Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

inte			www.iis.gov/Formsso for insti				inspection
<u>A</u>	For the	2018 calendar year, or tax year	beginning	, 2018, and	ending		, 20
В	Check r	applicable C Name of organization	NC.	D Employ	er identification number		
	Address	change Doing business as	SAME	·		76-0	2649834
	Name c	hange Number and street (or P	O box if mail is not delivered to stre	et address) R	oom/suite	E Telepho	ne number
	Initial re	tum 3801 VILLAG	E VIEW DR.	A	IPT. 1302	678	- 971 - 4884
	Final retu		ovince, country, and ZIP or foreign po				
$\bar{\Box}$		d return GAINESVILLE	, GA 30506			G Gross re	eceipts \$502,496.74
$\overline{\Box}$		ion pending F Name and address of pri			M(a) is the		subordinates? Yes No
	Applica	KENNETH L.	•	AME	_ / / /		s included? Yes No
-			7031,012		 		a list (see instructions)
<u> </u>		mpt status 501(c)(3)	501(c) () ◀ (insert no)	4947(a)(1) or	K		
÷.	Website					oup exemption	
_		organization 🔀 Corporation 🔲 Trust	Association Other ▶	L Year o	f formation: 200	M State	of legal domicile. TX
P	art I	Summary					
	1	Briefly describe the organization	on's mission or most signific	ant activities:	THE JUSTI	CE-FRYE	FOUNDATION INC
Governance		PROVIDES FINANCIA	L SUPPORT FOR	COLLEGE	SCHOLARS	HIPS.	
lan	1			-			
Je.	2	Check this box ▶☐ If the orga	inization discontinued its ope	erations or disp	osed of more tl	nan 25% of	its net assets.
ő	3	Number of voting members of	the governing body (Part VI,	line 1a)		. 3	Ч.
ಹ	4	Number of independent voting			ne 1b)	. 4	2
Activities &	5	Total number of individuals em	•		•	. 5	0
	6	Total number of volunteers (es	, -	- (,	, , , , ,	. 6	4
	7a	Total unrelated business reven	,		• • • • •	. 7a	8
	b	Net unrelated business taxable				. 7b	0
	- 5	Net unrelated business taxable	e income nom Pom 990-1, i	ile 30	Prio	r Year	Current Year
Revenue	١	Contributions and (Dout) And the - 4 h)				
	8	Contributions and grants (Part				7,763.00	230, 155.72
	9	Program service revenue (Part	= •		·	الشركيب أيب	100
ě	10	Investment income (Part VIII, c	• •			0,639,54	199, 034.28
_	11	Other revenue (Part VIII, colum				145.63	
	12	Total revenue—add lines 8 thro	8,402.54	429, 190.00			
	13	Grants and similar amounts pa	id (Part IX, column (A), lines	1~3)	7	6,080.39	83,728.22
	14	Benefits paid to or for member	s (Part IX, column (A), line 4)				·
Ś	15	Salaries, other compensation, ea	mployee benefits (Part IX, colu	ımn (A), lınes 5–1	10)		
Expenses	16a	Professional fundraising fees (I	•				
per	b	Total fundraising expenses (Pa	• •				
Д	17	Other expenses (Part IX, colum	· •	e)		76.70	76, 70
	18	Total expenses. Add lines 13-	17 (must equal Part IX IT of IT	oh (800 Mine 25)	7	5,003.69	83 804.92
	19	Revenue less expenses. Subtra	act line 18 from line 12	1000000	25	2,322.15	345,385.08
. 0		Neverlue less expenses. Subtra				f Current Year	End of Year
Net Assets or Fund Balances		Tatal assists (Davit V. Kana 16)	33.28 MAY 1	3 2019 SO.	 		
Ssel	20	Total assets (Part X, line 16)	101	8	. 2,942	~~~~	2,586,315.16
E E	21	Total liabilities (Part X, line 26)				7,803.75	39,861,.75
		Net assets or fund balances. S	ubtract line 21 from the 21	<u>.N. U L · </u>	. 2.915	, U7.86	2,546,453,41
Pá	art II	Signature Block					
Une	der pena	Ities Ppenury, I declare that I have exam	nined this return, including accompa	anying schedules an	d statements, and	to the best of r	ny knowledge and belief, it is
true	e, correc	, and complete. Declaration of preparer	(other than officer) is based on all in	formation of which p	reparer nas any kn	owleage	
		T				1	
Sig	n	Signature of officer	20 /			Date	
Here		Rumoth t.	Jantica			15 M	4Y 2019
		Type or print name and title	ENNETH L. JUSTIC	E PRESI	PENT		
		Print/Type preparer's name	Preparer's signature	,_ , ,, ,-	Date	Charle I	PTIN
Pa						Check self-emp	
	eparé				 		
Us	e On[Firm's EIN ►	
N/a-	the In	Firm's address	roperor chown chous? /see	Instructions)		Phone no	. Yes No
		S discuss this return with the p	· · · · · · · · · · · · · · · · · · ·	iristi uctions) .	<u> </u>		
For	Paperv	ork Reduction Act Notice, see th	e separate instructions.		Cat No. 11282Y		Form 990 (2018)

Total program service expenses ▶

Part IV		Schedules

		_	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		×
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	_	Χ_
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	-	X_
ď	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> X</u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		_X_
12a	Schedule D, Parts XI and XII	12a		<u>X</u>
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	_	Χ_
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	 	_X _
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	140		_X_
J	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		χ_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		<u> </u>
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any demostra organization or	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X 990	(2010)
		rom	1330	(ZU18)

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Part	IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated	00		
	employees? If "Yes," complete Schedule J	_23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Ý
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
Ь	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	igsquare	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33_		_X_
34 .	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	χ	
Part				
	Check if Schedule O contains a response or note to any line in this Part V		 ;	
		المساوية	Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	N	/Δ

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
	Fatar the number of ampleyees reported on Form W.S. Transmittel of Wago and Tay		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	A)	/A
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	-	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,		-	
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
þ	If "Yes," enter the name of the foreign country:			100
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	5	FEET	
5a b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	 	<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		<u> </u>	
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7a	1	T-200
b	and services provided to the payor?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	·		
·	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h		├
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
8	sponsoring organization have excess business holdings at any time during the year?	8		يرين وله
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
о 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
_	Gross income from other sources (Do not net amounts due or paid to other sources			2.72
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	120		
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	7. P.		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		
	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	ಿ ೩ ಮ	
	If "Yes," complete Form 4720, Schedule O.			
	1 100, Complete Form 4120, Contourie O.		n 99 0	(2018)

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Part	VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and for a "No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	
<u></u>	Check if Schedule O contains a response or note to any line in this Part VI	· · · · · · 🔀
Sect	ion A. Governing Body and Management	
		Yes No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 4	
	If there are material differences in voting rights among members of the governing body, or	
	If the governing body delegated broad authority to an executive committee or similar	医 医
	committee, explain in Schedule O.	
b	Enter the number of voting members included in line 1a, above, who are independent	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2 X
3	Did the organization delegate control over management duties customarily performed by or under the direct	
_	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3 X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4 X
5_	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5 X
6	Did the organization have members or stockholders?	6 X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a X
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,	_, _
_	stockholders, or persons other than the governing body?	7b X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	
2	the year by the following: The governing body?	8a X
a b	Each committee with authority to act on behalf of the governing body?	8a X 8b M/A
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	00 / / //
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9 X
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Code.)
		Yes No
10a	Did the organization have local chapters, branches, or affiliates?	10a X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a X
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts?	12b
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c
13	Did the organization have a written whistleblower policy?	13 X
14	Did the organization have a written document retention and destruction policy?	14 X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	
а	The organization's CEO, Executive Director, or top management official	15a N /A
þ		15b N /A
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	
	organization's exempt status with respect to such arrangements?	16b
Sect	ion C. Disclosure	
17	List the states with which a copy of this Form 990 is required to be filed ► NONE	
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-	(Section 501(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)	•
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.	, ,,
20	State the name, address, and telephone number of the person who possesses the organization's books and re KENNETH L. JUSTICE, 3801 VILLAGE VIEW DR., APT. 1302, GAINESVILLE, GA 30506 62	cords ► -97 -4884

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

K Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (C) Position (A) (B) (D) Œ (F) (do not check more than one Name and Title Reportable Reportable Estimated Average box, unless person is both an hours per compensation compensation from amount of officer and a director/trustee) related other eek (list an) from employee Individual Key employee Highest compensated Institutional trustee hours for organizations compensation the organization (W-2/1099-MISC) from the related W-2/1099-MISC) organization proanizations below dotted and related trustee organizations (ine) (1) KENNETH L. JUSTICE, PRES. TREAS. 0 0 0 (2) ELIZABETH F. JUSTICE, VP / SEC. 1.5 0 9 X a (3) JULENE K, JOHNSON, DIR, 0.1 X 0 0 O JOHN P. MORRIS, DIR. X 0 0 0 (6) (7) (8) (9) (10)(11)(12)(13)

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
	(C) Position Position										
	(A) Name and title	(B) Average hours per week (list any	box, office	ot ch unles er and	eck s pe l a d	more rson irect	than of is both or/trust	one n an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated om amount of other
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS(compensation
(15)											
(16)		, y	. 1	٠, -		;					-
(17)											
(18)											
(19)											
(20)											
(21)											
(22)			_								
(23)											
(24)											
(25)											
1b c d	Sub-total							>	0	0	0
2	Total number of individuals (including bu reportable compensation from the organ				list	ed a	above	e) w			,000 of
3	Did the organization list any former of	ficer, direc						emp	oloyee, or high	est compens	
4	employee on line 1a? If "Yes," complete for any individual listed on line 1a, is the organization and related organizations	sum of rep	portal	ole d	com	per	nsatio	on a	nd other comp	ensation from	the
5	individual										. 4 X
	for services rendered to the organization										
1	on B. Independent Contractors Complete this table for your five highest compensation from the organization. Repyear.										
	(A) Name and business add	iress							(B) Description of s	ervices	(C) Compensation
2	Total number of independent contractor							th	ose listed abo	ove) who	

Par	t VIII	Check if Schedule O contains a response or note to any line in this Part VIII								
		Oncor i Coneduie C				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
ats st	1a	Federated campaigns	3	1a						
Contributions, Gifts, Grants and Other Similar Amounts	Ь	Membership dues .	[1b		VIEW NOTE OF STREET				
s, G	С	Fundraising events .	[1c						
ar,	d	Related organizations	; <u>[</u>	1d						
Ë, Œ	е	Government grants (cor	, ,	1e						
tior er S	f	All other contributions, q								
ib is	ļ	and similar amounts not inc	luded ahove	1f	2.30,155,72					
dot	g	Noncash contributions include	ied in lines 1a–1	f: \$	_					
	h	Total. Add lines 1a-1	f	<u> </u>	<u>></u>	230,155.72				
Program Service Revenue		•	\$		Business Code					
eve	2a					_				
č	b									
Σġ	C			}-						
Se	d			}-						
raπ	e	A.II/		}						
rog	T .	All other program service revenue.				ļ	To a Company of the C			
	3	Total. Add lines 2a-2 Investment income								
	"	and other similar amo				10.00/53	10 201 52	_	68,386.52	
	4	Income from investment				68, 386,36	68,386.52		08,300192	
	5	Royalties		pt boi	ia proceeds >	<u> </u>	<u> </u>			
	"	noyancs	(i) Real	- 	(ii) Personal					
	6a	Gross rents	<u> </u>							
	ь	Less rental expenses								
	c	Rental income or (loss)					PER SUPER SUPER PROPERTY OF	De la la companya de		
	d	Net rental income or (loss)		•					
	7a	Gross amount from sales of assets other than inventory Less: cost or other basis	(i) Securitie	S,	(II) Other					
			203,954	.50						
	b									
	1	and sales expenses	73,306.	74						
	С	Gain or (loss)	130,647.	76						
	d	Net gain or (loss) .			<u> ▶</u>	130,647.76	130,647.76	_	130,647.76	
Other Revenue	8a	Gross income from fit	indraising	. ,						
Ver		events (not including \$							TECHNOLOGIS STREET	
æ		of contributions reported	ed on line 1c)							
ē	}	See Part IV, line 10 .		a						
5	b	Less: direct expenses		ь						
	С	Net income or (loss) fi			vents . ►			,		
	, 9a	Gross income from ga	iming activition	- I		W. Company				
		See Part IV, line 10 .		å	 					
	b	Less: direct expenses		b∟						
	С	Net income or (loss) fi			ties ►					
	10a	Gross sales of in		J						
4		returns and allowance		a						
	b	Less: cost of goods s		b	ton.					
	<u> </u>	Net income or (loss) fi		Inver	Buciness Code		Die Landere der Ausgester			
	11a	- IVISCEIIANEOUS IT	evenue	-+	Buciness Code					
	b					 				
ľ				-		 				
	d	All other revenue .		-						
	e	Total. Add lines 11a-	11d	. L	•	-				
]	12	Total revenue. See in			>	429,190.00	199,034.28		199,034.28-	
									Form 990 (2018)	

Form **990** (2018)

rom 9	90 (2018)				Page 10
Part	IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must cor	nplete all columns. A	All other organization	ns must complete co	olumn (A).
	Check if Schedule O contains a respon				
	ot include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	83,728.22	83, 728,22		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		= `		
7 8	Other salaries and wages				
9 10	Other employee benefits				
11 a b	Fees for services (non-employees): Management				
c d	Accounting				
e f g	Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column				
12 13	(A) amount, list line 11g expenses on Schedule 0.)				
14 15 16	Information technology				
17 18	Travel				
19 20 21	Conferences, conventions, and meetings . Interest				
22 23	Depreciation, depletion, and amortization . Insurance				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column			5 40 4 1 4 1 1 2 2 3 3 4 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4	
а	(A) amount, list line 24e expenses on Schedule O.) FOREIGN DIV. TRANSACTION FEES	76,70		76.70	e de la companya de l
b					
d e 25	All other expenses Total functional expenses. Add lines 1 through 24e	83, 804, 92	83,728.22	76,70	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Form 990 (2018) Page 11 Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1,155,930,14 1 347, 704,71 2 2 3 3 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 **Assets** Notes and loans receivable, net 7 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b 10c Investments—publicly traded securities 11 11 1,786,991,47 2,238,610.45 12 Investments—other securities. See Part IV, line 11 12 13 Investments -- program-related. See Part IV, line 11. 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 2,942, 921.61 16 2,586,315,16 17 Accounts payable and accrued expenses 17 18 27,803.75 18 39,861.75 Deferred revenue 19 19 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties . . . 23 Unsecured notes and loans payable to unrelated third parties . . . 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24); Complete Part X of Schedule D 25 27,803.75 26 Total liabilities. Add lines 17 through 25 . Organizations that follow SFAS 117 (ASC 958), check here ▶ 🖂 and or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 2,942,921,61 2.586,315,16 28 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. Net Assets 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31

Retained earnings, endowment, accumulated income, or other funds .

Total liabilities and net assets/fund balances

32

33

Form **990** (2018)

2,586.315.16

32

2,942,921,61 33 2,586,315.

2,942,921,31

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•	Page		_
	, ago		_

Part	XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part-VIII, column (A), line 12)	1	429,	-	
2	Total expenses (must equal Part IX, column (A), line 25)	2		804.9	
3	Revenue less expenses. Subtract line 2 from line 1	3	345,	<u> 385.</u>	08_
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,942	921	<u>6</u>
5	Net unrealized gains (losses) on investments	5	(701,	991.	53)
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			_	
	33, column (B))	10	2,586	, 315	<u> 16</u>
Part	XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u>.~ .></u>		<u> </u>
			-	Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	in		
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			220000	X
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	piled	or		
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?	• •	. 2b		
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on	a		
	separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o	versig	ht a-		
	of the audit, review, or compilation of its financial statements and selection of an independent according				
	If the organization changed either its oversight process or selection process during the tax year, ex	cplain	in		
	Schedule O.		212-25		25
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	torth			
	the Single Audit Act and OMB Circular A-133?		. <u>3a</u>	-	<u>X</u> _
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und		ne 3b		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	iuuits.		ա 990	(0010)
			Foi	m yyu	(2018)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ.

2018 Open to Public

► Go to www.irs.gov/Form990 for instructions and the latest information. Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

OMB No 1545-0047

THE JUSTICE - FRYE FOUNDATION, JNC. 76-0649834						3 3 <u>4</u>		
Pa	rt I	Reason for Public Cha	rity Status (All	organizations must	comple	ete this p	art.) See instruction	ons.
The	organi	zation is not a private found	ation because it	is: (For lines 1 through	12, che	ck only o	ne box.)	
1 2	□ A	church, convention of church school described in section	170(b)(1)(A)(ii).	(Attach Schedule E (F	orm 990	or 990-E	<i>Z</i>).)	
3		hospital or a cooperative ho						
4		medical research organizatiospital's name, city, and stat	•	onjunction with a hosp	pital desc	cribed in s	section 170(b)(1)(A)	(iii). Enter the
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)							
6 7	□ A	federal, state, or local gover n organization that normally escribed in section 170(b)(1	receives a subs	stantial part of its sup				n the general public
8	□ A	community trust described i	n section 170(b)(1)(A)(vi). (Complete	Part II.)			
9	o u	n agricultural research organ r university or a non-land-gra niversity'	ınt college of agı	riculture (see instruction	ons). Ente	er the nan	ne, city, and state of	the college or
10	re su ac	n organization that normally ecepts from activities related apport from gross investmen equired by the organization a	to its exempt fut t income and un lifter June 30, 19	inctions—subject to c related business taxal 75. See section 509(a	ertain exc ble incon a)(2). (Co	ceptions, ne (less so mplete Pa	and (2) no more that ection 511 tax) from art III.)	n 33¹/3% of its
11		n organization organized and						
12		n organization organized and						
•		one or more publicly suppo heck the box in lines 12a thro						
а		Type I. A supporting organithe supported organization supporting organization. Y	n(s) the power to	regularly appoint or e	lect a ma	ijority of t		
b		Type II. A supporting orga control or management of organization(s). You must	the supporting o	organization vested in	the same			
С		Type III functionally integ its supported organization						ally integrated with,
d	į.	Type III non-functionally that is not functionally inte requirement (see instructional see instruction).	grated. The orga	inization generally mu	st satisfy	a distribi	ution requirement an	
е		Check this box if the organ functionally integrated, or						e II, Type III
f	Ente	er the number of supported	organizations .					
g	Pro	vide the following information	n about the supp	oorted organization(s).				
	(ii) Nar	ne of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			•		Yes	No		
(A)	TOCK BY	RIDGE COUNTY		0				
(~)	416#	SCHOOL	N/A	SCHOOL	X		56,686.97	
		SCHOOL	N/A) SCHOOL	×		27,041.25	0
(C)						-	-	
(D)								
(E)		0						

Total

83,728.22

	_
Page	2

Part							
\	(Complete only if you checked the						alify under
	Part III. If the organization fails to	quality unde	er the tests lis	sted below, p	lease comple	ete Part III.)	'
	on A. Public Support	(-) 0014	(h) 0015	(-) 001C	(4) 0017	(-) 001D	(O Total (
	day year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total/
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	The second second	The state of the s			A STATE OF THE STA	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)				Sent Control of Contro		
	Public support. Subtract line 5 from line 4				A STATE OF THE STA		
6 Secti	on B. Total Support		THE COLUMN TWO IS NOT THE OWNER.	/	STATE STATE OF THE PROPERTY OF	SECTION OF STREET, STR	
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2Ø16	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	(0,2011	(0) _0.0	(),	(0, 2011	(0) = 0.10	(4) / 2 - 2 - 2 - 2
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on		X				
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc			\ .		12	
13	First five years. If the Form 990 is for the	_	n's first, secon	id, third, fourth	n, or fifth tax y	ear as a sectio	on 501(c)(3)
	organization, check this box and stop he		<u> </u>	· · · · · · · · · · · · · · · · · · ·			<u> </u>
	on C. Computation of Public Suppor			(4)	<u> </u>	144	
14 15 16a	Public support percentage for 2018 (line Public support percentage from 2017 Sci 331/3% support test—2018. If the organ box and stop here. The organization qua	hedule A, Part ization did not	II, line 14 .t check the bo	 x on line 13, a	nd line 14 is 3	14 15 31/3% or more,	% check this
b	331/3% support test 2017. If the organithis box and stop here. The organization					vs 331/3% or m	iore, check
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part VI how the organization meets the organization	eets the "facts 'facts-and-circ	s-and-circumst cumstances" te	ances" test, clest. The organi	heck this box azation qualifie	and stop here s as a publicly	Explain in supported
b 18	10% facts-and-circumstances test—2 15 is 10% or more, and if the organization in Part VI how the organization resupported organization. Private foundation. If the organization displays the organizati	ation meets the meets the "faction of the contract of the con	ne "facts-and- cts-and-circum	circumstances stances" test.	" test, check The organizat	this box and non qualifies as	stop here. s a publicly
	instructions						

Part	Support Schedule for Organiza				nization failed	t to qualify up	dow Dowt II
	(Complete only if you checked the lifth the organization fails to qualify						der Part II.
<u> </u>		under the te	sts listed beit	Jw, piease co	ompiete i ait	····	
	on A. Public Support	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018/	(f) Total
Calen 1	dar year (or fiscal year beginning in) Gifts grants, contributions, and membership fees	(a) 2014	(b) 2013	(6) 2010	(4) 2017	(6) 2010	(i) Total
ı	received (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
_	sold or services performed, or facilities						
	furnished in any activity that is related to the		İ				
2	organization's tax-exempt purpose		-		/		
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
	\				/-	-	
4	Tax revenues levied for the organization's benefit and either paid to						
	or expended on its behalf						
_		ļ 	<u> </u>		/		
5	The value of services or facilities furnished by a governmental unit to the						
	organization without charge			/	[
	Total. Add lines 1 through 5			/			_
6 7a	Amounts included on lines 1, 2, and 3			 			*
Ia	received from disqualified persons .						
	·			//			
b	Amounts included on lines 2 and 3 received from other than disqualified	\setminus					
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year		/	/			
_	Add lines 7a and 7b		/			·	
8	Public support. (Subtract line 7c from						
J	line 6.)				a i a	T	
Secti	on B. Total Support			<u> </u>	·		
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6		X				
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,			•			
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b			<u> </u>			**********
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						*******
12	Other income. Do not include gain or			\			
	loss from the sale of capital assets			\			
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
4.4	and 12.)	L	's first seess	d third fourth	or fifth tay ve	ar as a section	501(0)(3)
14	organization, check this box and stop he						. —
Section	on C. Computation of Public Suppor			<u> </u>			<u> </u>
15	Public support percentage for 2018 (line 8			13. column (fl)		15	%
16	Public support percentage from 2017 Sch		-		\	16	%
	on D. Computation of Investment In					1	<u> </u>
17	Investment income percentage for 2018 (y line 13, colu	mn (f))	177	%
18	Investment income percentage from 2017					18\	%
19a	331/3% support tests-2018. If the organ	ization did not	check the box	c on line 14, ai	nd line 15 is m	ore than 331/3%	, and line
_	17 is not more than 331/3%, check this box	and stop here.	The organization	on qualifies as	a publicly supp	orted organizatio	on . 🕨 🔲
b	331/3% support tests - 2017. If the organiz	zation did not c	heck a box on	line 14 or line 1	19a, and line 16	is more than 33	31/3%, and
	line 18 is not more than 331/3%, check this l	box and stop h	ere. The organ	izatıon qualifies	as a publicly s	upported organi:	zation 🕨 🗌
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o			
	L			<u></u>		edule A (Form 990	

Voc No

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. An Supporting Organizations		
——————————————————————————————————————	 	

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of state under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answ (b) and (c) below.
- b. Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) at satisfied the public support tests under section 509(a)(2)? 'If "Yes," describe in Part VI when and how to organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretic despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization use to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and E numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the acti was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefit by one or more of its supported organizations, or (iii) other supporting organizations that also support benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contribut (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled ent with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or mo disqualified persons as defined in section 4946 (other than foundation managers and organizations describe in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in whi the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal bene from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrat supporting organizations)? If "Yes," answer 10b below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, determine whether the organization had excess business holdings.)

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Part	Supporting Organizations (continued)		-	 -
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			2
	below, the governing body of a supported organization?	11a		<u>X</u>
	A family member of a person described in (a) above?	11b		LX_
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		LX_
Secti	on B. Type I Supporting Organizations			
		(A) Table	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
2	Dul'abiliti announce for the billion of the standard announce the other than the supported		SA	
2	Did'the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part		7.5	
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2.5	是多	
	supervised, or controlled the supporting organization.	2	Sept.	***************************************
Section	on C. Type II Supporting Organizations			
	7		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	52 AL	AMERICA.	
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	Parish to		
'n	or management of the supporting organization was vested in the same persons that controlled or managed	10.340	744 24 (14)	A PARTY
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
	,		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
		1	X	255
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	2		
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3	X	
Section	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstruc	tions	5).
a	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (sec ing	tructi	ons).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.			
L	·	2a		
	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
	Parent of Supported Organizations. Answer (a) and (b) below.	20	16.00	
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a	T	
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b	·	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3	48,064.86	
4 Add lines 1 through 3.	4	48,064.86	
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7	76.70	
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	47,988.16	
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b	754,609,56	
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	2,579,546.18	
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):	430		International Contract of the
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3	2,579,546.18	
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	38,693.19	
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	2,540,852,99	
6 Multiply line 5 by .035.	6	98,929.85	
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8	88,929,85	
Section C—Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		47, 988,16
2 Enter 85% of line 1.		SAN VIII TANKS	40,789.94
3 Minimum asset amount for prior year (from Section B, line 8, Column A)			88,9298
4 Enter greater of line 2 or line 3.	4	受到的基本企业	88,9298
5 Income tax imposed in prior year	5		1 miles 2
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		<i>8</i> 8,929,85
7 Check here if the current year is the organization's first as a non-functional instructions)	ly in	tegrated Type III supporting	organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Sect	ion D-Distributions	<u> </u>		Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes	<u> </u>	83,728.22
. 2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	76.70
3	Administrative expenses paid to accomplish exempt purp	ooses of supported orga	ınızations	,
4	Amounts paid to acquire exempt-use assets			
5_	Qualified set-aside amounts (prior IRS approval required)			٥,
6	Other distributions (describe in Part VI). See instructions.			,
7	Total annual distributions. Add lines 1 through 6.			83,804,92
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	th the organization is res	sponsive .	83,728.22
9	Distributable amount for 2018 from Section C, line 6		·	88,929.85
10	Line 8 amount divided by line 9 amount	- , , -	1 . 1	0.942
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			88,929.85
2	Underdistributions, if any, for years prior to 2018			
	(reasonable cause required explain in Part VI). See			
	instructions.		turnen Terese zumantarian zu	
3	Excess distributions carryover, if any, to 2018			
	From 2013			
<u>.</u> b	From 2014			
_ <u> </u>	From 2015			
<u>d</u>	From 2016 195.05			
e	From 2017			
	Total of lines 3a through e	76,275.44	ATT TO THE PARTY OF THE PARTY O	
<u>g</u> h	Applied to underdistributions of prior years Applied to 2018 distributable amount	The second secon		7/ 275 111
	Carryover from 2013 not applied (see instructions)			76, 275,44
_ - -	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	0		
4	Distributions for 2018 from			
•	Section D, line 7: \$ 93,804.92			
a	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			12,654.41
С	Remainder. Subtract lines 4a and 4b from 4.	71,150.51		
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result		The state of the s	
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			_
7	Excess distributions carryover to 2019. Add lines 3		Personal Section of the Control of t	
•	and 4c.	71,150.51		
8	Breakdown of line 7:			
a	Excess from 2014 .			
<u>b</u>	Excess from 2015			
	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018			
		THE CONTRACTOR OF SECURE PROPERTY AND SECURE OF SECURE	Color de la	A (Form 990 or 990-FZ) 2018

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
PART	IV, SECTION D, LINE 2: THE JUSTICE-FRYE FOUNDATION, INC. AND ITS
	SUPPORTED ORGANIZATIONS COMMUNICATE REGULARLY IN WRITING AND
	BY PERSONAL CONTACT REGARDING PREVIOUS SCHOLARSHIP GRANTS,
	AVAILABLE NEW SCHOLARSHIP GRANTS, AND AWARD PRESENTATION
	EVENTS FOR EACH NEW GRANT.
 PART	IV, SECTION D. LINE 3 . THE SUPPORTED ORGANIZATIONS HAVE
	EXCLUSIVE RESPONSIBILITY FOR SOLICITING QUALIFIED APPLICANTS
	FOR NEW SCHOLARSHIPS AND SELECTING SCHOLARSHIP WINNERS
	FROM ALL APPLICANTS.
	<u> </u>

SCHEDULE 1 (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990. ► Go to www.irs.gov/Form990 for the latest information.

JUSTICE-FRYE FOUNDATION, INC.

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Department of the Treasury Internal Revenue Service Name of the organization

1545-0047	318 .
ON SEC	20

Open to Public Inspection Employer identification number 76-0649834

Part	t General Information on Grants and Assistance	on Grants and	Assistance					
- 0	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	in records to subs award the grants o zation's procedur	stantiate the amou or assistance? es for monitoring t	nt of the grants or the use of grant fur	assistance, the g	rantees' eligibility f	for the grants or assistance	e, and SYes No
Part		ssistance to Do	mestic Organizate eceived more the	ations and Domoran \$5,000. Part II	estic Governm I can be duplica	ients. Complete i	if the organization answ space is needed.	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.
<u>+</u>	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
E %	(1) ROCKBRIDGE COUNTY HIGH SCHOOL, LEXINGTON, VA	N/A	ı	16.98795				SC HOLARSHIPS
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(11)		-	-					
(12)	-							-
0 W	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	1 501(c)(3) and gov organizations listed	vernment organizati	tions listed in the li	ine 1 table			2 4.
For P	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruction	is for Form 990.		0	Cat No 50055P		Schedule I (Form 990) (2018)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Name of the organization	Employer identification number
THE JUSTICE - FRYE FOUNDATION, INC	76-0649834
PART VI, SECTION A, LINE 2: KENNETH L. JUSTICE AND	ELIZABETH F.
JUSTICE ARE MARRIED.	
PART VI, SECTION A, LINE 80; WRITTEN MINUTES OF M	IEETINGS OF THE
GOVERNING BODY ARE PREPARED AND RETAINED.	<u></u>
PART VI, SECTION A, LINE 9:	
- DR. JULENE K. JOHNSON	
247 DOWNEY ST., SAN FRANCISCO, CA 94117	
- JoHN MORRIS	
1972 BIG SPRINGS DR., LEXINGTON, VA 24450)
PART VI, SECTION C, LINE 19: THE JUSTICE-FRYE FOR	UNDATION, INC. MAKES
DOCUMENTS AVAILABLE UPON REQUEST. THERE	E WERE NO SUCH
REQUESTS DURING 2018.	
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Schedule O (Form 990 or 990-EZ) (2018)