4720 May Be	Kequirea (continuea)			
5a	During the year did the foundation p	oay o	r incur any amount to					Yes	No
	(1) Carry on propaganda, or otherw	vise a	ittempt to influence legisl	ation (section 4945(e))?	☐ Yes	✓ No	,		
	(2) Influence the outcome of any sp	pecifi	c public election (see sect	tion 4955), or to carry					
	on, directly or indirectly, any vo		-		· · · 🔲 Yes	✓ No	,		
	(3) Provide a grant to an individual	for t	ravel, study, or other sım	ılar purposes?		✓ No			
	(4) Provide a grant to an organization section 4945(d)(4)(A)? See in		•	, -	d				
	(5) Provide for any purpose other t	han r	eligious, charitable, scien	tific, literary, or	⊔ Yes	⊻ No	'		
	educational purposes, or for the	•	· ·		∟ Yes	✓ No	,		
b	If any answer is "Yes" to $5a(1)-(5)$,	did a	any of the transactions fa	nd to qualify under the ex	ceptions described in				
	Regulations section 53 4945 or in a	curre	ent notice regarding disas	ter assistance? See instr	ructions		5b		
	Organizations relying on a current n	otice	regarding disaster assist	ance check here		П			
C	If the answer is "Yes" to question 5a	a(4),	does the foundation clain	n exemption from the		_			
	tax because it maintained expenditu	ire re	sponsibility for the grant?	⁷	· · 🔲 Yes	□ No	,		
	If "Yes," attach the statement requi	red b	y Regulations section 53	4945-5(d)			´		
6 a	Did the foundation, during the year,	rece	ive any funds, directly or	indirectly, to pay premi	ums on				
	a personal benefit contract?				· 🔲 Yes	.	_		
b	Did the foundation, during the year,				res :	NC	° 6ь		No
	If "Yes" to 6b, file Form 8870								
7a	At any time during the tax year, wa	s the	foundation a party to a p	prohibited tax shelter tra	nsaction? Yes				
b	If yes, did the foundation receive ar				∟ res i	⊻ No	7b		
8	Is the foundation subject to the sec		•						
_	excess parachute payment during th		, , ,						
					∟ Yes	✓ No			l
Pai	and Contractors	JIIIC	ers, Directors, Trust	ices, roundation ma	anagers, Highly Paid	Emp	ioyees,		
1	List all officers, directors, truste	es. fo	oundation managers ar	nd their compensation	. See instructions				
			b) Title, and average	(c) Compensation (If		Τ,	- \		
	(a) Name and address		hours per week	not paid, enter	employee benefit plans a	and 1	e) Expen other al		
		ļ	devoted to position	-0-)	deferred compensation	n			
See /	Additional Data Table	1							
		1							
		1							
2	Compensation of five highest-pa	id en	nployees (other than t	hose included on line	1-see instructions). If	none,	enter "	NONE.	."
			(b) Title, and average		(d) Contributions to				
(a)	Name and address of each employee	paid	hours per week	(c) Compensation	employee benefit	(€	Expens		
	more than \$50,000		devoted to position		plans and deferred compensation		other all	owanc	es
NON	===============================				Compensation				
	_								
			-						
Tota	I number of other employees paid ov	er \$5	0,000						
						F	orm 99 0	0-PF	(2018

Form 990-PF (2018)		Page 7
Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include releving and other beneficiaries served, conferences convened, research papers produc		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see in	astructions)	
Describe the two largest program-related investments made by the foundation during the	<u>'</u>	Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		P 0
		Form 990-PF (2018)

1a

1b

2

3a 3b

4

5

289,540

289.540

289.540

Form 990-PF (2018)

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Amounts set aside for specific charitable projects that satisfy the

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

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

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

1

2

3

4

5

2018

Page 9

4,422

4,422

Form **990-PF** (2018)

_	•	•	•	<u>. </u>	_	_	_	•	٠.	١	_	_	_
	1	0	P	ī	7	7	X	7	ī	7		Г	

0-PF	(2	01	8)	
	_		-	-	

b Total for prior years

a From 2013.

b From 2014. . . . c From 2015. . .

d From 2016.

e From 2017.

0-PF (20	018)			
XIII	Undistributed Income	(see	instructions')

Distributable amount for 2018 from Part XI, line 7

144.392 222,503

258 854

206.261 333,066

222.503

258,854

206.261

333.066

285,118

2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only.

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e.

d Applied to 2018 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2018

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . .

c Excess from 2016. . . .

d Excess from 2017. . .

e Excess from 2018. . .

b Excess from 2015. .

(If an amount appears in column (d), the

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see 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

indicated below:

4 Qualifying distributions for 2018 from Part XII, line 4 🕨 \$ a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election (a)

Corpus

1.165.076

285,118

1,450,194

144.392

1,305,802

0

(b)

Years prior to 2017

(c)

2017

ŀ	art XIV	Private Operating Founda	ations (see ınstru	ictions and Part V	II-A, question 9)		
1a		dation has received a ruling or det , and the ruling is effective for 20:			rating		
b	Check box	to indicate whether the organization	on is a private opera	ating foundation des	cribed in section	l 4942(j)(3) or □] 4942(J)(5)
2a	Enter the I	esser of the adjusted net	Tax year		Prior 3 years		(a) Tatal
		m Part I or the minimum return from Part X for each	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
		return from Part X for each		. ,	,	, ,	
Ь	•	2a					
С	Qualifying	distributions from Part XII,					
		ach year listed					
d		active conduct of exempt					
е	for active c	distributions made directly onduct of exempt activities ie 2d from line 2c					
3	Complete 3a	a, b, or c for the					
		test relied upon					
а		ternative test—enter					
		of all assets					
		section 4942(j)(3)(B)(i)					
b		nt" alternative test— enter 2/3					
		m investment return shown in					
_	•	e 6 for each year listed					
C		support other than gross					
	. ,	ment income (interest,					
		ends, rents, payments					
		curities loans (section ()(5)), or royalties)					
		ort from general public					
		or more exempt					
		st amount of support					
		in exempt organization					
	_ ` ,	investment income					
Pa		applementary Information			foundation had s	\$5,000 or more	in
1	a a	sets at any time during the on Regarding Foundation Mana		i uctions.)			
	List any ma	nagers of the foundation who have	e contributed more				n
_		close of any tax year (but only if t					
b		nagers of the foundation who own of a partnership or other entity) o				arge portion of the	
2		on Regarding Contribution, Gra					
	Chack here	▶ ☐ If the foundation only make	es contributions to r	reselected charitable	e organizations and	does not accept	
		requests for funds If the foundat					
	other cond	itions, complete items 2a, b, c, an	d d See instruction	s	-		
a	The name.	address, and telephone number o	r e-mail address of	the person to whom	applications should	be addressed	
	ALLIE DON	· ·					
		RWOOD PARKWAY SUITE 700					
	ATLANTA, (770) 396-						
		AHUE@BTCPA NET					
		which applications should be sub	mitted and informat	tion and materials th	nev should include		
_		IE SCOPE OF THE FOUNDATION'S			,	LY IDENTIFIES POTE	ENTIAL GRANT
	RECIPIENT	S THROUGH REQUESTS SUBMITTI	ED BY BENNETT THE				
_		QUESTS FROM THE GENERAL PUBI	_1C				
С	•	ssion deadlines INES AT THIS TIME					
		tions or limitations on awards, suc	h as by goographic	al areas chamtable f	ields kinds of institu	itions or other	
a	factors						
		RE RESTRICTED TO PUBLIC CHARI IN THE GREATER ATLANTA METR		THE LONG TERM DE	EVELOPMENT AND S	UCCESS OF INDIVID	DUALS WHO ARE



inter gross	amounts unless otherwise indicated	Unrelated bu	ısıness ıncome	Excluded by section	512, 513, or 514	(e) Related or exempt
-	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
g Fees	and contracts from government agencies					
2 Membe	rship dues and assessments t on savings and temporary cash					
	ds and interest from securities.					
	tal income or (loss) from real estate					
	financed property					
	ebt-financed property.					
	tal income or (loss) from personal property					
	nvestment income					
ınvento						
	ome or (loss) from special events					
.0 Gross p	profit or (loss) from sales of inventory					
	revenue a	1				
3 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu		0	13	3	
3 Total. (See wo Part XVI Line No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is reporte	ment of Exempled in column (e) of	pt Purposes	ted importantly to	C
3 Total. (See wo	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which	lations) le Accomplish Income is reporte	ment of Exempled in column (e) of	pt Purposes	ted importantly to	C
3 Total. (See wo Part XVI Line No.	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is reporte	ment of Exempled in column (e) of	pt Purposes	ted importantly to	C
3 Total. (See wo Part XVI Line No.	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is reporte	ment of Exempled in column (e) of	pt Purposes	ted importantly to	(
3 Total. (See wo Part XVI Line No.	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is reporte	ment of Exempled in column (e) of	pt Purposes	ted importantly to	C
3 Total. (See wo Part XVI Line No.	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is reporte	ment of Exempled in column (e) of	pt Purposes	ted importantly to	C
3 Total. (See wo Part XVI Line No.	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is reporte	ment of Exempled in column (e) of	pt Purposes	ted importantly to	C
3 Total. (See wo Part XVI Line No.	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is reporte	ment of Exempled in column (e) of	pt Purposes	ted importantly to	C
3 Total. (See wo Part XVI Line No.	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is reporte	ment of Exempled in column (e) of	pt Purposes	ted importantly to	C
3 Total. (See wo Part XVI Line No.	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is reporte	ment of Exempled in column (e) of	pt Purposes	ted importantly to	0
3 Total. (See wo Part XVI Line No.	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is reporte	ment of Exempled in column (e) of	pt Purposes	ted importantly to	0
3 Total. (See wo Part XVI Line No.	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) le Accomplish Income is reporte	ment of Exempled in column (e) of	pt Purposes	ted importantly to	0

. ,	1 0)
	Information Regarding Transfers To and Transactions and Relationships With Noncharitable
1111	Exempt Organizations

PaitA	7.7.	Exempt Organi:	zations										
1 Did the	e orga	anization directly or in- nan section 501(c)(3)	directly engag							ion 501		Yes	No
a Transfe	ers fr	om the reporting foun	dation to a no	oncharitable	e exe	mpt organizatio	n of						
(1) C	ash.										1a(1)		No
(2) 0	ther	assets									1a(2)		No
b Other	Other transactions												
(1) S	ales d	of assets to a nonchari	table exempt	organızatı	ion.						1b(1)		No
	(2) Purchases of assets from a noncharitable exempt organization								1b(2)		No		
		of facilities, equipmen									1b(3)		No
		ursement arrangemen								•	1b(4)		No
` '		or loan guarantees.								•	1b(5)		No
. ,		nance of services or m	'		-					•	1b(6)		No
	-	acılıtıes, equipment, n									1c		No
of the	good: trans	er to any of the above s, other assets, or servaction or sharing arra (b) Amount involved	vices given by ngement, sho	the repor	ting f	oundation If the	e fou ne go	undation received oods, other asset	d less than fair ma	rket valu Ived	e	ngemen	nts
· ·		` .	. ,			, ,		,	•	,			
	-												
	-												
	+												
		lation directly or indire							_	. –	7 1		
		section 501(c) (other		501(c)(3)) or ir	n section 527? .	•		L	′es 🔼	⊈ No		
b If "Yes	," cor	nplete the following so		1		> T		1	(-) D				
		(a) Name of organization	on		(D) Type of organizat	tion		(c) Descriptio	n or relatio	nsnip		
(of my	penalties of perjury, knowledge and belief preparer has any kno	, it is true, co										
Sign Here	*·	****				2019-10-19		****** re		return with th	ne IRS di ne prepa		
	Sı	gnature of officer or t	rustee			Date		Title		below (see ır	nstr)? [✓ Yes	□ _{No}
		Print/Type preparer's	name	Preparer's	Sign	ature		Date	Check if self-	PTIN	D00646		
Paid		TIMOTHY S OBERS	т					2019-10-19	employed ▶ □		P00618	,,,,,,	
Prepar Jse Or		Firm's name ► BENI	NETT THRASH	IER LLP						Firm's E	IN ▶58	-16736	513
	-	Firm's address ► 33	00 RIVERWO	OD PARKW	/AY 70	00							
		АТ	LANTA, GA 3	30339						Phone n	o (770) 396-2	2200

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation ALLIE DONAHUE **PRESIDENT** 0 0 1 00 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 ANNE COLLIER WOOD 0 0 **BOARD MEMBER** 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 **BRITTANY ROSS** 0 0 **BOARD MEMBER** 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 BRITTANY SMITH **BOARD MEMBER** 0 ٥ 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 DANIEL BART 0 0 VICE PRESIDENT 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 **DENISE BRUMLEY BOARD MEMBER** 0 0 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 DOUG DUNLAP 0 **BOARD MEMBER** 0 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 HANNAH DOZIER 0 **SECRETARY** 0 O 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 JIMMY LEE 0 0 0 BOARD MEMBER 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 **TREASURER** JOEL SMITH 0 0 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 KEN THRASHER BOARD MEMBER 0 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 LEAH MUMPOWER 0 0 BOARD MEMBER 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 MATT GROSVENOR **BOARD MEMBER** 0 0 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 MEGAN SIVEWRIGHT BOARD MEMBER 0 0 0 0.50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 PIA VASQUEZ **BOARD MEMBER** 0 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation RACHEL CASH **BOARD MEMBER** 0 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 RICHARD BARTOLANZO 0 0 **BOARD MEMBER** 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 SOPHIA KIST 0 0 **BOARD MEMBER** 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 STANTON HARRELL **BOARD MEMBER** 0 ٥ 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 TATE YAWN 0 0 BOARD MEMBER 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 TAYLOR HUMPHREYS **BOARD MEMBER** 0 0 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 TIGGER MARSHALL 0 **BOARD MEMBER** 0 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 VIJAY VASWANI 0 BOARD MEMBER 0 O 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 ZEBEKIAH BORTNER 0 0 **BOARD MEMBER** 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 LAUREN BUNDY 0 0 **BOARD MEMBER** 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 DEAN KONENKAMP BOARD MEMBER 0 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 BAILEY MAXWELL 0 0 BOARD MEMBER 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 BRENNAN PALMER **BOARD MEMBER** 0 0 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 CHASE QUINN BOARD MEMBER 0 0 0 0.50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 SHANNON VARNADORE **BOARD MEMBER** 0 0 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address (c) Compensation (If Expense account, Title, and average (d) not paid, enter (e) other allowances hours per week Contributions to (b) devoted to position -0-) employee benefit plans and deferred compensation JULIA WALDMAN BOARD MEMBER 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 DANA WIGGINS BOARD MEMBER 0 50 3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339 JANE KLINGMEYER BOARD MEMBER 0 50 3300 RIVERWOOD PARKWAY SUITE 700

ATLANTA, GA 30339

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

Name and address (home or business)

Total .

,	or substantial contributor			
a Paid during the year				
AMERICAN RED CROSSPO BOX 101508 ATLANTA, GA 303921508	NONE	PC	GENERAL OPERATING FUND	10,130
ARTS BRIDGE FOUNDATION	NONE	PC	GENERAL OPERATING FUND	5,000

ARTS BRIDGE FOUNDATION 2800 COBB GALLERIA PKWY ATLANTA, GA 30339	NONE	PC	GENERAL OPERATING FUND	5
ATLANTA CENTER FOR SELF SUFFICIENCY	NONE	PC	GENERAL OPERATING FUND	5

2800 COBB GALLERIA PKWY ATLANTA, GA 30339				-,
ATLANTA CENTER FOR SELF SUFFICIENCY 100 EDGEWOOD AVENUE	NONE	PC	GENERAL OPERATING FUND	5,00

ATLANTA, GA 30339				
ATLANTA CENTER FOR SELF SUFFICIENCY 100 EDGEWOOD AVENUE ATLANTA, GA 30303	NONE	PC	GENERAL OPERATING FUND	5,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

Name and address (home or business)

(,	or substantial contributor			
a Paid during the year				
ATLANTA HUMANE SOCIETY 981 HOWELL MILL ROAD NW	NONE	PC	GENERAL OPERATING FUND	4,500

ATLANTA, GA 30318				
ATLANTA YOUTH ACADEMY P O BOX 18237 ATLANTA, GA 303160237	NONE	PC	GENERAL OPERATING FUND	6,500
ALITICM CDEAKS	NONE	DC.	CENTED AT ODER ATTNIC FUND	3 500

P O BOX 18237 ATLANTA, GA 303160237	NONE		GENERAL OPERATING FOND	0,300
AUTISM SPEAKS 900 CIRCLE 75 PKWY SUITE 445 ATLANTA, GA 30339	NONE	PC	GENERAL OPERATING FUND	2,500

Total			▶ 3a	289,540
AUTISM SPEAKS 900 CIRCLE 75 PKWY SUITE 445 ATLANTA, GA 30339	NONE	PC	GENERAL OPERATING FUND	2,500
ATLANTA, GA 303160237				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year				
AUTOMOTIVE TRAINING CENTER 2210 SYLVAN ROAD UNIT M EAST POINT, GA 30344	NONE	PC	GENERAL OPERATING FUND	14,000
BENNETT THRASHER HABITAT	NONE	PC	GENERAL OPERATING FUND	6.000

П	BENNETT THRASHER HABITAT SPONSORSHIP 3300 RIVERWOOD PKWY SUITE 700 ATLANTA, GA 30339	NONE	PC	GENERAL OPERATING FUND	6,000
	BLOOMPO BOX 391	NONE	PC	GENERAL OPERATING FUND	5 000

ATLANTA, GA 30339				
BLOOMPO BOX 391	NONE	PC	GENERAL OPERATING FUND	5,00

BLOOMPO BOX 391 VILLA RICA, GA 30180	NONE	PC	GENERAL OPERATING FUND	5,00

BLOOMPO BOX 391 VILLA RICA, GA 30180	NONE	PC	GENERAL OPERATING FUND	5,0
---	------	----	------------------------	-----

DECCI II O DOX 331	110112	1.0	CENTER OF ENGINEERS FORD	1
VILLA RICA, GA 30180				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **BOYS & GIRLS CLUB OF METRO** NONE PC GENERAL OPERATING FUND 3,500 ATLANTA

ATLANTA, GA 30309				
CAMP TWIN LAKES 1100 SPRING STREET SUITE 260 ATLANTA, GA 30309	NONE	PC	GENERAL OPERATING FUND	5,000
CEDAR HILL ELEMENTARY SCHOOL PTA 3615 SUGARLOAF PKWY LAWRENCEVILLE, GA 30044	NONE	PC	GENERAL OPERATING FUND	5,000

Total . .

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CHILDRENS RESTORATION NETWORK NONE PC GENERAL OPERATING FUND 5,000 11285 ELKINS RD ROSWELL, GA 30076 00

CYSTIC FIBROSIS FOUNDATION GA CHAPTER 57 EXECUTIVE PARK DR S 380 ATLANTA, GA 30329	NONE	PC	GENERAL OPERATING FUND	5,000
DAD'S GARAGE THEATRE COMPANY 569 EZZARD STREET SE	NONE	PC	GENERAL OPERATING FUND	5,000

289,540

ATLANTA, GA 30312

Total . .

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ESSENTIAL 2LIFEP O BOX 620053 NONE PC. GENERAL OPERATING FUND 5.000 ATLANTA, GA 30362 FEEL BEAUTIFUL TODAY NONE PC GENERAL OPERATING FUND 3.000

1160 OAKHAVEN DRIVE ROSWELL, GA 30075				5,666
FOUNDATION CHRISTIAN CHURCH 190 LAGRANGE ST NEWNAN, GA 30263	NONE	PC	GENERAL OPERATING FUND	3,500

Total . .

289,540

▶ 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GIFT OF ADOPTION - GEORGIA NONE PC GENERAL OPERATING FUND 4,500 2001 WAUKEGAN ROAD TECHNY, IL 60082

'				
GEORGIA SPECIAL OLYMPICS 6046 FINANCIAL DR NORCROSS, GA 30071	NONE	PC	GENERAL OPERATING FUND	7,000
GOOD SAMARITAN HEALTH CENTER OF COBB 1605 ROBERTA DR MARIETTA, GA 30008	NONE	PC	GENERAL OPERATING FUND	5,000

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GROVE PARK FOUNDATION INC. NONE PC GENERAL OPERATING FUND 10,000 1566 DONALD LEE HOLLOWELL PKWY NE

ATLANTA, GA 30318				
HELPING OPPRESSED MOTHERS ENDURE 3035 STONE MOUNTAIN STREET UNIT 2087 LITHONIA, GA 30058	NONE	PC	GENERAL OPERATING FUND	5,000

2087 LITHONIA, GA 30058				
HIGHWAY 20 CHURCH OF CHRIST 5032 HIGHWAY 20 S COVINGTON, GA 30016	NONE	PC	GENERAL OPERATING FUND	1,500

289,540

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
IGNITE HOPE 2879 OBSERVATION POINT NW MARIETTA GA 30064	NONE	PC	GENERAL OPERATING FUND	2,000

INTERNATIONAL DECCUE COMMITTEE	NONE	DC.	CENEDAL OPERATING FUND	F00
INTERFAITH OUTREACH HOME P O BOX 48075 DORAVILLE, GA 30362	NONE	PC	GENERAL OPERATING FUND	2,500
MARIETTA, GA 30064				

P O BOX 48075 DORAVILLE, GA 30362	NONE	FC	GENERAL OPERATING FOND	2,500
INTERNATIONAL RESCUE COMMITTEE 2305 PARKLAKE DR NE ATLANTA, GA 30345	NONE	PC	GENERAL OPERATING FUND	500

Total			▶ 3a	289,540
INTERNATIONAL RESCUE COMMITTEE 2305 PARKLAKE DR NE ATLANTA, GA 30345	NONE	PC	GENERAL OPERATING FUND	500
P O BOX 48075 DORAVILLE, GA 30362				

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year INTOWN COLLABORATIVE MINISTRIES NONE PC GENERAL OPERATING FUND 5.000 PO BOX 8808 ATLANTA, GA 31106

LEADERSHIP MINISTRIES FOUNDATION | NONE

5901-C PEACHTREE DUNWOODY RD SUITE 50 ATLANTA, GA 30328				2,500
LOVE THY NEIGHBOR IN SERVICE INC	NONE	PC	GENERAL OPERATING FUND	7,500

PC

GENERAL OPERATING FUND

1.500

Total			▶ 3a	289,540
LOVE THY NEIGHBOR IN SERVICE INC 5784 LAKE FORREST DR STE 516 ATLANTA, GA 30328	NONE	PC	GENERAL OPERATING FUND	7,500
ATLANTA, GA 30328				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MCKENNA FARMS THERAPY SERVICES NONE PC 5,000 GENERAL OPERATING FUND 3044 DUE WEST RD DALLAS, GA 30157

,				
MOST VALUABLE KIDS 3620 PIEDMONT ROAD PMB 113 ATLANTA, GA 30305	NONE	PC	GENERAL OPERATING FUND	3,000
NEVER ALONE INC291 ROPE MILL RD	NONE	PC	GENERAL OPERATING FUND	5.000

ATLANTA, GA 30305				
NEVER ALONE INC291 ROPE MILL RD WOODSTOCK, GA 30188	NONE	PC	GENERAL OPERATING FUND	5,000

289,540

▶ 3a

<u>'</u>				
NEVER ALONE INC291 ROPE MILL RD WOODSTOCK, GA 30188	NONE	PC	GENERAL OPERATING FUND	5,00

Total . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

Name and address (home or business)	or substantial contributor	Гесірісте		
a Paid during the year				
NHMBC WOMEN'S MINISTRY	NONE	PC	GENERAL OPERATING FUND	1,500

4192 BROWNSVILLE ROAD POWDER SPRINGS, GA 30127				_,
ODYSSEY ATLANTA 1424 WEST PACES FERRY RD NW ATLANTA, GA 30327	NONE	PC	GENERAL OPERATING FUND	5,000

ODYSSEY ATLANTA 1424 WEST PACES FERRY RD NW ATLANTA, GA 30327	NONE	PC	GENERAL OPERATING FUND	5,000
PEBBLE TOSSERS INC 1155 MT VERNON HWY STE 800 DUNWOODY, GA 30338	NONE	PC	GENERAL OPERATING FUND	3,000

Total			▶ 3a	289,540
PEBBLE TOSSERS INC 1155 MT VERNON HWY STE 800 DUNWOODY, GA 30338	NONE	PC	GENERAL OPERATING FUND	3,000
1424 WEST PACES FERRY RD NW ATLANTA, GA 30327				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
RAMAH DAROM 6400 POWERS FERRY RD SUITE 215 ATLANTA, GA 30339	NONE	PC	GENERAL OPERATING FUND	5,000
DENNIES WITH DUDDOSE	NONE	DC.	CENERAL OPERATING FUND	F00

recipient

PENNIES WITH PURPOSE 167 IVEYDALE RD SE MABLETON, GA 30126	NONE	PC	GENERAL OPERATING FUND	500
RACHEL'S RAY OF HOPE INC 165 BRADFORD SQUARE	NONE	PC	GENERAL OPERATING FUND	2,000

167 IVEYDALE RD SE MABLETON, GA 30126	NONE	PC	GENERAL OPERATING FOND	500
RACHEL'S RAY OF HOPE INC 165 BRADFORD SQUARE FAYETTEVILLE, GA 30215	NONE	PC	GENERAL OPERATING FUND	2,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient

or substantial contributor

Name and address (home or business)

a Paid during the year				
SAFE KIDS GEORGIA 1639 TULLIE CIR NE ATLANTA, GA 30329	NONE	PC	GENERAL OPERATING FUND	5,000
CANDY EDRINGS MISSION	NONE	DC.	CENERAL OBERATING FUND	F 000

ATLANTA, GA 30329				
SANDY SPRINGS MISSION 850 MT VERNON HIGHWAY SANDY SPRINGS, GA 30027	NONE	PC	GENERAL OPERATING FUND	5,000
SANDY SPRINGS TENNIS ASSOCIATION	NONE	PC	GENERAL OPERATING FUND	5,000

SANDY SPRINGS MISSION 850 MT VERNON HIGHWAY SANDY SPRINGS, GA 30027	NONE	PC	GENERAL OPERATING FUND	5,000
SANDY SPRINGS TENNIS ASSOCIATION 8343 ROSWELL ROAD SUITE 185 SANDY SRPINGS, GA 30350	NONE	PC	GENERAL OPERATING FUND	5,000

Total			▶ 3a	289,540
SANDY SPRINGS TENNIS ASSOCIATION 8343 ROSWELL ROAD SUITE 185 SANDY SRPINGS, GA 30350	NONE	PC	GENERAL OPERATING FUND	5,000
SANDY SPRINGS, GA 30027				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Purpose of grant or Recipient If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SAVANNAH MUSIC FESTIVAL NONE PC. 5,000 GENERAL OPERATING FUND 200 EAST ST JULIAN STREET 601 SAVANNAH, GA 31401

SHARE THE MAGIC FOUNDATION 2870 PEACHTREE ROAD 109 ATLANTA, GA 30305	NONE	PP	GENERAL OPERATING FUND	5,000
SISU2360 MURPHY BLVD PO BOX 5758	NONE	PC	GENERAL OPERATING FUND	3 000

ATLANTA, GA 30305				
SISU2360 MURPHY BLVD PO BOX 5758	NONE	PC	GENERAL OPERATING FUND	3,000

ATLANTA, GA 30305				
SISU2360 MURPHY BLVD PO BOX 5758 GAINESVILLE, GA 30504	NONE	PC	GENERAL OPERATING FUND	3,00

Total . .

289,540

▶ 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SUSAN G KOMEN FOR THE CURE -NONE PC GENERAL OPERATING FUND 7.500 ATLANTA 3525 PIEDMONT ROAD BLDG D SUITE 215

ATLANTA, GA 30305				
THE KYLE PEASE FOUNDATION 711 COSMOPOLITAN DRIVE 126 ATLANTA, GA 30324	NONE	PC	GENERAL OPERATING FUND	5,500
THE PACKAGED GOOD 5517 CHAMBLEE DUNWOODY RD DUNWOODY, GA 30338	NONE	PC	GENERAL OPERATING FUND	5,000

Total .

▶ 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE LOINHEART SCHOOL NONE PC GENERAL OPERATING FUND 1,500 225 ROSWELL ST ALPHARETTA, GA 30009

TREES ATLANTA225 CHESTER AVENUE ATLANTA, GA 30316	NONE	PC	GENERAL OPERATING FUND	1,000
TRINITY COMMUNITY MINISTRIES 21 BELL STREET NE ATLANTA GA 303032643	NONE	PC	GENERAL OPERATING FUND	6,010

Total . .

289,540

▶ 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

any foundation manager

or substantial contributor

Name and address (home or business)

P O BOX 10118 ATLANTA, GA 31107

Total .

a Paid during the year				
VOX TEEN COMMUNICATIONS 229 PEACHTREE ST NE SUITE 275 ATLANTA, GA 30303	NONE	PC	GENERAL OPERATING FUND	5,000
WELLSPRING LIVING 1040 BOULEVARD SE SUITE M	NONE	PC	GENERAL OPERATING FUND	5,000

recipient

229 PEACHTREE ST NE SUITE 275 ATLANTA, GA 30303	No.12			3,000
WELLSPRING LIVING 1040 BOULEVARD SE SUITE M ATLANTA, GA 30312	NONE	PC	GENERAL OPERATING FUND	5,000
WHOLESOME WAVE GEORGIA	NONE	PC	GENERAL OPERATING FUND	7,500

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

a Paid during the year				
WINGS FOR KIDS 1465 NORTHSIDE DRIVE STE 222A ATLANTA, GA 30318	NONE	PC	GENERAL OPERATING FUND	5,000

LEUKEMIA & LYMPHOMA SOCIETY 2859 PACES FERRY RD SE 725 ATLANTA, GA 30339	NONE	PC	GENERAL OPERATING FUND	5,000
LUTZIE 43 FOUNDATION INC	NONE	PC .	CENERAL OPERATING FUND	5,000

2859 PACES FERRY RD SE 725 ATLANTA, GA 30339				,
LUTZIE 43 FOUNDATION INC 2840 LANDING WAY MARIETTA, GA 30066	NONE	PC	GENERAL OPERATING FUND	5,000

ATLANTA, GA 30339				
LUTZIE 43 FOUNDATION INC 2840 LANDING WAY MARIETTA, GA 30066	NONE	PC	GENERAL OPERATING FUND	5,000
Total			▶ 3a	289,540

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year TOMMY NOBIS CENTER NONE PC GENERAL OPERATING FUND 5.000 1480 BELLS FERRY RD MARIETTA, GA 30066

VISION ATLANTA DBA CAMP GRACE PO BOX 867 ROSWELL, GA 30077	NONE	PC	GENERAL OPERATING FUND	10,400
ZOO ATLANTA CA 30315	NONE	PC	GENERAL OPERATING FUND	4,000

ROSWELL, GA 30077				
ZOO ATLANTA800 CHEROKEE AVE SE ATLANTA, GA 30315	NONE	PC	GENERAL OPERATING FUND	4,000

Total .

Recipient If recipient is an individual, show any relationship to status of contribution manager recipient.

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
UNITED WAY OF NE GEORGIA	NONE	PC	GENERAL OPERATING FUND	2,500

UNITED WAY OF NE GEORGIA 1 HUNTINGTON ROAD 805 ATHENS, GA 30606	NONE	PC	GENERAL OPERATING FUND	2,500

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	l: 93491295008019	
TY 2018 Other Expenses Sche	dule				
Name: BENNETT THRASHER FOUNDATION INC					
EIN:	74-3111939				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
BANK CHARGES	15	0		0	

6,255

1,205

258

30

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursem Charita Purpo
BANK CHARGES	15	0		
WEB HOSTING	188	0		

OTHER SERVICE DAY EXPENSES

BT FOUNDATION T SHIRTS

REGISTRATION FEES

HABITAT PROGRAM EXPENSES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		D	LN: 93491295008019
TY 2018 Other Liabilities Sche	dule			
Name: BENNETT THRASHER FOUNDATION INC				
EIN:	74-3111939			
Description		Beginning of Year - Book Value	End of Year - Book Value	
OTHER LIABILITIES			0	39,743

efile GRAPHIC print - DO	NOT PROCESS As Filed Dat	ta -		DLN: 93491295008019	
Schedule B	Sche	edule of Contributors		OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF ► Go to <u>www irs gov/Form990</u> for the latest information		nation	2018	
Name of the organizatio BENNETT THRASHER FOUN			Employer id	dentification number	
Organization type (chec	(one)		74-3111939		
	,				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number	er) organization			
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	☐ 527 political organizatio	on			
Form 990-PF	☑ 501(c)(3) exempt privat	e foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
		90-PF that received, during the yor Complete Parts I and II See in			
Special Rules					
under sections 50 received from any	9(a)(1) and 170(b)(1)(A)(vi), that	filing Form 990 or 990-EZ that me checked Schedule A (Form 990 o total contributions of the greater Complete Parts I and II	or 990-EZ), Part II, line 13,	, 16a, or 16b, and that	
during the year, to	tal contributions of more than \$1	(8), or (10) filing Form 990 or 99,000 exclusively for religious, chan or animals. Complete Parts I, II	aritable, scientific, literary, d		
during the year, c If this box is chec purpose Don't co	ontributions exclusively for religion ked, enter here the total contribut implete any of the parts unless the	(8), or (10) filing Form 990 or 990 o	t no such contributions tota e year for an <i>exclusively</i> re ganization because it rece	aled more than \$1,000 eligious, charitable, etc , ived <i>nonexclusively</i>	
990-EZ, or 990-PF), but i	must answer "No" on Part IV, lir	I Rule and/or the Special Rules d ne 2, of its Form 990, or check the that it doesn't meet the filing req	e box on line H of its		
For Paperwork Reduction Action Form 990, 990-EZ, or 990	t Notice, see the Instructions PF	Cat No 30613X	Schedule B (Form 990	0, 990-EZ, or 990-PF) (2018)	

Name of organization BENNETT THRASHER FOUNDATION INC		Employer identification 74-3111939	Employer identification number 74-3111939		
Part I	Contributors (See instructions) Use duplicate copies of Part I if ad	ditional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	BENNETT THRASHER LLP		Person 🗸		
	3300 RIVERWOOD PARKWAY SUITE 700 ATLANTA, GA 30339	\$ 252,081	Noncash		
			(Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	BT WEALTH MANAGEMENT LLC		Person 🗸		
-	3300 RIVERWOOD PARKWAY SUITE 1075	\$ 22,382	Payroll		
	ATLANTA, GA 30339		(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		
		\$	Noncash		
			(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		
		\$	Noncash		
		2	(Complete Part II for noncash contributions)		

Schedule B (Form 99	90, 990-EZ, or 990-PF) (2018)		Page 3	
Name of organization BENNETT THRASHER FOUNDATION INC		Employer identification number		
		74-31	74-3111939	
Part II	Noncash Property			
(a) No. from Part I	(See instructions) Use duplicate copies of Part II if additional space is needed (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	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
=				
		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2018)	

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