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As Filed Data -

Return of Private Foundation

DLN: 93491319023619 OMB No 1545-0052

2018

| Form 990-PF |
|----------------------------|
| Department of the Treasury |

Internal Revenue Service

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

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

Open to Public Inspection

| | | ndar year 2018, or tax year beginning 07-01-2 | .018 , a | nd er | nding 06-30- | | | |
|----------------|--------------------|--|--|--|-------------------------|---|---|--|
| CD | HELEN | indation LAND JEFF GLAZE | | | | entification numbe | r | |
| | UNDAT: | | s) Room/suite | | 63-6174358 | | | |
| | ber and D BOX 1 | I street (or P O box number if mail is not delivered to street address 1628 | | B Telephone number (see instructions) | | | | |
| Citi | | 770 (| | (251) 438-8260 | l | | | |
| | | i, state or province, country, and ZIP or foreign postal code 36633 | | | C If exemption | application is pendin | g, check here | |
| G Ch | neck al | | a former public charity | | D 1. Foreign org | ganizations, check he | ere 🕨 🗌 | |
| | | ☐ Final return ☐ Amended return | า | | | ganizations meeting k here and attach co | | |
| | | ☐ Address change ☐ Name change | | | E If private fou | ındatıon status was t | terminated | |
| | | pe of organization Section 501(c)(3) exempt private 1 4947(a)(1) nonexempt charitable trust Other taxal | e foundation ble private foundation | | under section | n 507(b)(1)(A), chec | k here | |
| | | exet value of all assets at end J Accounting method | Cash 🗹 Accru | ıal | F If the founda | ition is in a 60-monti | h termination 🖂 | |
| of y | year (f | from Part II, col (c), ▶\$ 5,660,574 Other (specify) (Part I, column (d) mus | | - | | n 507(b)(1)(B), chec | | |
| Pa | rt I | Analysis of Revenue and Expenses (The total | T | 1 | | | (d) Disbursements | |
| | | of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) | (a) Revenue and expenses per books | (b) | Net investment income | (c) Adjusted net income | for charitable purposes (cash basis only) | |
| | 1 | Contributions, gifts, grants, etc , received (attach schedule) | | | | | | |
| | 2 | Check ▶ ☑ If the foundation is not required to attach Sch. B | | | | | | |
| | 3 | Sch B Interest on savings and temporary cash investments | 3,080 |) | 3,080 | | | |
| | 4 | Dividends and interest from securities | 120,710 |) | 120,710 | | | |
| | 5a | Gross rents | | | | | | |
| | ь | Net rental income or (loss) | _ | | | | | |
| rre | 6a | Net gain or (loss) from sale of assets not on line 10 | 153,303 | 3 | | | | |
| Revenue | b | Gross sales price for all assets on line 6a | .3 | | | | | |
| Re | 7 | Capital gain net income (from Part IV, line 2) | | | 153,303 | | | |
| | 8 | Net short-term capital gain | | | | | | |
| | 9 | Income modifications | | | | | | |
| | 10a b | Gross sales less returns and allowances Less Cost of goods sold | | | | | | |
| | С | Gross profit or (loss) (attach schedule) | | | | | | |
| | 11 | Other income (attach schedule) | 50,222 | 2 | 50,222 | | | |
| | 12 | Total. Add lines 1 through 11 | 327,315 | 5 | 327,315 | | | |
| | 13 | Compensation of officers, directors, trustees, etc | 13,000 |) | 0 | | 13,000 | |
| | 14 | Other employee salaries and wages | | | | | | |
| es | 15 | Pension plans, employee benefits | | | | | | |
| Sue | 16a | Legal fees (attach schedule) | | | | | | |
| Expenses | Ь | Accounting fees (attach schedule) | 4,675 | 5 | 1,169 | | 3,506 | |
| e E | С | Other professional fees (attach schedule) | 44,804 | | 17,922 | | 26,882 | |
| Administrative | 17 | Interest | | | | | | |
| <u> </u> | 18 | Taxes (attach schedule) (see instructions) | 5,886 | 5 | 2,528 | | (| |
| Ξ | 19 | Depreciation (attach schedule) and depletion | | | | | | |
| Act | 20 | Occupancy | | | | | | |
| D U | 21 22 | Printing and publications | | | | | | |
| ਰ ਰ | 23 | Other expenses (attach schedule) | 2,033 | 3 | 210 | | 1,823 | |
| Ē | 24 | Total operating and administrative expenses. | 2,,,,, | | | | | |
| Operating and | | Add lines 13 through 23 | 70,398 | 3 | 21,829 | | 45,211 | |
| ŏ | 25 | Contributions, gifts, grants paid | 230,000 | 1 | <u> </u> | | 230,000 | |
| | 26 | Total expenses and disbursements. Add lines 24 and 25 | 300,398 | | 21,829 | | 275,211 | |
| | 27 | Subtract line 26 from line 12 | 300,396 | | 21,029 | | 2/3,211 | |
| | а | Excess of revenue over expenses and | | | | | | |
| | b | disbursements Net investment income (If negative, enter -0-) | 26,917 | | 20E 40C | | | |
| | С | Adjusted net income (if negative, enter -0-) | | | 305,486 | | | |
| For | | work Reduction Act Notice, see instructions. | 1 | 1 , | Cat No 11289X | , Eor | m 990-PF (2018 | |

1,044,140

2,352,273

810,377

304,700

5,367,000

5,367,000

5,367,000

5.367.000

1,080,759

2,382,749

1,433,769

46,654

5,081,682

5,081,682

5,081,682 5,081,682

2 3

4

5

5,367,000 26,917

5,393,917

5,081,682 Form **990-PF** (2018)

312,235

1,095,437

2,802,884

1,501,802

122,700

5,660,574

Prepaid expenses and deferred charges

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

Investments—corporate bonds (attach schedule)

Investments—land, buildings, and equipment basis ▶

Less accumulated depreciation (attach schedule) ▶

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

Total liabilities(add lines 17 through 22)

Foundations that do not follow SFAS 117, check here ▶ ✓

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

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

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

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

Analysis of Changes in Net Assets or Fund Balances

Less accumulated depreciation (attach schedule)

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

Foundations that follow SFAS 117, check here ▶

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

Land, buildings, and equipment basis -

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe ▶_

Unrestricted

Permanently restricted

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶ .

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Temporarily restricted

Grants payable

| | 6 |
|--------|-----|
| | 7 |
| S | 8 |
| Assets | 9 |
| As | 10a |
| | b |
| | |

C

11

12

13 14

15

16

17

18

19

20

21

22

23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

3

5

| | e the kınd(s) of property sold (e g , rehouse, or common stock, 200 shs | How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) | |
|---|--|---|--|--|--|
| 1 a PUBLICLY TRADED SECU | RITIES | Р | | | |
| b PUBLICLY TRADED SECU | | | Р | | |
| c CAPITAL GAINS DIVIDEN | | | Р | | |
| d | | | | | |
| e | | | | | |
| | (f) | | (g) | | h) |
| (e) | Depreciation allowed | | other basis | | r (loss) |
| Gross sales price | (or allowable) | plus exp | ense of sale | (e) plus (f |) minus (g) |
| a 42 | 5,316 | | 417,440 | 1 | 7,876 |
| b 1,50 | 1,769 | | 1,432,980 | | 68,789 |
| c 7 | 6,638 | | | | 76,638 |
| d | | | | | |
| e | | | | ĺ | |
| | showing gain in column (h) and ow | ned by the foundation | on 12/31/69 | , | 1) |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | Excess | (k) s of col (ı) l (j), ıf any | Gains (Col (col (k), but not | h) gain minus less than -0-) or om col (h)) |
| a | | | (37) | | 7,876 |
| b | | | | | 68,789 |
| c | | | | | 76,638 |
| d | | | | | 70,030 |
| e | | | | | |
| 2 Capital gain net income | or (net capital loss) | If gain, also enter in P If (loss), enter -0- in I | | 2 | 153,303 |
| | gain or (loss) as defined in sections rt I, line 8, column (c) (see instructi | |) . } | 3 | |
| Part V Qualification U | Jnder Section 4940(e) for Re | educed Tax on Net | Investment Inc | ome | |
| | rivate foundations subject to the se | | | | |
| If section 4940(d)(2) applies, le | • | | | - / | |
| | e section 4942 tax on the distributa | ble amount of any year | r in the base period? | , | es 🔽 No |
| | ot qualify under section 4940(e) Do | | | | |
| | nount in each column for each year, | | | | |
| (a) | (b) | (c) | | (d) | |
| Base period years Calendar year (or tax year beginning in) | Adjusted qualifying distributions | Net value of noncharitab | ole-use assets | Distribution rat (col (b) divided by c | |
| 2017 | 283,519 | | 5,751,710 | | 0 049293 |
| 2016 | 278,776 | | 5,610,309 | | 0 049690 |
| 2015 | 259,124 | | 5,604,793 | | 0 046233 |
| 2014 | 269,691 | | 5,898,220 | | 0 045724 |
| 2013 | 313,233 | | 5,894,255 | | 0 053142 |
| | d) | | ' ' ' | | 0 244082 |
| 3 Average distribution ratio | ofor the 5-year base period—divide idation has been in existence if less | the total on line 2 by 5 | | | 0 048816 |
| 4 Enter the net value of no | ncharitable-use assets for 2018 from | n Part X, line 5 | | | 5,564,827 |
| 5 Multiply line 4 by line 3 | | | 5 | | 271,653 |
| 6 Enter 1% of net investme | ent income (1% of Part I, line 27b) | | 6 | | 3,055 |
| | | | 7 | | 274,708 |
| | ons from Part XII, line 4 , | | | | 275,211 |
| | eater than line 7, check the box in Pa | | | g a 1% tax rate Se | |
| | | | | Fo | orm 990-PF (2018) |

Page **6**

| 5a | During the year did the foundation | n pav o | r incur any amount to | | | | | Yes | No |
|---|---|----------------------------------|--|--|--|--------------|----------------------------|----------|--------|
| (1) Carry on propaganda, or otherwise attempt to influei | | | • | ation (section 4945(e))? | ☐ Yes | | | | |
| | (2) Influence the outcome of any | specific | c public election (see secti | ion 4955), or to carry | ∟ Yes | ĭ Y N | ° | | |
| | on, directly or indirectly, any | oter re | egistration drive? | | · · □ v | | _ | | |
| | (3) Provide a grant to an individu | al for ti | ravel, study, or other sımı | lar purposes? | Yes | N N | ° | | |
| | (4) Provide a grant to an organiza | ation ot | her than a charitable, etc | , organization described | ⊔ Yes | IN IN | ° | | |
| | in section 4945(d)(4)(A)? See | ınstru | ctions | | · · 🔲 Yes | ✓ N | _ | | |
| | (5) Provide for any purpose other | than r | eligious, charitable, scient | ific, literary, or | ☐ fes | IN N | ° | | |
| | educational purposes, or for t | ne prev | ention of cruelty to childre | en or anımals? | · 🔲 Yes | ✓ N | _ | | |
| b | If any answer is "Yes" to 5a(1)-(5 |), did a | any of the transactions fai | I to qualify under the exc | ceptions described in | IN N | ° | | |
| | Regulations section 53 4945 or in | a curre | ent notice regarding disast | er assistance? See instru | ıctıons | | 5b | | |
| | Organizations relying on a current | notice | regarding disaster assista | ance check here | | П | | | |
| С | If the answer is "Yes" to question | 5a(4), | does the foundation claim | exemption from the | | ш | | | |
| | tax because it maintained expend | ture re | sponsibility for the grant? | | · · 🔲 Yes | □ N | | | |
| | If "Yes," attach the statement req | uired b | y Regulations section 53 4 | 1945-5(d) | ☐ fes | N | ° | | |
| 6a | Did the foundation, during the yea | ır, rece | ive any funds, directly or | indirectly, to pay premiu | ms on | | | | |
| | | - | | | | | | | |
| ь | Did the foundation, during the yea | ır, pay | premiums, directly or indi | rectly, on a personal ber | nefit contract? | | о _{6b} | | No |
| | If "Yes" to 6b, file Form 8870 | | | | | | | | |
| 7a | At any time during the tax year, v | as the | foundation a party to a pi | rohibited tax shelter tran | saction? | ✓ N | | | |
| Ь | If yes, did the foundation receive | any pro | oceeds or have any net inc | come attributable to the | | ₩ N | о _{7b} | | |
| 8 | Is the foundation subject to the se | | • | | | | | | |
| | excess parachute payment during | | | | | | | | |
| | | | ers, Directors, Trust | | | | _ | | |
| Pai | and Contractors | Onic | ers, Directors, Trust | ees, i oundation Ma | nagers, mgmy raid | Linp | noyees, | | |
| _ | | 6- | | d thair | Can impturetions | | | | |
| _1_ | List all officers, directors, trust | | (b) Title, and average | (c) Compensation (If | (d) Contributions to | | | | |
| | (a) Name and address | ' | hours per week | not paid, enter | employee benefit plans | | e) Exper other a | | |
| (a) Name and address | | | | | | | | | |
| | | | devoted to position | -0-) | deferred compensation | on | | nowani | |
| JEFFE | RY A HEAD | | devoted to position PRESIDENT/SECRETARY | -0-) | · · · · · · · · · · · · · · · · · · · | on 0 | other u | - Iowani | 0 |
| 107 S | T FRANCIS ST | VICE 1 00 | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | | other a | - IOWATE | |
| 107 S MOBI | T FRANCIS ST LE, AL 36602 | 1 00 | PRESIDENT/SECRETARY | 4,000 | | 0 | other a | nowani | 0 |
| 107 S MOBI WILLI | T FRANCIS ST LE, AL 36602 AM S MCFADDEN | 1 00 | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | | | other d | iiowanie | |
| 107 S MOBI WILLI 718 D | T FRANCIS ST LE, AL 36602 | 1 00 PRES | PRESIDENT/SECRETARY | 4,000 | | 0 | other a | iiowanie | 0 |
| 107 S MOBI WILLI 718 D MOBI | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD | 1 00 PRES 1 00 TREA | PRESIDENT/SECRETARY | 4,000 | | 0 | outer c | iiowanie | 0 |
| MOBI WILLI 718 C MOBI CARR PO BO | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM OX 160427 | PRES 1 00 | PRESIDENT/SECRETARY IDENT | 4,000 5,000 | | 0 | | iiowanie | 0 |
| 107 S MOBI WILLI 718 D MOBI CARR PO BO MOBI | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM DX 160427 LE, AL 36616 | PRES 1 00 TREA 1 00 | PRESIDENT/SECRETARY IDENT SURER | 4,000 5,000 4,000 | | 0 | | | 0 |
| MOBI WILLI 718 C MOBI CARR PO BO | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM DX 160427 LE, AL 36616 | PRES 1 00 TREA 1 00 | PRESIDENT/SECRETARY IDENT SURER | 4,000 5,000 4,000 | —see instructions). If | 0 0 0 | | | 0 |
| 107 S MOBI WILLI 718 C MOBI CARR PO BO MOBI 2 | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM DX 160427 LE, AL 36616 Compensation of five highest-p | 1 00 PRES 1 00 TREA 1 00 | PRESIDENT/SECRETARY IDENT SURER pployees (other than the (b) Title, and average | 4,000 5,000 4,000 ose included on line 1 | -see instructions). If | 0 0 0 | , enter " | NONE. | 0 0 |
| 107 S MOBI WILLI 718 C MOBI CARR PO BO MOBI 2 | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM DX 160427 LE, AL 36616 | 1 00 PRES 1 00 TREA 1 00 | PRESIDENT/SECRETARY IDENT SURER IDENT (b) Title, and average hours per week | 4,000 5,000 4,000 | —see instructions). If | 0 0 0 | | NONE. | 0 0 |
| MOBI WILLI 718 C MOBI CARR PO BO MOBI 2 (a) | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM OX 160427 LE, AL 36616 Compensation of five highest-p Name and address of each employed more than \$50,000 | 1 00 PRES 1 00 TREA 1 00 | PRESIDENT/SECRETARY IDENT SURER pployees (other than the (b) Title, and average | 4,000 5,000 4,000 ose included on line 1 | -see instructions). If (d) Contributions to employee benefit | 0 0 0 | , enter " e) Expens | NONE. | 0 0 |
| 107 S MOBI WILLI 718 C MOBI CARR PO BO MOBI 2 | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM OX 160427 LE, AL 36616 Compensation of five highest-p Name and address of each employed more than \$50,000 | 1 00 PRES 1 00 TREA 1 00 | PRESIDENT/SECRETARY IDENT SURER IDENT (b) Title, and average hours per week | 4,000 5,000 4,000 ose included on line 1 | -see instructions). If (d) Contributions to employee benefit plans and deferred | 0 0 0 | , enter " e) Expens | NONE. | 0 0 |
| MOBI WILLI 718 C MOBI CARR PO BO MOBI 2 (a) | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM OX 160427 LE, AL 36616 Compensation of five highest-p Name and address of each employed more than \$50,000 | 1 00 PRES 1 00 TREA 1 00 | PRESIDENT/SECRETARY IDENT SURER IDENT (b) Title, and average hours per week | 4,000 5,000 4,000 ose included on line 1 | -see instructions). If (d) Contributions to employee benefit plans and deferred | 0 0 0 | , enter " e) Expens | NONE. | 0 0 |
| MOBI WILLI 718 C MOBI CARR PO BO MOBI 2 (a) | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM OX 160427 LE, AL 36616 Compensation of five highest-p Name and address of each employed more than \$50,000 | 1 00 PRES 1 00 TREA 1 00 | PRESIDENT/SECRETARY IDENT SURER IDENT (b) Title, and average hours per week | 4,000 5,000 4,000 ose included on line 1 | -see instructions). If (d) Contributions to employee benefit plans and deferred | 0 0 0 | , enter " e) Expens | NONE. | 0 0 |
| MOBI WILLI 718 C MOBI CARR PO BO MOBI 2 (a) | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM OX 160427 LE, AL 36616 Compensation of five highest-p Name and address of each employed more than \$50,000 | 1 00 PRES 1 00 TREA 1 00 | PRESIDENT/SECRETARY IDENT SURER IDENT (b) Title, and average hours per week | 4,000 5,000 4,000 ose included on line 1 | -see instructions). If (d) Contributions to employee benefit plans and deferred | 0 0 0 | , enter " e) Expens | NONE. | 0 0 |
| MOBI WILLI 718 C MOBI CARR PO BO MOBI 2 (a) | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM OX 160427 LE, AL 36616 Compensation of five highest-p Name and address of each employed more than \$50,000 | 1 00 PRES 1 00 TREA 1 00 | PRESIDENT/SECRETARY IDENT SURER IDENT (b) Title, and average hours per week | 4,000 5,000 4,000 ose included on line 1 | -see instructions). If (d) Contributions to employee benefit plans and deferred | 0 0 0 | , enter " e) Expens | NONE. | 0 0 |
| MOBI WILLI 718 C MOBI CARR PO BO MOBI 2 (a) | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM OX 160427 LE, AL 36616 Compensation of five highest-p Name and address of each employed more than \$50,000 | 1 00 PRES 1 00 TREA 1 00 | PRESIDENT/SECRETARY IDENT SURER IDENT (b) Title, and average hours per week | 4,000 5,000 4,000 ose included on line 1 | -see instructions). If (d) Contributions to employee benefit plans and deferred | 0 0 0 | , enter " e) Expens | NONE. | 0 0 |
| MOBI WILLI 718 C MOBI CARR PO BO MOBI 2 (a) | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM OX 160427 LE, AL 36616 Compensation of five highest-p Name and address of each employed more than \$50,000 | 1 00 PRES 1 00 TREA 1 00 | PRESIDENT/SECRETARY IDENT SURER IDENT (b) Title, and average hours per week | 4,000 5,000 4,000 ose included on line 1 | -see instructions). If (d) Contributions to employee benefit plans and deferred | 0 0 0 | , enter " e) Expens | NONE. | 0 0 |
| MOBI WILLI 718 C MOBI CARR PO BO MOBI 2 (a) | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM OX 160427 LE, AL 36616 Compensation of five highest-p Name and address of each employed more than \$50,000 | 1 00 PRES 1 00 TREA 1 00 | PRESIDENT/SECRETARY IDENT SURER IDENT (b) Title, and average hours per week | 4,000 5,000 4,000 ose included on line 1 | -see instructions). If (d) Contributions to employee benefit plans and deferred | 0 0 0 | , enter " e) Expens | NONE. | 0 0 |
| MOBI WILLI 718 C MOBI CARR PO BO MOBI 2 (a) | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM OX 160427 LE, AL 36616 Compensation of five highest-p Name and address of each employed more than \$50,000 | 1 00 PRES 1 00 TREA 1 00 | PRESIDENT/SECRETARY IDENT SURER IDENT (b) Title, and average hours per week | 4,000 5,000 4,000 ose included on line 1 | -see instructions). If (d) Contributions to employee benefit plans and deferred | 0 0 0 | , enter " e) Expens | NONE. | 0 0 |
| MOBI WILLI 718 C MOBI CARR PO BO MOBI 2 (a) | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM OX 160427 LE, AL 36616 Compensation of five highest-p Name and address of each employed more than \$50,000 | 1 00 PRES 1 00 TREA 1 00 | PRESIDENT/SECRETARY IDENT SURER IDENT (b) Title, and average hours per week | 4,000 5,000 4,000 ose included on line 1 | -see instructions). If (d) Contributions to employee benefit plans and deferred | 0 0 0 | , enter " e) Expens | NONE. | 0 0 |
| 107 S MOBI WILLI 718 C MOBI 718 C MOBI 2 (a) | T FRANCIS ST LE, AL 36602 AM S MCFADDEN OWNTOWNER BLVD LE, AL 36609 IE ODOM OX 160427 LE, AL 36616 Compensation of five highest-p Name and address of each employed more than \$50,000 | 1 00 PRES 1 00 TREA 1 00 Paid en | IDENT SURER Inployees (other than the hours per week devoted to position | 4,000 5,000 4,000 cose included on line 1 (c) Compensation | -see instructions). If (d) Contributions to employee benefit plans and deferred | 0 0 0 | , enter " e) Expens | NONE. | 0 0 |

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

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

Amounts set aside for specific charitable projects that satisfy the

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

3

4

5

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

2

3a 3h

4

5

275.211

3.055

272.156

Form 990-PF (2018)

Page 9

275,186

275,186

Form 990-PF (2018)

0

| Form | 990-PF | (20: |
|------|---------|------|
| Pa | rt XIII | 3 |

| 0-PF | (20 | 01 | 8 |) | |
|------|-----|----|---|---|---|
| V-11 | ı | | | | _ |

b Total for prior years

a From 2013.

e From 2017.

b From 2014. . . . c From 2015. . . **d** From 2016. . . .

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

a Enter amount for 2017 only.

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e.

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

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2018

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

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

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2019.

10 Analysis of line 9 a Excess from 2014. . **b** Excess from 2015. . c Excess from 2016. . . .

d Excess from 2017. . . e Excess from 2018. .

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

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2013 not

indicated below:

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

1 Distributable amount for 2018 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2018

8.617

1.365 3,825

1.365 3.825

Corpus

13.807

25 0

13,832

8.617

5,215

(b)

Years prior to 2017

(c)

2017

(a)



| Enter gross amounts unless otherwise indicated | | Unrelated bu | siness income | Excluded by section | 512, 513, or 514 | Related or exemp | | |
|--|---|----------------------|----------------------|-----------------------|------------------|--|--|--|
| Program service revenue a | | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function income (See instructions) | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | and contracts from government agencies | | | | | | | |
| | ership dues and assessments | | | | | | | |
| 3 Interes | st on savings and temporary cash nents | | | 14 | 3,080 | | | |
| | nds and interest from securities | | | 14 | 120,710 | | | |
| | ntal income or (loss) from real estate | | | | | | | |
| | -financed property | | | | | | | |
| | lebt-financed property | | | | | | | |
| | ntal income or (loss) from personal property nvestment income. | | | 18 | 50,222 | | | |
| | r (loss) from sales of assets other than | | | 18 | 50,222 | | | |
| invento | • • | | | 18 | 153,303 | | | |
| 9 Net inc | come or (loss) from special events | | | 10 | 133,303 | | | |
| | profit or (loss) from sales of inventory | | | | | | | |
| 1 Other | revenue a | | | | | | | |
| b | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | al Add columns (b), (d), and (e). | | 0 | | 327,315 | | | |
| | Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | | | 13 | 3 | 327,315 | | |
| | | | | | | | | |
| Part XV | I-B Relationship of Activities to th | ne Accomplish | ment of Exem | pt Purposes | | | | |
| | Explain below how each activities to the the accomplishment of the foundation's explaintstructions) | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |
| Line No. | Explain below how each activity for which the accomplishment of the foundation's explain the second | ne Accomplish | ed in column (e) of | Part XVI-A contribu | | | | |

| (| / |
|------|--|
| XVII | Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations |

| Part | XVII | Exempt Organi | | ransters To a | and Transaction | ons and Relatio | nships With Nonchar | itable | | |
|----------------|---------|--|-----------------|--------------------|---------------------|--------------------|--|----------------|----------|----------|
| | | | directly enga | | | | on described in section 501 ns? | | Yes | No |
| a Tra | nsfers | from the reporting foun | dation to a n | oncharitable exe | empt organization | n of | | | | |
| (1) | Cash | | | | | | | 1a(1) | | No |
| (2) | Othe | rassets | | | | | | 1a(2) | | No |
| | | nsactions | | | | | | | | |
| | | s of assets to a nonchar | • | - | | | | 1b(1) | | No |
| | | hases of assets from a r | | | | | | 1b(2) | | No |
| | | al of facilities, equipmen | • | | | | | 1b(3) | | No |
| | | ibursement arrangemen s or loan guarantees. | | | | | | 1b(4) 1b(5) | | No No |
| | | rmance of services or m | | | | | | 1b(5) | | No |
| ٠. | | f facilities, equipment, r | • | _ | | | | 1c | | No |
| | - | | | • | | | ways show the fair market | | | |
| | | | | | | | ed less than fair market va ets, or services received | ue | | |
| (a) Line | No | (b) Amount involved | (c) Name of | noncharitable exer | mpt organization | (d) Description of | transfers, transactions, and st | arıng arra | ngemen | its |
| | | | | | | | | | | |
| | + | | | | | | | | | |
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| | _ | | | | | | | | | |
| | | | | | | | | | | |
| 2a Is t | he fou | ndation directly or indire | ectly affiliate | d with, or related | d to, one or more | tax-exempt organ | ızatıons | | | |
| des | cribed | in section 501(c) (other | r than section | n 501(c)(3)) or ı | n section 527? . | | 🗆 Yes | ✓ No | | |
| b If " | Yes," c | complete the following s | chedule | | | | | | | |
| | | (a) Name of organization | on | (E |) Type of organizat | ion | (c) Description of rela | ionship | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | of n | ny knowledge and belief | , it is true, c | | | | ing schedules and stateme than taxpayer) is based o | | | |
| Sign | ****** | ch preparer has any kno | meage | | 2010 11 27 | and an an an an an | Mav | | scuss th | าเร |
| Here | | ***** | | | 2019-11-07 | reti | | | rer shov | |
| | 7 | Signature of officer or t | rustee | | Date | Title | | w instr)? | | |
| | | Print/Type preparer's | name | Preparer's Sign | nature | Date | PTIN | | | |
| | | | | | | | Check if self- | P0126 | 9673 | |
| D-!-I | | CLIFTON T JACKSO | ON | | | 2019-11-07 | employed ▶ ☐ | | | |
| Paid | | | | | | | | | | |
| Prep Use | | I I I I I I I I I I I I I I I I I I I | TH DUKES & | BUCKALEW LLP | | | Firm's | EIN ►63 | -01916 | 30 |
| | | | 300 AIRPORT | BLVD | | | | | | |
| | | М | OBILE, AL 30 | 56081667 | | | Phone | no (251 |) 343-: | 1200 |

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

recipient

230,000

any foundation manager

Name and address (home or business)

166

Total .

TUSCALOOSA, AL 35487

| | or substantial contributor | | | |
|---|----------------------------|-----------|-------------------|-------|
| a Paid during the year | | | | |
| ALABAMA CONTEMPORARY ART CENTER 301 CONTI ST MOBILE, AL 36602 | | 501(C)(3) | EDUCATION | 2,500 |
| ALABAMA FREE CLINICPO BOX 1284 BAY MINETTE, AL 36507 | | 501(C)(3) | COMMUNITY WELFARE | 5,000 |
| ALABAMA PUBLIC RADIO BOX 870370 REESE PHIFER HALL SUITE | | 501(C)(3) | EDUCATION | 5,000 |

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

| a Paid during the year | | | |
|--|-----------|-----------|-------|
| ALABAMA PUBLIC TELEVISION 2112 11TH AVE STE 400 BIRMINGHAM, AL 35205 | 501(C)(3) | EDUCATION | 5,000 |
| ALABAMA WRITERS FORUM | 501(C)(3) | OPERATING | 5,000 |

| ALABAMA WRITERS FORUM PO BOX 4777 MONTGOMERY, AL 36103 | 501(C)(3) | OPERATING | |
|--|-----------|-------------------|--|
| BALDWIN COUNTY CHILD ADVOCACY CENTER | 501(C)(3) | COMMUNITY WELFARE | |

| MONTGOMERY, AL 36103 | | | |
|---|-----------|-------------------|-------|
| BALDWIN COUNTY CHILD ADVOCACY CENTER 16397 COUNTY ROAD 73 SUMMERDALE, AL 36580 | 501(C)(3) | COMMUNITY WELFARE | 5,000 |

| BALDWIN COUNTY CHILD ADVOCACY CENTER 16397 COUNTY ROAD 73 501(C)(3) COMMUNITY WELFARE 5,000 | Total | | ▶ 3a | 230.000 |
|--|--------|-----------|-------------------|---------|
| | CENTER | 501(C)(3) | COMMUNITY WELFARE | 5,000 |

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

any foundation manager

Name and address (home or business)

Total .

| , , | or substantial contributor | | | |
|--|----------------------------|-----------|-------------------|-------|
| a Paid during the year | | | | |
| BAYSHORE CHRISTIAN SCHOOL 23050 US-98 FAIRHOPE, AL 36532 | | 501(C)(3) | EDUCATION | 7,500 |
| BIG BROTHERS BIG SISTERS OF SOUTH | | 501(C)(3) | COMMUNITY WELFARE | 5,000 |

recipient

| FAIRHOPE, AL 36532 | | | |
|---|-----------|-------------------|-------|
| BIG BROTHERS BIG SISTERS OF SOUTH AL(YMCA) 9 DAUPHIN ST STE 101 | 501(C)(3) | COMMUNITY WELFARE | 5,000 |

| 1 | | ===(=)(=) | | |
|---|--|-----------|-------------------|------|
| | 9 DAUPHIN ST STE 101 MOBILE, AL 36602 | | | |
| | AL(YMCA) | 501(C)(3) | COMMONITY WELFARE | 5,00 |

| AL(YMCA) 9 DAUPHIN ST STE 101 MOBILE, AL 36602 | | |
|--|--|--|
| | | |

| MOBILE, AL 36602 | | | |
|--|-----------|-------------------|-------|
| CAMP RAP-A-HOPE2701 AIRPORT BLVD MOBILE, AL 36606 | 501(C)(3) | COMMUNITY WELFARE | 5,000 |

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

any foundation manager

Name and address (home or husiness)

MOBILE, AL 36660

| Name and address (nome or business) | or substantial contributor | | | |
|--|----------------------------|-----------|-------------------|-------|
| a Paid during the year | | | | |
| CHILD ADVOCACY CENTER 1351 SPRINGHILL AVENUE MOBILE, AL 36604 | | 501(C)(3) | COMMUNITY WELFARE | 5,000 |
| COMMUNITY SERVICES FOR THE VISION IMPAIRED 328 DAUPHIN STREET C129 MOBILE, AL 36606 | | 501(C)(3) | COMMUNITY WELFARE | 5,000 |
| COMPASSIONATE FRIENDSPO BOX 6507 | | 501(C)(3) | COMMUNITY WELFARE | 2,500 |

recipient

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

recipient

501(C)(3)

COMMUNITY WELFARE

5.000

230,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

or substantial contributor

Name and address (home or business)

DUMAS WESLEY CENTER126 MOBILE ST

MOBILE, AL 36616

MOBILE, AL 36607

| a Paid during the year | | | |
|--|-----------|-------------------|-------|
| DAUPHIN WAY UMC1507 DAUPHIN ST MOBILE, AL 36604 | 501(C)(3) | OPERATING | 2,000 |
| DOG RIVER CLEARWATER REVIVAL PO BOX 161523 | 501(C)(3) | COMMUNITY WELFARE | 2,500 |

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

any foundation manager

Name and address (home or business)

MOBILE, AL 36633 Total .

| · | or substantial contributor | | | |
|--|----------------------------|-----------|-------------------|-------|
| a Paid during the year | | | | |
| FEEDING THE GULF COAST 5248 MOBILE STREET S THEODORE, AL 36582 | | 501(C)(3) | COMMUNITY WELFARE | 5,000 |
| FRANKLIN PRIMARY HEALTH CENTER INC 1303 DR MARTIN LUTHER KING JR AVE | | 501(C)(3) | COMMUNITY WELFARE | 5,000 |

recipient

| FRANKLIN PRIMARY HEALTH CENTER INC 1303 DR MARTIN LUTHER KING JR AVE MOBILE, AL 36603 | 501(C)(3) | COMMUNITY WELFARE | 5,000 |
|--|-----------|-------------------|-------|
| FUSE PROJECTPO BOX 1134 | 501(C)(3) | HUMAN SERVICES | 2,500 |

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

recipient

230,000

any foundation manager

Name and address (home or business)

MOBILE, AL 36608

| Hame and address (nome or business) | or substantial contributor | | | |
|--|----------------------------|-----------|-------------------|-------|
| a Paid during the year | | | | |
| GIRLS ON THE RUN INTERNATIONAL 266 S MCGREGOR AVE STE 101 MOBILE, AL 36608 | | 501(C)(3) | OPERATING | 2,500 |
| GRACE DREAM CENTER 160 STONE PARK BLVD APT 2205 PIKE ROAD, AL 36064 | | 501(C)(3) | OPERATING | 2,500 |
| HABITAT FOR HUMANITY 3712 AIRPORT BLVD | | 501(C)(3) | COMMUNITY WELFARE | 5,000 |

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

| a Paid during the year | | | |
|--|-----------|-------------------|-------|
| HOME OF GRACE394 ALDOCK RD EIGHT MILE, AL 36613 | 501(C)(3) | COMMUNITY WELFARE | 5,000 |

| ITT PILE, AL 30013 | | |
|---|-----------|-------------------|
| HT HOUSE23306 CHICAGO STREET BERTSDALE, AL 36567 | 501(C)(3) | COMMUNITY WELFARE |

or substantial contributor

Total .

| LIGHT HOUSE23306 CHICAGO STREET ROBERTSDALE, AL 36567 | 501(C)(3) | COMMUNITY WELFARE | 2,000 |
|--|-----------|-------------------|-------|
| | l . | l . | 1 |

| ROBERTSDALE, AL 36567 | | | |
|---------------------------------|-----------|-------------------|-------|
| LIGHT OF THE VILLAGEPO BOX 1641 | 501(C)(3) | COMMUNITY WELFARE | 5,000 |
| DAY MINETTE AL OCEON | ı | I | i |

| LIGHT OF THE VILLAGEPO BOX 1641 | 501(C)(3) | COMMUNITY WELFARE | 5,000 |
|---------------------------------|-----------|-------------------|-------|
| BAY MINETTE, AL 36507 | | | |

| | | 000 | -,- |
|-----------------------|---|---------|-----|
| BAY MINETTE, AL 36507 | | | |
| • | • | | |

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

or substantial contributor

Total .

| a Paid during the year | | | |
|--|-----------|-------------------|-------|
| MCKEMIE PLACEPO BOX 9082 MOBILE, AL 36671 | 501(C)(3) | COMMUNITY WELFARE | 5,000 |
| | | | |

| MOBILE DELTA DOGS 3625 SPRINGHILL MEMORIAL DR S MOBILE, AL 36608 | 501(C)(3) | COMMUNITY WELFARE | 5,000 |
|--|-----------|-------------------|-------|
| MOBILE MUSEUM OF ART | 501(C)(3) | COMMUNITY WELFARE | 2,500 |

| MOBILE, AL 36608 | | | |
|---|-----------|-------------------|-------|
| MOBILE MUSEUM OF ART 4850 MUSEUM DRIVE MOBILE, AL 36608 | 501(C)(3) | COMMUNITY WELFARE | 2,500 |
| | | | |

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

| a Paid during the year | | | |
|--|-----------|-------------------|-------|
| MOBILE OPERA257 DAUPHIN STREET MOBILE, AL 36602 | 501(C)(3) | EDUCATION | 2,500 |
| MOBILE PUBLIC LIBRARY | 501(C)(3) | COMMUNITY WELFARE | 5,000 |

| MORILE RESCUE MISSION | E01/C)/2) | COMMUNITY WELFARE |
|--|-----------|-------------------|
| MOBILE PUBLIC LIBRARY 701 GOVERNMENT ST MOBILE, AL 36602 | 501(C)(3) | COMMUNITY WELFARE |

or substantial contributor

Total .

| MOBILE, AL 36602 | | | |
|---|-----------|-------------------|----|
| MOBILE RESCUE MISSION 279 N WASHINGTON AVE | 501(C)(3) | COMMUNITY WELFARE | 2, |
| MODILE AL 26602 | | | 1 |

| MOBILE, AL 30002 | | | |
|---|-----------|-------------------|----|
| MOBILE RESCUE MISSION 279 N WASHINGTON AVE MOBILE, AL 36603 | 501(C)(3) | COMMUNITY WELFARE | 2, |

| MOBILE RESCUE MISSION | 501(C)(3) | COMMUNITY WELFARE | 2,500 |
|-----------------------|-----------|-------------------|-------|
| 279 N WASHINGTON AVE | | | |
| MOBILE, AL 36603 | | | |

230,000

▶ 3a

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

| (| or substantial contributor | | | |
|------------------------|----------------------------|-----------|-------------------|-------|
| a Paid during the year | | | | |
| MOBILE SYMPHONY | | 501(C)(3) | COMMUNITY WELFARE | 2,500 |

| MOBILE, AL 36602 | | | |
|---|-----------|-------------------|-------|
| MULHERIN CUSTODIAL HOME 2496 HALLS MILL ROAD | 501(C)(3) | COMMUNITY WELFARE | 5,000 |

| · | | | |
|---|-----------|-------------------|--|
| MULHERIN CUSTODIAL HOME 2496 HALLS MILL ROAD MOBILE, AL 36606 | 501(C)(3) | COMMUNITY WELFARE | |
| PENELOPE HOUSE FAMILY VIOLENCE | 501(C)(3) | COMMUNITY WELFARE | |

| 2496 HALLS MILL ROAD MOBILE, AL 36606 | | | |
|---|-----------|-------------------|------|
| PENELOPE HOUSE FAMILY VIOLENCE CENTER PO BOX 9127 | 501(C)(3) | COMMUNITY WELFARE | 5,00 |

| MOBILE, AL 36606 | | | |
|--|-----------|-------------------|-----|
| PENELOPE HOUSE FAMILY VIOLENCE CENTER PO BOX 9127 MOBILE AL 36691 | 501(C)(3) | COMMUNITY WELFARE | 5,0 |

| | | 1 | · |
|---|-----------|-------------------|---------|
| PENELOPE HOUSE FAMILY VIOLENCE CENTER PO BOX 9127 MOBILE, AL 36691 | 501(C)(3) | COMMUNITY WELFARE | 5,000 |
| Total | | ▶ 3a | 230,000 |

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

any foundation manager

or substantial contributor.

Name and address (home or business)

PO BOX 850429 MOBILE, AL 36685 Total .

| | or substantial contributor | | | |
|---|----------------------------|-----------|-------------------|-------|
| a Paid during the year | | | | |
| PRICHARD PREPARATORY SCHOOL 743 MOUNT SINAI AVENUE WHISTLER, AL 36612 | | 501(C)(3) | EDUCATION | 2,500 |
| PRODISEE PANTRY 6530 SPANISH FORT BLVD SPANISH FORT, AL 36527 | | 501(C)(3) | COMMUNITY WELFARE | 5,000 |
| | | | | |

recipient

▶ 3a

| PRODISEE PANTRY 6530 SPANISH FORT BLVD SPANISH FORT, AL 36527 | 501(C)(3) | COMMUNITY WELFARE | 5,000 |
|---|-----------|-------------------|-------|
| PROVIDENCE FOUNDATION | 501(C)(3) | COMMUNITY WELFARE | 5,000 |

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

recipient

any foundation manager

or substantial contributor

Name and address (home or business)

| a Paid during the year | | | |
|--|-----------|-------------------|-------|
| RONALD MCDONALD HOUSE 1626 SPRINGHILL AVENUE MORILE AL 36604 | 501(C)(3) | COMMUNITY WELFARE | 2,500 |

| · | | | |
|---|-----------|-------------------|-------|
| SAVE A STRAY3488 SPRINGHILL AVE MOBILE, AL 36608 | 501(C)(3) | COMMUNITY WELFARE | 5,000 |
| SOUTHEASTERN DIABETES EDUCATION SERVICES(CAMP SEALE HARRIS) | 501(C)(3) | EDUCATION | 5,000 |

| MOBILE, AL 36608 | (-)(-) | | 2,333 |
|--|-----------|-----------|-------|
| SOUTHEASTERN DIABETES EDUCATION SERVICES(CAMP SEALE HARRIS) 500 CHASE PARK SOUTH SUITE 104 HOOVER, AL 35244 | 501(C)(3) | EDUCATION | 5,000 |

| SOUTHEASTERN DIABETES EDUCATION SERVICES(CAMP SEALE HARRIS) 500 CHASE PARK SOUTH SUITE 104 HOOVER, AL 35244 | 501(C)(3) | EDUCATION | 5,000 |
|--|-----------|-----------|---------|
| Total | | ▶ 3a | 230,000 |

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

or substantial contributor

| a Paid during the year | | | |
|--|-----------|-----------|-------|
| ST IGNATIUS CATHOLIC SCHOOL 3650 SPRINGHILL AVE MOBILE. AL 36608 | 501(C)(3) | EDUCATION | 7,500 |

| MOBILE, AL 36608 | | | |
|---|-----------|-------------------|--------|
| ST MARY'S HOME4350 MOFFETT ROAD MOBILE, AL 36618 | 501(C)(3) | COMMUNITY WELFARE | 15,000 |
| ST PAUL'S EPISCOPAL SCHOOL | 501(C)(3) | EDUCATION | 7.500 |

| ST PAUL'S EPISCOPAL SCHOOL 161 DOGWOOD LN MOBILE, AL 36608 501 | 01(C)(3) | EDUCATION | 7,500 |
|--|----------|-----------|-------|

| ST PAUL'S EPISCOPAL SCHOOL 161 DOGWOOD LN MOBILE, AL 36608 | 501(C)(3) | EDUCATION | 7,50 |
|--|-----------|-----------|---------|
| Total | | ▶ 3a | 230,000 |

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

or substantial contributor

| | | | i . |
|----------------------------------|-----------|-----------|-----|
| a Paid during the year | | | |
| THE LEARNING TREE101 S DUBOIS ST | 501(C)(3) | EDUCATION | |

| TALLAHASSEE, AL 36078 | | | |
|--|-----------|-------------------|-------|
| THE NATURE CONSERVANCY 2100 1ST AVE N BIRMINGHAM, AL 35203 | 501(C)(3) | COMMUNITY WELFARE | 2,500 |

| 2100 1ST AVE N BIRMINGHAM, AL 35203 | 301(0)(3) | COMMONITY WELLAKE | 2,300 |
|---|-----------|-------------------|--------|
| THE SALVATION ARMY 1009 DAUPHIN STREET | 501(C)(3) | COMMUNITY WELFARE | 15,000 |

| BIRMINGHAM, AL 33203 | | | |
|---|-----------|-------------------|--------|
| THE SALVATION ARMY 1009 DAUPHIN STREET MOBILE, AL 36606 | 501(C)(3) | COMMUNITY WELFARE | 15,000 |

| THE SALVATION ARMY 1009 DAUPHIN STREET MOBILE, AL 36606 | 501(C)(3) | COMMUNITY WELFARE | 15,000 |
|---|-----------|-------------------|---------|
| Total | | ▶ 3a | 230,000 |

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

or substantial contributor

| a Paid during the year | | | |
|--------------------------------|-----------|-------------------|-------|
| THE SHOULDER31214 COLEMAN LANE | 501(C)(3) | COMMUNITY WELFARE | 2,000 |

| SPANISH FORT, AL 36527 | | | |
|---|-----------|----------------|--|
| UNDER HIS WINGSPO BOX 91 ROBERTSDALE, AL 36567 | 501(C)(3) | HUMAN SERVICES | |

| UNDER HIS WINGSPO BOX 91 ROBERTSDALE, AL 36567 | 501(C)(3) | HUMAN SERVICES | 2,000 |
|---|-----------|-------------------|-------|
| VETERANS RECOVERY RESOURCES | 501(C)(3) | COMMUNITY WELFARE | 5,000 |

| ı | RUBERTSDALE, AL 30307 | | | |
|---|---|-----------|-------------------|-------|
| | VETERANS RECOVERY RESOURCES PO BOX 41241 MOBILE, AL 36640 | 501(C)(3) | COMMUNITY WELFARE | 5,000 |

| VETERANS RECOVERY RESOURCES PO BOX 41241 MOBILE, AL 36640 | 501(C)(3) | COMMUNITY WELFARE | 5,000 |
|---|-----------|-------------------|---------|
| Total | | ▶ 3a | 230,000 |

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

recipient

230,000

any foundation manager

or substantial contributor

Name and address (home or business)

| a Paid during the year | | | |
|--|-----------|-------------------|-------|
| VICTORY HEALTH PARTNERS 3750 PROFESSIONAL PARKWAY | 501(C)(3) | COMMUNITY WELFARE | 5,000 |

| | | | i |
|-----------------------------|-----------|-----------|---|
| VILMER HALL CHILDREN'S HOME | 501(C)(3) | EDUCATION | |
| 8811 OLD SHELL ROAD | | | |
| 10BILE, AL 36608 | | | |

| WILMER HALL CHILDREN'S HOME | 501(C)(3) | EDUCATION | 5,000 |
|-----------------------------|-----------|-----------|-------|
| 3811 OLD SHELL ROAD | | | |
| MOBILE, AL 36608 | | | |
| | | | |

| efile GRAPHIC print - DO NOT | PROCESS | As Filed Da | ata - | | D | LN: 93491319023619 |
|------------------------------|---------|-------------|------------------------|-------|------------------------|---|
| TY 2018 Accounting F | ees Sch | edule | | | | |
| | | | | | | |
| | Name: | CD HELE | N AND JEFF GI | AZE | | |
| FOUNDATION | | | | | | |
| | EIN: | 63-61743 | 358 | | | |
| Category | Am | ount | Net Investme Income | ent | Adjusted Net Income | Disbursements for Charitable Purposes |
| ACCOUNTING FEES | | 4,675 | | 1,169 | | 3,506 |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491319023619 |
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| | | <u> </u> |

TY 2018 Investments Corporate Bonds Schedule

Name: CD HELEN AND JEFF GLAZE

FOUNDATION

| TOUNDATION | | |
|---|---------------------------|----------------------------------|
| EIN: 63-6174358 | | |
| Investments Corporate Bonds Schedule | | |
| Name of Bond | End of Year Book Value | End of Year Fair Market Value |
| 74432QBP9 PRUDENTIAL FINANCIAL | 28,951 | 29,886 |
| 00914AAB8 AIR LEASE CORP 3.75% 6/1/26 | 30,896 | 31,756 |
| 0258M0DX4 AMERICAN EXPRESS CREDIT CORP 2.6% 9/14/20 | 29,651 | 30,105 |
| 02665WCD1 AMERICAN HONDA FINANCE CORP 2.65% 2/12/21 | 29,720 | 30,183 |
| 031162CH1 AMGEN INC 2.25% 8/19/23 | 30,041 | 31,887 |
| 037833CQ1 APPLE INC 2.3% 5/11/22 | 29,177 | 30,206 |
| 06051GHT9 BANK OF AMERICA CORP VARIABLE 3.559% 4/23/27 | 30,000 | 31,318 |
| 06406RAH0 BANK OF NEW YORK MELLON CORP 3.85% 4/28/28 | 30,456 | 32,639 |
| 09062XAC7 BIOGEN INC. 2.9% 9/15/20 | 29,911 | 30,151 |
| 097023AZ8 BOEING CO 4.875% 2/15/20 | 29,600 | 29,430 |
| 10373QAB6 BP CAPITAL MARKETS AMERICA INC. 3.796\$ 9/21/25 | 30,017 | 32,040 |
| 14040HBP9 CAPITAL ONE FINANCIAL CORP 2.5% 5/12/20 | 29,599 | 30,031 |
| 172967KB6 CITIGROUP INC 2.65% 10/26/20 | 29,572 | 30,099 |
| 126408HJ5 CSX CORP 3.8% 3/1/28 | 30,486 | 33,327 |
| 26441CAW5 DUKE ENERGY CORP 2.4% 8/15/22 | 29,846 | 31,003 |
| 26078JAB6 DUPONT DE NEMOURS IN 4.205% 11/15/23 | 30,005 | 32,118 |
| 316773CP3 FIFTH THIRD BANCORP 4.3% 1/16/24 | 29,452 | 30,969 |
| 36962G5J9 GENERAL ELECTRIC CO 4.65% 10/17/21 | 29,904 | 30,215 |
| 375558BF9 GILEAD SCIENCES IN 3.65% 3/1/26 | 30,749 | 32,728 |
| 38141GWM2 GOLDMAN SACHS GROUP INC 2.905% 7/24/2023 | 29,948 | 31,300 |

Investments Corporate Bonds Schedule

| Name of Bond | End of Year Book Value | End of Year Fair Market Value |
|--|---------------------------|----------------------------------|
| 404280CC1 HSBC HOLDINGS PLC VARIABLE 3.973% 5/22/30 | 30,098 | 31,337 |
| 458140AJ9 INTEL CORP 3.3% 10/1/21 | 30,287 | 30,842 |
| 459200JG7 INTERNATIONAL BUSINESS MACHINES CORP 3.45% 2/19/26 | 30,729 | 32,398 |
| 832696AR9 JM SMUCKER CO 3.375 12/15/27 | 29,789 | 32,703 |
| 501044DE8 KROGER 2.65% 10/15/26 | 30,407 | 32,759 |
| 539830BE8 LOCKHEED MARTIN 2.9% 3/1/25 | 29,590 | 31,899 |
| 589331T4 MERCK & CO INC 2.4% 9/15/22 | 30,127 | 31,322 |
| 594918BW3 MICROSOFT CORP 2.4% 2/6/22 | 29,394 | 30,315 |
| 60871RAC4 MOLSON COORS BREWING CO 3.5% 5/1/22 | 29,965 | 30,799 |
| 61744YAH1 MORGAN STANLEY 2.75% 5/19/22 | 29,137 | 30,321 |
| 68389XBR5 ORACLE CORP 2.625% 2/15/23 | 30,118 | 31,434 |
| 713448CG1 PEPSICO INC 2.75% 3/1/23 | 29,434 | 30,644 |
| 74834LAZ3 QUEST DIAGNOSTICS INC 3.45% 6/1/26 | 29,656 | 31,761 |
| 867914BK8 SUNTRUST BANKS INC 2.9% 3/3/21 | 29,674 | 30,270 |
| 87236YAH1 TD AMERITRADE HOLDING CORP 3.75% 4/1/24 | 29,932 | 31,692 |
| 808513AW5 THE CHARLES SCHWAB CORPORATION 3.25% 5/21/21 | 29,094 | 29,561 |
| 89233P5F9 TOYOTA MOTOR CREDIT CORP 3.4% 9/15/21 | 29,254 | 29,728 |
| 91324PCY6 UNITEDHEALTH GROUP INC 3.375% 4/15/27 | 30,175 | 32,318 |
| 913017BVO UNITED TECHNOLOGIES ORP 3.1% 6/1/22 | 29,681 | 30,690 |
| 91913YAU4 VALERO ENERGY CORP 3.4% 9/15/26 | 30,572 | 32,631 |

Investments Corporate Bonds Schedule

| Name of Bond | End of Year Book Value | End of Year Fair Market Value |
|--|---------------------------|----------------------------------|
| 92343VDD3 VERIZON COMMUNICATIONS INC 2.625% 8/15/26 | 29,784 | 32,786 |
| 931427AH1 WALGREENS BOOTS ALLIANCE INC 3.8% 11/18/24 | 29,498 | 31,163 |
| 931142ED1 WALMART INC 3.55% 6/26/25 | 30,259 | 32,055 |
| 949746SH5 WELLS FARGO & CO 3% 10/23/26 | 29,723 | 32,330 |
| 85771PAN2 EQUINOR ASA 3.7% 3/1/24 | 29,308 | 30,852 |
| 539439AR0 LLOYDS BANKING GROUP PL 4.375% 3/22/28 | 30,766 | 32,936 |
| 78012KKU0 ROYAL BANK OF CANADA 2.5% 1/19/21 | 29,557 | 30,126 |
| 961214DW0 WESTPAC BANKING CORP 3.4% 1/25/28 | 29,780 | 32,739 |

DLN: 93491319023619

TY 2018 Investments Corporate Stock Schedule

Name: CD HELEN AND JEFF GLAZE

FOUNDATION

EIN: 63-6174358

| Investments Corporation Stock Schedule | | |
|---|---------------------------|----------------------------------|
| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
| 713448108 PEPSICO INC | 20,828 | 35,536 |
| 30231G102 EXXON MOBIL CORP | 24,519 | 26,132 |
| 46625H100 JP MORGAN CHASE & CO | 19,372 | 43,156 |
| 744320102 PRUDENTIAL FINANCIAL INC | 5,861 | 11,818 |
| 863667101 STRYKER CORP | 6,985 | 21,381 |
| 883556102 THERMO FISHER SCIENTIFIC INC | 9,451 | 30,837 |
| 913017109 UNITED TECHNOLOGIES CORP | 14,655 | 26,691 |
| 17275R102 CISCO SYSTEMS INC | 18,560 | 33,768 |
| 92343V104 VERIZON COMMUNICATIONS | 16,484 | 26,394 |
| 09247X101 BLACKROCK INC | 12,588 | 22,057 |
| 58933Y105 MERCK & CO. INC. NEW | 17,000 | 30,354 |
| 172967424 CITIGROUP, INC. | 11,772 | 15,126 |
| 438516106 HONEYWELL INTERNATIONAL, INC. | 12,294 | 30,029 |
| 037833100 APPLE, INC. | 27,549 | 58,188 |
| 008882771 INVESCO INTERNATIONAL GROWTH | 212,740 | 213,794 |
| 339128100 JP MORGAN MID CAP VALUE | 105,126 | 141,397 |
| 461202103 INTUIT INC | 4,542 | 13,850 |
| 278865100 ECOLAB INC | 7,002 | 13,228 |
| N53745100 LYONDELLBASELL INDUSTRIES- CL A | 11,381 | 11,714 |
| 867914103 SUNTRUST BKS INC | 14,817 | 22,563 |
| 192446102 COGNIZANT TECHNOLOGY SOLUTIONS CL A | 7,933 | 11,220 |
| 04314H600 ARTISAN MID CAP FD | 160,867 | 142,819 |
| 0206R102 AT&T INC | 30,247 | 30,327 |
| 65339F101 NEXTERA ENERGY INC | 5,066 | 19,871 |
| 437076102 HOME DEPOT INC. | 20,137 | 29,532 |
| 580135101 MCDONALDS CORP | 15,273 | 26,996 |
| 166764100 CHEVRON CORP | 23,008 | 27,626 |
| H1467J104 CHUBB LIMITED | 22,061 | 28,132 |
| 717081103 PFIZER INC | 20,921 | 25,472 |
| G29183103 EATON CORP PLC | 20,909 | 27,649 |

| Name of Stock | End of Year Book Value | End of Year Fair Market Value |
|--|---------------------------|----------------------------------|
| 02079K107 ALPHABET INC CL C | 19,679 | 24,861 |
| 02079K305 ALPHABET INC CL A | 13,614 | 24,904 |
| 062828M876 BARON EMERGING MARKETS | 298,881 | 296,453 |
| 023135106 AMAZON.COM INC | 28,057 | 56,809 |
| 256677105 DOLLAR GENERAL CORP | 10,660 | 15,408 |
| 532457108 ELI LILLY & CO | 19,316 | 28,141 |
| 445658107 JB HUNT TRANSPORTATION SERVICES | 30,492 | 28,154 |
| 697435105 PALO ALTO NETWORKS INC | 9,825 | 13,856 |
| 009158106 AIR PRODS & CHEMS INC | 8,101 | 13,582 |
| 92647Q405 VICTORY RS SMALL CAP GROWTH FUND CLASS Y | 116,202 | 140,310 |
| 060505104 BANK OF AMERICA CORP | 38,132 | 35,206 |
| 26875P101 EOG RESOURCES INC | 34,565 | 29,159 |
| 594918104 MICROSOFT CORP | 52,507 | 75,419 |
| 911312106 UNITED PARCEL SERVICE INC | 29,350 | 27,986 |
| 931142103 WAL-MART STORES INC | 27,862 | 35,136 |
| 00770G847 ADVISERS INVT TR JOHCM INTL SI I | 199,390 | 212,442 |
| 12572Q105 CME GROUP INC | 12,564 | 13,588 |
| 20030N101 COMCAST CORP | 24,151 | 27,355 |
| 464287739 ISHARES US REAL ESTATE ETF | 26,907 | 26,891 |
| 579780206 MCCORMICK & CO INC | 19,011 | 20,926 |
| 67066G104 NVIDIA CORP | 16,645 | 14,781 |
| 742718109 PROCTER & GAMBLE CO | 23,432 | 27,632 |
| 778296103 ROSS STORES INC | 19,516 | 20,121 |
| 79466L302 SALESFORCE.COM INC | 12,570 | 13,807 |
| 92532F100 VERTEX PHARMACEUTICALS INC | 14,576 | 13,937 |
| 92826C839 VISA INC | 28,903 | 35,404 |
| 92939U106 WEC ENERGY GROUP INC | 23,280 | 27,345 |
| 98978V103 ZOETIS INC | 21,666 | 27,578 |
| 875921306 PGIM QMA SMALL-CAP VALUE FUND | 163,707 | 133,489 |
| 04314H592 ARTISAN DEVELOPING WORLD FUND | 125,924 | 131,109 |

Name of Stock End of Year Book End of Year Fair
Value Market Value

13,438

13.316

Investments Corporation Stock Schedule

29476L107 EQUITY RESIDENTIAL

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| TY 2018 Investments Govern | nent Obligat | ions Schedule | |
| | | | |
| Name: | CD HELEN ANI |) JEFF GLAZE | |
| | FOUNDATION | | |
| EIN: | 63-6174358 | | |
| US Government Securities - End of Year Book Value: | | 1,080,759 | |
| US Government Securities - End of Year Fair Market Value: | | 1,095,437 | |
| State & Local Government Securities - End of Year Book Value: | | 0 | |
| State & Local Government Securities - End of Year Fair Market Value: | | 0 | |

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|--------------------------------------|-------------------------|---------------|-------------------|
| TY 2018 Investments - Other S | Schedule | | |
| Name: | CD HELEN AND JEFF GLAZE | | |
| | FOUNDATION | | |
| EIN: | 63-6174358 | | |
| Investments Other Schedule 2 | | | |
| Category / Item | Listed at Cost | or Book Value | End of Year Fair |

| Investments Other Schedule 2 | | | |
|--|-----------------------|------------|----------------------------------|
| Category/ Item | Listed at Cost or FMV | Book Value | End of Year Fair Market Value |
| RE3417004 PIONEER ROAD PARCEL MOBILE,AL 36582 | AT COST | 12,500 | 28,000 |
| RE4784006 LOT 9 NORTH FOREST SUB SATSUMA,AL | AT COST | 4,500 | 8,000 |
| RE4828001 AL PORT AREA LOTS & RESERVED PARCELS | AT COST | 29,654 | 86,700 |

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| TY 2018 Other Decreases Scho | edule | | |
| | | | |
| Name: | CD HELEN AND | D JEFF GLAZE | |
| | FOUNDATION | | |
| EIN: | 63-6174358 | | |
| De | escription | | Amount |
| ADJUSTMENT TO CARRYING VALUE OF PARTNERSHIP | | 258,046 | |
| TIMING DIFFERENCE BOOK AND TAX | | | 54,189 |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN | 93491319023619 |
|--------------------------------------|--------------------------------------|--------------------------|------------------------|---|
| TY 2018 Other Expenses Sche | dule | | | |
| | | | | |
| Name: | CD HELEN AND | JEFF GLAZE | | |
| | FOUNDATION | | | |
| EIN: | 63-6174358 | | | |
| Other Expenses Schedule | | | | |
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
| MISCELLANEOUS EXPENSE | 1,727 | 0 | | 1,727 |
| INSURANCE | 210 | 210 | | 0 |
| OFFICE EXPENSES | 96 | 0 | | 96 |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491319023619 |
|--------------------------------------|-----------------|---------------------|
| TY 2018 Other Income Schedul | le | |
| Name: (| CD HELEN AND 1E | FFF GLAZE |

| I CONDATION |
|-----------------|
| ETN. 62 6474250 |

| | EIN: | 63-6174358 | 3 |
|-----------------------|------|------------|---|
| Other Income Schedule | | | |
| | | | |

| nd | Net Investment |
|----|----------------|

Adjusted Net Income

Revenue A

Income

50,222

50,222

Description

AMSOUTH TIMBER COMPANY TE, LLC

Expenses Per Books

50,222

ECHNIDATION

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|--|-------------------|--------------------------|------------------------|---|--|--|--|--|
| TY 2018 Other Professional Fees Schedule | | | | | | | | |
| Name: CD HELEN AND JEFF GLAZE FOUNDATION EIN: 63-6174358 | | | | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | | | |
| FIDUCIARY FEES | 44,804 | 17,922 | | 26,882 | | | | |

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|--|---------------|--------------------------|------------------------|---|--|--|--|--|
| TY 2018 Taxes Schedule | | | | | | | | |
| Name: CD HELEN AND JEFF GLAZE FOUNDATION EIN: 63-6174358 | | | | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | | | |
| FOREIGN TAX | 1,976 | 1,976 | | 0 | | | | |
| PROPERTY TAX | 552 | 552 | | 0 | | | | |
| ESTIMATED TAX PAYMENTS | 3,358 | 0 | | 0 | | | | |