EXTENDED TO NOVEMBER 15, 2019

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
not enter social security numbers on this form as it may be a security numbers.

▶ Do not enter social security numbers on this form as it may be made-public. ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

<u>FUI</u>	Talendar year 2018 or tax year beginning DEC	12, 2018	, and ending	DEC 31, 2018	<u> </u>
Na	ame-of foundation			A Employer identification	n number
T	THE ADVENTUS FOUNDATION INC	83-2812614			
	umber and street (or P O box number if mail is not delivered to street add	B Telephone number			
	402 ENTERPRISE DRIVE		L	662-371-41	
	ty or town, state or province, country, and ZIP or foreign pos DXFORD , MS 38655	stal code		C If exemption application is p	pending, check here
G (Check all that apply: X Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	s, check here
	Final return	Amended return		2 Foreign organizations me check here and attach co	eeting the 85% test,
	Address change Check type of organization: X Section 501(c)(3) exer	Name change	@[[
	Section 4947(a)(1) nonexempt charitable trust 0	ther taxable private founda		E` If private foundation sta under section 507(b)(1	······································
(fi	Fair market value of all assets at end of year from Part II, col. (c), line 16) \$ 1,400,000. (Part I, column)	er (specify)	Accrual	F If the foundation is in a under section 507(b)(1	
_	art I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investme		(d) Disbursements for charitable purposes
	necessarily equal the amounts in column (a))	expenses per books	ıncome	income	(cash basis only)
	1 Contributions, gifts, grants, etc., received	1,400,000.		N/A	
	2 Check I if the foundation is not required to attach Sch. B Interest on savings and temporary				<u> </u>
	3 cash investments 4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
o.	62 Net gain or (loss) from sale of assets not on line 10				
Revenue	Gross sales price for all assets on line 6a		···· ··· · · · · · · · · · · · · · · ·		
ev.	7 Capital gain net income (from Part IV, line 2)			0.	
	8 Net Short-term capital gain				
	9 Income modifications Gross sales less returns and allowances			 	
• h	10a and allowances b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income				
	12 Total. Add lines 1 through 11	1,400,000.		0.	
	13 Compensation of officers, directors, trustees, etc	0.		0.	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefite				
nse	b Accounting Test CEIVED				
Expense	b Accounting tess CEIVED c Other professional fees 17 Interest APR 2 2 2020				
	c Other professional fees 17 Interests APR 2 2 2020				
nistrative					
nist	18 Taxes 19 19 Depreciation and depleton N, UT 20 Occupancy OS 19				ļ
Admi	20 Occupancy				
nd A					
a	22 Printing and publications 23 Other expenses				
Operatir	expenses Add lines 13 through 23	0.		0.	0
ŏ	25 Contributions, gifts, grants paid	0.			0
	26 Total expenses and disbursements.				
	Add lines 24 and 25	0.		0.	0
	27 Subtract line 26 from line 12.	1,400,000.	···		
	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	1,400,000.		0.	
	c Adjusted net income (if negative, enter -0-)		 .	N/A	
_	501 12-11-18 LHA For Paperwork Reduction Act Notice,	· ······	""	1	Form 990-PF (201

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see in	struc	tions	s)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%				0.
	of Part I, line 27b				
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				0.
}	Add lines 1 and 2				0.
}	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)				0.
,	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-				0.
j	Credits/Payments:				
a	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 0.				
b	Exempt foreign organizations - tax withheld at source 66 0.				
C	Tax paid with application for extension of time to file (Form 8868) 6c 0.				
1	Backup withholding erroneously withheld 6d 0.				
	Total credits and payments. Add lines 6a through 6d				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				0.
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed				0.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
	Enter the amount of line 10 to be: Credited to 2019 estimated tax				
31	rt VII-A Statements Regarding Activities				
ı	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
	any political campaign?		1a	Ī	X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition		1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				
	distributed by the foundation in connection with the activities.				
	Did the foundation file Form 1120-POL for this year?		1c	İ	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			1	
	(1) On the foundation. ► \$ 0 • (2) On foundation managers. ► \$ 0 •				
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. > \$0.			ĺ	
	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Х
	If "Yes," attach a detailed description of the activities.		-		
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			l	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	 -	X
		N/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	.,	5		X
	If "Yes," attach the statement required by General Instruction T		- 3		
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
				ł	
	Ry language in the governing instrument or				
	By language in the governing instrument, or By state language in the affectively amende the governing instrument so that no mandatory directions that conflict with the state language.				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			 	
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		6	X	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		6	X X	
,	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		-		
,	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV Enter the states to which the foundation reports or with which it is registered. See instructions. 		-		
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV Enter the states to which the foundation reports or with which it is registered. See instructions. FL 		-		
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV Enter the states to which the foundation reports or with which it is registered. See instructions. FL If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) 		7	Х	,
a	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV. Enter the states to which the foundation reports or with which it is registered. See instructions. FL If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation		-		•
3	● By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV Enter the states to which the foundation reports or with which it is registered. See instructions. FL If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar		7	Х	
a .	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV. Enter the states to which the foundation reports or with which it is registered. See instructions. FL If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation		7	Х	X

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Pa	art VII-A Statements Regarding Activities (continued)				
•				Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512(b)(13)? If "Yes," attach schedule. See instructions	_	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privile				
	If "Yes," attach statement. See instructions		12	7,	X
13		Ľ	13	Х	<u> </u>
	Website address ► N/A The books are in care of ► CHARLES J. ALLEN Telephone no. ► 6	62-371	_ / 1	10	
14		02-371 0+4 ► 386		.10	
15		+4 <u>500.</u>	55	_	abla
.5	and enter the amount of tax-exempt interest received or accrued during the year	; I	N/	/A	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,	<u>' 1</u>		Yes	No
	securities, or other financial account in a foreign country?	Γ.	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the				
	foreign country				
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		T	Yes	No
18	During the year, did the foundation (either directly or indirectly):				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
		X No			
		X No			
		X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	┰ ┐ │			
	·	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"				
	if the foundation agreed to make a grant to or to employ the official for a period after	X No]	i
		A NO	-		i
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here		IU		
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		ł	l	
	before the first day of the tax year beginning in 2018?	<u> </u>	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation				
_	defined in section 4942(j)(3) or 4942(j)(5)):				
	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning				
	before 2018?	X No			
	If "Yes," list the years \blacktriangleright		- 1		
- 1	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	. L			
	,	N/A 2	2 b		
(of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			ļ	
	<u> </u>			İ	
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	ਦ ੀ			
	·· - ·	X No	1		
,	b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after	_			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of baldings assured by set as beginning as (A) the language of the 10 of the 10 of the language of the 10 of the	е			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018.)	N/A 3	3ь	-	
A	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
	b Did the foundation mivest during the year any amount in a mainler that would jeopardize its charitable purposes? b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		-		
	had not been removed from jeopardy before the first day of the tax year beginning in 2018?		4b	\neg	X
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0

Total number of other employees paid over \$50,000

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Part VIII Information About Officers, Directors, Trustees, I Paid Employees, and Contractors (continued)	oundation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If no	ne, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	···	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include release number of organizations and other beneficiaries served, conferences convened, research p		Expenses
1 N/A	aporo produced, etc.	
1 11/21		
2		
3		
4		
· · · · · · · · · · · · · · · · · · ·		
Dort IV B Common of Drawns Deleted Investments	<u>, , ,</u>	
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the t	av year on lines 1 and 2	Amount
37 / 3	ax year on lines 1 and 2.	Amount
1N/A		
2		
<u> </u>		
All other program-related investments. See instructions.		
3		
Total Add lines 1 through 3	▶ I	0.

P	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	1,400,000.
C	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d	1,400,000.
	Reduction claimed for blockage or other factors reported on lines 1a and	-	
	1c (attach detailed explanation) 1e 0.	1	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,400,000.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	21,000.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,379,000.
6	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	3,778.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here ▶ ☐ and do not complete this part)	d certain	
1	Minimum investment return from Part X, line 6	1	3,778.
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018. (This does not include the tax from Part VI.)		
c	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,778.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,778.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,778.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation question of tax in those years.	ualifies for	the section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7	***************************************	, , , , , , , , , , , , , , , , , , ,		3,778.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017				
f Total of lines 3a through e	0.		, , , , , , , , , , , , , , , , , , , ,	
4 Qualifying distributions for 2018 from				
Part XII, line 4: ► \$0.				
a Applied to 2017, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2017. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				_3,778.
be distributed in 2019 7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
		1		
section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2013				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019.				
Subtract lines 7 and 8 from line 6a	0.			
0 Analysis of line 9:				
a Excess from 2014				
b Excess from 2015				
c Excess from 2016				
d Excess from 2017				
e Excess from 2018				

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art XIV Private Operating Fo			A, question 9)	N/A	
a If the foundation has received a ruling or					
foundation, and the ruling is effective for			▶ ∟		
b Check box to indicate whether the founda		foundation described in		4942(j)(3) or 49	42(₁)(5)
a Enter the lesser of the adjusted net	Tax year	41.0047	Prior 3 years	T (0.0045	
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a				*****	
Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not	1				
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly	:				
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return			`		
shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income art XV Supplementary Information	mation (Complete	e this part only if	the foundation I	had \$5,000 or mor	e in assets
at any time during th			the roundation i	1144 40,000 01 11101	c iii assets
Information Regarding Foundation					-
a List any managers of the foundation who	-	ean 2% of the total contr	hutions received by the t	foundation before the close	of any tay
year (but only if they have contributed mo			ibations received by the t	ioundation before the close	or any tax
CKSON PERRY	, , ,				
b List any managers of the foundation who	own 10% or more of the	stock of a cornoration (or an equally large portion	n of the ownership of a pai	rtnershin or
other entity) of which the foundation has			or an equally large porte	ir or the ownership of a par	thership of
ONE					
Information Regarding Contributio	n. Grant. Gift. Loan. S	Scholarship, etc., Pro	ograms:	-	
Check here ► X if the foundation on				ot accept unsolicited reque	ests for funds. If
the foundation makes gifts, grants, etc., to					
a The name, address, and telephone number	er or email address of the	person to whom applica	ations should be address	ed:	. '
			2 22		
b The form in which applications should be	submitted and information	on and materials they sh	ould include:		
Any submission deadlines:					- .
4 Apurpatriations or limitations on suitations	auch as bu sassash:!	arass shoreship fields	lundo of motivities == ==	ther feeters:	·
I Any restrictions or limitations on awards,	audit as by geographical	arcas, criaritable litius,	nings of montations, of 0	uner laciolo,	

Enter gross amounts unless otherwise indicated.

(e)

Excluded by section 512, 513, or 514

Part·XVI-A **Analysis of Income-Producing Activities**

Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
a	-		<u> </u>		
b	-	·	<u> </u>		
C	-		 		
d	-				,,
e	-				
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities				<u> </u>	··
5 Net rental income or (loss) from real estate:					•
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal		·			
property		^			
7 Other investment income		·			
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events			\vdash		(
10 Gross profit or (loss) from sales of inventory	<u> </u>				
11 Other revenue:					
a					
b	1 1				
C					
	1 1				
a					
d	·				<u>.</u>
е		0.		0.	0.
e		0.		0.	0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0.		0.	0.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)			empt	13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities 1	to the Accom	plishment of Exe	-	13 Purposes	0.
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Unrelated business income

RIDGELAND, MS 39157

Phone no. 601-326-1000 Form **990-PF** (2018)

	390-PF (Z		DARMIOS E						2012014	Pa	ge is
Par	t XVII	Information Re Exempt Organ		sfers to a	nd Transactions	s and	d Relationshi	ps With None	charitable		
1 1	Old the ori	ganization directly or indir		of the following	ng with any other organ	nzation	n described in section	on 501(c)		Yes	No
		section 501(c)(3) organ						o oo .(o)			
		from the reporting founds									
	1) Cash			,	3				1a(1)	t	Х
	2) Other	assets							1a(2)		X
	Other tran										
		of assets to a noncharital	ble exempt organizat	tion					1b(1)		X
	•	ases of assets from a nor							1b(2)		X
		l of facilities, equipment,							1b(3)		Х
	•	oursement arrangements							1b(4)		Х
	5) Loans	or loan guarantees							1b(5)		X
	•	rmance of services or me	mbership or fundrais	sing solicitatio	ons				1b(6)		Х
c	Sharing of	facilities, equipment, ma	iling lists, other asse	ts, or paid em	ployees				1c		Х
d	f the ansv	ver to any of the above is	"Yes," complete the	following sche	edule. Column (b) shou	ıld alw	ays show the fair π	narket value of the g	goods, other ass	ets,	
(or services	s given by the reporting fo	oundation. If the four	ndation receive	ed less than fair market	t value	in any transaction	or sharing arrangei	ment, show in	-	
(column (d) the value of the goods, (other assets, or serv	ices received.			_				
3) Lin	e no	(b) Amount involved	(c) Name of	fnoncharitable	e exempt organization		(d) Description	of transfers, transactio	ns, and sharing arr	angemen	ts
				N/A							
	ŀ										
					·						
					<u> </u>						
							<u> </u>				
									w.,		
							<u></u>				
2a i	s the four	idation directly or indirect	tly affiliated with, or i	related to, one	or more tax-exempt or	rganıza	ations described				_
1	n section	501(c) (other than section	n 501(c)(3)) or in se	ction 527?					Yes	X] No
b	f "Yes," co	mplete the following sche			<u> </u>						
		(a) Name of org	anization		(b) Type of organizat	tion		c) Description of re	elationship		
		N/A									
			\sim								
	1								_		
c:-		penalties of perjury I declared lief, it is true, correct, and fom	nat I have examined this iplete. Declaration of pre	return, including parer (other than	accompanying schedules a _taxpayer) is based on all in	ano stat iformatio	tements, and to the bes on of which preparer ha	st of my knowledge	May the IRS or	discuss the	nis
Sig Her		///			1				shown below	? See ins	
161		ature of officer or trust-	~~		/ P.V.		DIRECT	OR	X Yes		No
	Sign	ature of officer or trustee		Dranassia	Date		Title	Chack	DTIN		
		Print/Type preparer's na	une	Preparer's s	ignature		Date	Check if	PTIN		
Pai	d	DIATE CO	ONTER CR.	DT 3.75	1.13.0001TT	را ہ	06/05/10	self- employed	D01545	2 - 2	
		BLAIR WAGG		RLAIK	WAGGONER,	C (06/25/19	In	P01547		
	parer Only	Firm's name ► HOR	ик ггъ					Firm's EIN ► 2	U-19 4 12	44	
USŧ	Unity	Errmin address > 1 0	20 117011	ND COT	ONU DUCES	<u> </u>	400				
		Firm's address > 10	ZU HIGHLA	ND COL	UNY PKWY	ST	E. 400	1			

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Name of the organization

Employer identification number

	THE ADVENTUS FOUNDATION INC	83-2812614					
Organization type (check	k one)						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
•	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Speci	al Rule See instructions					
X For an organizat	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions to my one contributor. Complete Parts I and II. See instructions for determining a contrib	· · ·					
Special Rules							
sections 509(a)(any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% sup 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, utor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the EZ, line 1 Complete Parts I and II	16a, or 16b, and that received from					
year, total contr	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III						
year, contributions year,	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.						
but it must answer "No"	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on at the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)						

Name, of organization

Employer identification number

THE ADVENTUS FOUNDATION INC

83-2812614

Part I	Contributors (see instructions) Use duplicate copies of Part I if add	litional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DICKSON PERRY 241 NEEDLERUSH DRIVE SANTA ROSA BEACH, FL 32459	\$1,400,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)

Name of organization

Employer identification number

THE ADVENTUS FOUNDATION INC

83-2812614

Part II			
(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
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

Name of organization

Employer identification number

	OVENTUS FOUNDATION INC			83-2812614	
Part III	Exclusively religious, charitable, etc., contributor from any one contributor. Complete columns (a)	ons to organizations described in se	ection 501(c)(7), (8), or (10) th	at total more than \$1,000 for the year	r
	completing Part III, enter the total of exclusively religious,	haritable, etc., contributions of \$1,000 or	less for the year (Enter this into once	e) ► \$	
(-) Al - 1	Use duplicate copies of Part III if additional s	space is needed			_
(a) No. from Part I	(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held		
		•			-
					-
					-
}	(e) Transfer of gift				
	Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee		
					-
			-		-
					-
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	(d) Description of how gift is held	
					_
					-
					-
	(a) Transfer of guit				
	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
					_
					-
					-
(a) No.				· · · · · · · · · · · · · · · · · · ·	_
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
					-
	(a) Transfer of the				
	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
•	Transfer of Organical Conference of Transfer of Conference of Transfer of Conference of Transfer of Conference of Transfer of Conference of Transfer of Conference of Transfer of Conference of Confer				
				·	_
					-
(a) Na				· · · · · · · · · · · · · · · · · · ·	_
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
Parti		·, -			_
					-
					•
-					
	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
					-
					-
					-

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS
PART VII-A, LINE 10

STATEMENT 1

NAME OF CONTRIBUTOR

ADDRESS

DICKSON PERRY

241 NEEDLERUSH DRIVE SANTA ROSA BEACH, FL 32459