Form **990-PF**

EXTENDED TO OCTOBER 15, 2020 Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

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

For	caler	idar year 2018 or tax year beginning DEC	2 1, 2018	, and ending	NOV 30, 2019	
Na	me o	foundation			A Employer identification	number
ڃ	PE	ER CHARITABLE TRUST			62-1338941	
		and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_ <u> </u>	0	BOX 240368			901/685-98	87
		own, state or province, country, and ZIP or foreign PHIS, TN 38124-0368	postal code		C If exemption application is p	ending, check here
		PHIS, TN 38124-0368 (all that apply: Initial return	Initial return of a f	ormer public charity	D 1 Foreign organizations	check here
.	511001	Final return	Amended return	ormor public charty	D 1 Toroign organizations	s, onock noro
		Address change	Name change	~ 4	Foreign organizations me check here and attach co	eting the 85% test, mputation
H	Check	type of organization: X Section 501(c)(3) e	exempt private foundation	()H	E If private foundation sta	tus was terminated
	Se	ection 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation	under section 507(b)(1)	(A), check here
		· I	ting method: X Cash	Accrual	F If the foundation is in a	
		Part II, col. (c), line 16)	Other (specify)	- \	under section 507(b)(1)	(B), check here
	<u> </u>	48,570,299. (Part I, colu	T			(d) 0h
	art i	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
t –	1	Contributions, gifts, grants, etc., received			N/A	
•	2	Check X if the foundation is not required to attach Sch. 8 Interest on savings and temporary			,	
	3	cash investments	819,074.	819,074.		STATEMENT 1
	4	Dividends and interest from securities	019,074.	019,074.		SIMIEMENI I
	1	Gross rents Net rental income or (loss)				
	۱ ـ	Net gain or (loss) from sale of assets not on line 10	1,759,676.			,
9)]	Gross sales price for all assets on line 6a				
Revenu	7	Capital gain net income (from Part IV, line 2)		1,759,676.		
ď	8	Net short-term capital gain	· · ·			
	9	Income modifications Gross sales less returns	**		ļ	· ·
		and allowances		0	· March	3 .
		Less Cost of goods sold			R _O SIGNO	76.
		Gross profit or (loss) Other income			-	VO PU
	12	Total Add lines 1 through 11	2,578,750.	2,578,750.	Co	168 CF 101 A
	13	Compensation of officers, directors, trustees, etc	0.	0.	(2) 7	1. 1. S. O.
	14	Other employee salaries and wages			,	20 40 40 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	15	Pension plans, employee benefits		1	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	`OZ0
Ses	16a	Legal fees			O _O ₂	
De	b	Accounting fees STMT 2	9,750.	4,875.	¹ (2)	· · · · · · · · · · · · · · · · · · ·
֡֟֟֟֟֟֟֟֟ <u>֟</u>	_ c	Other professional fees STMT 3	406,878.	406,878.		0.
o O ようとも istrative Exp	1/	Interest Taxes STMT 4	81,566.	12,253. 6,513.		53.
stra	18	Taxes STMT 4 Depreciation and depletion	01,300.	0,313.		` .
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F LD V O 上づた。 Administrative Expense	21	Travel, conferences, and meetings				
	22	Printing and publications				
ן מפר	23	Printing and publications Other expenses STMT 5 Total operating and administrative expenses Add lines 13 through 23	1,003.	0.		1,003.
	24	Total operating and administrative	[[[]]	420 540		F 222
		expenses Add lines 13 through 23	511,450.	430,519.		5,931. 2,216,100.
))	25	Contributions, girts, grants paid	2,216,100.	. ,		2,210,100.
-	26	Total expenses and disbursements Add lines 24 and 25	2,727,550.	430,519.		2,222,031.
	27	Subtract line 26 from line 12:		100,010.	,	_,,,
	l	Excess of revenue over expenses and disbursements	-148,800.	-		
		Net investment income (if negative, enter -0-)		2,148,231.		
	c	Adjusted net income (if negative, enter -0-)	· ·		N/A	<u> </u>

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Cash - non-interest- bearing Savings and temporary cash investments Sariats receivable Sar	P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	· -
Secongs and temporary seal investments A second temporary seal investments				(a) Book Value	(b) Book Value	(c) Fair Market Value
a Accounts receivable Less allowance for doubtful accounts Less allowance for doubtful accounts Corrust receivable Review Re		1	· ·	516 188	1 054 205	1 054 205
Less: allowance for doubtful accounts ▶ 4. Preligher personals ▶ 5. Grants receivable 5. Grants receivable 5. Grants receivable 6. Receivables due from othices, directors, trustees, and other objective or ob				516,177.	1,254,387.	1,254,387.
Refliges receivable Liess silvowane for doubtful accounts		3				
Ess: allowance for countries accounts					· · · · · · · · · · · · · · · · · · ·	
S clients receivable 6 Receivables due from othicers, directors, trustees, and other disqualified persons 7 the most winter trustile Liss's allowance for doubtful accounts 9 Prepared expenses and deferred charges 10 Investments - corporate bonds 11 Investments - corporate bonds 12 Investments - corporate bonds 13 Investments - corporate bonds 13 Investments - corporate bonds 14 Investments - corporate bonds 15 Investments - corporate bonds 16 Investments - corporate bonds 17 Investments - corporate bonds 18 Investments - corporate bonds 19 Investments - corporate bonds 10 Investments - corporate bonds 10 Investments - corporate bonds 10 Investments - corporate bonds 11 Investments - corporate bonds 12 Investments - corporate bonds 13 Investments - corporate bonds 14 Investments - corporate bonds 15 Total assets (describ ► Investments - mortgagle loans 16 Total assets (describ ► Investments - mortgagle loans 17 Accounts payable and accrued expenses 18 Garnts payable 19 Deferred revenue 20 Loans from others, directors, brustees, and other desqualified persons 21 Investments 22 University of the complete lines 2 of through 28, and lines 30 and 31 22 University of the complete lines 2 of through 28, and lines 30 and 31 22 University of through 29 Investments 22 Praction or popular sprise, or input, blog, and equipment fund 28 Praction or popular sprise, or land, blog, and equipment fund 29 Praction or popular sprise, or land, blog, and equipment fund 20 Praction or popular sprise, or land, blog, and equipment fund 20 Practical fines 2 through 28 Investments 30 Total Inabilities and net assets/fund balances 40,607,948 40,459,148 4 40,607,948 2 40,459,148 4 40,607,948 2 40,459,148 4 40,607,948 3 40,459,148 5 40,607,948 6 40,459,148 6 50 Decreases not included in line 2 (termize) ► 2 148,800 6 50 Total rate assets or fund balances and of vigar lines 4 minus lines 5) - Part II, column (b), line 30 6 50 Total rate assets or fund balances and of vigar fines 4 minus lines 5) - Part II, column (b), line 30 6 50 Total rate		4	·			r
6 Recewables due from officers, directors, frustees, and other disqualified persons 7 Other rice websurs reviews 1 Ess' allowance for diobthal accounts 8 Inventiores for sale or use 1 New York of County o			Less: allowance for doubtful accounts			
singularited persons 7 billow rists retrievable Less' allowance for doubtful accounts ▶ 10 beautiful test retrievable Less' allowance for doubtful accounts ▶ 11 billowance for doubtful accounts ▶ 12 lineatments: - Cusp and state povernment obligations 13 lineatments: - Cusp and state povernment obligations 14 Land, buildings, and equuplent basis ▶ 15 lineatments: - other designations 15 lineatments: - other designations 15 lineatments: - other designations 16 Total assests (fescribe ▶ 16 Total assests (fescribe ▶ 16 Total assests (fescribe ▶ 17 Accounts payable and account expenses 18 Grants payable 19 Deterred revenue 19 Deterred revenue 20 Lunea some officers, cerebron, frustees, and other designative piecons 21 Mortgages and other notes payable 22 Cluther isolatiles (add innes 17 through 22) 23 Total liabilities (add innes 17 through 22) 24 Unicestriced 25 Permanently restricted 26 Permanently restricted 27 Retrievable and complete lines 27 through 31 28 Retrievable and complete lines 27 through 31 29 Retrievable and complete lines 27 through 31 20 Total nate assets or fund balances 31 Total liabilities and net assets/fund balances 32 Retrievable and complete lines 27 through 31 33 Retrievable and complete lines 30 on or other funds 40,607,948. 40,459,148. 40,607,948. 40,459,148. 40,607,948. 40,459,148. 40,607,948. 40,459,148. 5 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 4 Add Inss 1, 2, and 3 5 Decreases not included in line 2 (temze) ▶ 5 Total net assets or fund balance and of year (fund 4 minus line 5)-Part II, column (b), line 30 5 Decreases not included in line 2 (temze) ▶ 5 Total net assets or fund balances 5 Total net assets or fund balances 5 Total net assets or fund balances 6 4 4 4 4 5 5 7 4 8 8 6		5			,	
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Prepare exponses and deferred charges 10a Investments - U.S. and state government obligations b Investments - Corporate bonds 1 Investments - Other race states are exposed basis 1 Investments - Other page loans 1 Investments - Other pa			Less: allowance for doubtful accounts			
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6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 40, 459, 148.					 1	
				olumn (b), line 30		
	<u> </u>	Jordi	The second of total defended at only of your plane a minute into of 1 art 11 are	TO A SHOW OF		

Page 3

Part IV Capital Gains a	nd Losses for Tax on In	vestment	Income	T					
	ne kınd(s) of property sold (for exal ehouse; or common stock, 200 shs		te,	(b) I	How acquired - Purchase - Donation		e acquired day, yr.)	(d) Dat (mo., da	
1a RAYMOND JAMES		•		۲	P	1			
b RAYMOND JAMES					P				
c GERBER TAYLOR					P				
d GERBER TAYLOR			•		P				
e SPEER, INC				<u> </u>	P				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) (e) pl	Gain or (loss us (f) minus	(g))	
a								-55	<u>,886.</u>
b								1,555	<u>,563.</u>
C									<u>, 895.</u>
d								299	,563.
Complete only for accets chayge	gain in column (h) and owned by	the foundation	00.12/21/60			<i>(</i>), O	(O-1 /h)		331.
Complete only for assets showing		T _					(Col. (h) gair t not less tha		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			Losse	s (from col.	(h))	
a								<u>-55</u> ,	,886.
b								1,555	
С		 							<u>, 895.</u>
d								299	<u>, 563.</u>
<u>e</u>				_					331.
2 Capital gain net income or (net cap	If gain, also enter If (loss), enter -0	r ın Part I, line)- ın Part I, line	7 7	}[2			1,759,	,676.
3 Net short-term capital gain or (loss	•								
If gain, also enter in Part I, line 8, o		(0).] [
If (loss), enter -0- in Part I, line 8					3		N/A		
Part V Qualification Un						come			
(For optional use by domestic private	foundations subject to the section 4	1940(a) tax on	net investment in	come.)				
If section 4940(d)(2) applies, leave thi	s part blank.								
	•		Aba basa	10					च् चि
Was the foundation liable for the section of the se			•	100 /				Yes	X No
1 Enter the appropriate amount in ea				ntries.				 -	
(a) Base period years	(b)	1011 00110110 001	oro making any or	(c)				(d)	
Base period years Calendar year (or tax year beginning	مان على الأمان المعامل	tributions	Net value of no		ıtable-use assı	ets	Distril (col. (b) div	bùtion ratio vided by col.	(c))
2017		7,619.		48	,485,30	8.	100 107 0		19863
2016		3,040.			,829,33				51742
2015		7,306.			342,48			.05	50455
2014	2,19	8,792.		44	946,67	76.			18920
2013	2,06	3,420.		46	717,55	9.	_	.04	14168
	***					Ī			
2 Total of line 1, column (d)						2		.24	<u> 15148</u>
3 Average distribution ratio for the 5-	year base period - divide the total (on <u>l</u> ine 2 by 5.0), or by the numbe	er of y	ears				
the foundation has been in existent	e if less than 5 years					3		.04	<u> 19030</u>
4 Enter the net value of noncharitable	-use assets for 2018 from Part X, I	line 5				4	4	7,227,	<u>,722.</u>
								2 21 5	F 7 F
5 Multiply line 4 by line 3						5		2,315,	5/5.
C. Fatas 40/ of act in rectangle income	(10/ of Dort line 07h)							21	100
6 Enter 1% of net investment income	(1% 01 Part 1, line 27b)					6	+		482.
7 Add lines F and 6						,		2,337,	057
7 Add lines 5 and 6						7_	+	<u>4,331,</u>	<u> </u>
8 Enter qualifying distributions from	Part XII, line 4					8		2,222,	031.
If line 8 is equal to or greater than I	ine 7, check the box in Part VI, line	1b, and comp	lete that part usin	g a 1%	6 tax rate.				

Form **990-PF** (2018)

Form	990-PF (2018) SPEER CHARITABLE TRUST 62-133	8941		Page 5
Pa	rt 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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A		<u> </u>	
14	The books are in care of ► KATE WATKINS Telephone no. ► 901/4		355	
	Located at ▶ 93 HILLWOOD LANE, COLLIERVILLE, TN ZIP+4 ▶3	8017		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		· / 3 P	•
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	NI.
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
Da	foreign country ► Int VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<u> </u>	
			Yes	No
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	—		110
14	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? Yes X No			,
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	c		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1		
	for the benefit or use of a disqualified person)?	-		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)		۸.	
b	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			4
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	ا ا		
	before the first day of the tax year beginning in 2018?	1c		X
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)):			
a	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		2	
	before 2018? Yes X No			
	If "Yes," list the years			
b	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		,	
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<u> </u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	•	-	
	during the year?			
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 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	3b		v
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	<u> </u>	ļ	
	had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b orm 990)_DF	
	⊦ the state of th	OLLII 236	/- F- F-	(ZU18)

Form 990-PF (2018) SPEER CHARITABLE TRUST		_	62-13389	41	F	age 6
Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be R	equired _{(contini}	ued)			
5a During the year, did the foundation pay or incur any amount to:					Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y6	s 🗶 No 🗔	,		
(2) Influence the outcome of any specific public election (see section 4955); (ectly,				•
any voter registration drive?			s X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes	37		s X No	ı		
(4) Provide a grant to an organization other than a charitable, etc., organization				-		
4945(d)(4)(A)? See instructions	400011504 111 00011011		s X No	`		
(5) Provide for any purpose other than religious, charitable, scientific, literary	or adjugational nurnosas, or f			ŀ		
the prevention of cruelty to children or animals?	, or educational purposes, or r		s X No			
	der the eventions described i	·	.5	٥		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur		ii negulations	N/A	5b		
section 53.4945 or in a current notice regarding disaster assistance? See instr				טט		
Organizations relying on a current notice regarding disaster assistance, check						
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption to			l	ļ		
expenditure responsibility for the grant?	1\	Γ/A	es L No			ő
If "Yes," attach the statement required by Regulations section 53 4945-5(d).						-
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on					
a personal benefit contract?		Y6	es 🛣 No 📙			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		<u> </u>	6b		X
If "Yes" to 6b, file Form 8870.						
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Ye	es X No			
b If "Yes," did the foundation receive any proceeds or have any net income attrib	utable to the transaction?		N/A L	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	\$1,000,000 in remuneration or				,	
excess parachute payment(s) during the year?			s X No			
Part VIII Information About Officers, Directors, Trust	ees, Foundation Mar	nagers, Highly				
Paid Employees, and Contractors	• • •					
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.					
() November of address	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	((e) Exp	ense
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	ac	(e) Expectount, allowar	ense other ices
(a) Name and address SARAH C WATKINS	hours per week devoted	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deterred compensation	ac	(e) Expectount, allowar	ense other nces
	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	ac	(e) Expectount, allowar	ense other oces
SARAH C WATKINS 93 HILLWOOD LANE	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	ac	(e) Expectount, allowar	ense other nces
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017	hours per week devoted to position SECY-TREAS AN	(If not paid, enter -0-) D TRUSTEE	compensation	ac	(e) Expectount, allowar	ices
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO	hours per week devoted to position SECY-TREAS AN 10.00	(If not paid, enter -0-) D TRUSTEE	compensation	ac	(e) Expectount, allowar	ices
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND	(If not paid, enter -0-) D TRUSTEE 0. TRUSTEE	O .	ac	(e) Exp ecount, allowar	O.
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00	(If not paid, enter -0-) D TRUSTEE	compensation	ac	(e) Exposition (e)	ices
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND	(If not paid, enter -0-) D TRUSTEE 0. TRUSTEE	O .	ad	(e) Expectount, allowar	O.
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE	(If not paid, enter -0-) D TRUSTEE 0. TRUSTEE	O •	ac	(e) Expectount, allowar	0 ·
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE 1.00	(If not paid, enter -0-) D TRUSTEE 0. TRUSTEE	O .	ac	(e) Expectount, allowar	O.
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138 CHRIS KOCH	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE	(If not paid, enter -0-) D TRUSTEE 0. TRUSTEE	O •	ac	(e) Expression, allowar	0 ·
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138 CHRIS KOCH 8521 BUCKTHORN DR	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE 1.00 TRUSTEE	(If not paid enter -0-) TRUSTEE 0. TRUSTEE 0.	0 • 0 •	ad	(e) Expression, allowar	0 ·
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138 CHRIS KOCH 8521 BUCKTHORN DR GERMANTOWN, TN 38139	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE 1.00 TRUSTEE 1.00	(If not paid, enter -0-) D TRUSTEE 0. TRUSTEE 0.	O •	ad	(e) Exp	0 ·
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138 CHRIS KOCH 8521 BUCKTHORN DR	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE 1.00 TRUSTEE 1.00	(If not paid, enter -0-) D TRUSTEE 0. TRUSTEE 0.	0 • 0 • 0 •		allowar	0. 0.
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138 CHRIS KOCH 8521 BUCKTHORN DR GERMANTOWN, TN 38139	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE 1.00 TRUSTEE 1.00 cluded on line 1). If none, of hours per week	(If not paid, enter -0-) D TRUSTEE 0. TRUSTEE 0.	O . O . (d) Contributions to employee benefit plans and defered	(add	(e) Exp	O. O.
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138 CHRIS KOCH 8521 BUCKTHORN DR GERMANTOWN, TN 38139 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE 1.00 TRUSTEE 1.00 cluded on line 1). If none, we consider the constant of the const	(If not paid enter -0-) D TRUSTEE 0. TRUSTEE 0. 0.	0 • 0 • 0 •	(add	allowar	O. O.
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138 CHRIS KOCH 8521 BUCKTHORN DR GERMANTOWN, TN 38139 2 Compensation of five highest-paid employees (other than those inc	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE 1.00 TRUSTEE 1.00 cluded on line 1). If none, of hours per week	(If not paid enter -0-) D TRUSTEE 0. TRUSTEE 0. 0.	O . O . (d) Contributions to employee benefit plans and defered	(add	(e) Exp	O. O.
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138 CHRIS KOCH 8521 BUCKTHORN DR GERMANTOWN, TN 38139 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE 1.00 TRUSTEE 1.00 cluded on line 1). If none, of hours per week	(If not paid enter -0-) D TRUSTEE 0. TRUSTEE 0. 0.	O . O . (d) Contributions to employee benefit plans and defered	(add	(e) Exp	O. O.
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138 CHRIS KOCH 8521 BUCKTHORN DR GERMANTOWN, TN 38139 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE 1.00 TRUSTEE 1.00 cluded on line 1). If none, of hours per week	(If not paid enter -0-) D TRUSTEE 0. TRUSTEE 0. 0.	O . O . (d) Contributions to employee benefit plans and defered	(add	(e) Exp	O. O.
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138 CHRIS KOCH 8521 BUCKTHORN DR GERMANTOWN, TN 38139 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE 1.00 TRUSTEE 1.00 cluded on line 1). If none, of hours per week	(If not paid enter -0-) D TRUSTEE 0. TRUSTEE 0. 0.	O . O . (d) Contributions to employee benefit plans and defered	(add	(e) Exp	O. O.
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138 CHRIS KOCH 8521 BUCKTHORN DR GERMANTOWN, TN 38139 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE 1.00 TRUSTEE 1.00 cluded on line 1). If none, of hours per week	(If not paid enter -0-) D TRUSTEE 0. TRUSTEE 0. 0.	O . O . (d) Contributions to employee benefit plans and defered	(add	(e) Exp	O. O.
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138 CHRIS KOCH 8521 BUCKTHORN DR GERMANTOWN, TN 38139 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE 1.00 TRUSTEE 1.00 cluded on line 1). If none, of hours per week	(If not paid enter -0-) D TRUSTEE 0. TRUSTEE 0. 0.	O . O . (d) Contributions to employee benefit plans and defered	(add	(e) Exp	O. O.
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138 CHRIS KOCH 8521 BUCKTHORN DR GERMANTOWN, TN 38139 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE 1.00 TRUSTEE 1.00 cluded on line 1). If none, of hours per week	(If not paid enter -0-) D TRUSTEE 0. TRUSTEE 0. 0.	O . O . (d) Contributions to employee benefit plans and defered	(add	(e) Exp	O. O.
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138 CHRIS KOCH 8521 BUCKTHORN DR GERMANTOWN, TN 38139 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE 1.00 TRUSTEE 1.00 cluded on line 1). If none, of hours per week	(If not paid enter -0-) D TRUSTEE 0. TRUSTEE 0. 0.	O . O . (d) Contributions to employee benefit plans and defered	(add	(e) Exp	O. O.
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138 CHRIS KOCH 8521 BUCKTHORN DR GERMANTOWN, TN 38139 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE 1.00 TRUSTEE 1.00 cluded on line 1). If none, of hours per week	(If not paid enter -0-) D TRUSTEE 0. TRUSTEE 0. 0.	O . O . (d) Contributions to employee benefit plans and defered	(add	(e) Exp	O. O.
SARAH C WATKINS 93 HILLWOOD LANE COLLIERVILLE, TN 38017 STEPHEN W VESCOVO 40 S MAIN STREET, SUITE 2900 MEMPHIS, TN 38103 C T COURTENAY 7260 DUCKHORN DR GERMANTOWN, TN 38138 CHRIS KOCH 8521 BUCKTHORN DR GERMANTOWN, TN 38139 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position SECY-TREAS AN 10.00 PRESIDENT AND 1.00 TRUSTEE 1.00 TRUSTEE 1.00 cluded on line 1). If none, of hours per week	(If not paid enter -0-) D TRUSTEE 0. TRUSTEE 0. 0.	O . O . (d) Contributions to employee benefit plans and defered	(add	(e) Exp	O. O.

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ion Manag	gers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."			
(a) Name and address of each person paid more than \$50,000		(b) Type of service		(c) Compensation
RAYMOND JAMES & ASSOCIATES, INC				
880 CARILLON PARKWAY, ST PETERSBURG, FL 33716	ASSET	MANAGEMENT		290,507.
GERBER TAYLOR - ONE COMMERCE SQUARE, SUITE				
1900, MEMPHIS, TN 38103	ASSET	MANAGEMENT		116,371.
	-			
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities			>	0
		1		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced.		n such as the	E	Expenses
1 N/A				
2				
3				
				
4				
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on li	unge 1 and 2	Т		Amount
1 N/A	iles Lailu Z.		<i>'</i>	anount
2				
All other program-related investments. See instructions.				
3				
Total Add lines 1 through 3				0.

Par	Minimum Investment Heturn (All domestic foundations must complete this part. Foreign four	dations	s, see instructions)
1 Fa	air market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a A	verage monthly fair market value of securities	1 <u>a</u>	47,061,644. 885,282.
b A	verage of monthly cash balances	1b	885,282.
c F	air market value of all other assets	1c	
d T	otal (add lines 1a, b, and c)	10	47,946,926.
e R	eduction claimed for blockage or other factors reported on lines 1a and		
1	c (attach detailed explanation) <u>1e</u> 0 •	٠	
2 A	equisition indebtedness applicable to line 1 assets	2	0.
3 S	ubtract line 2 from line 1d	3	47,946,926.
4 C	ash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	719,204.
5 N	et value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	47,227,722.
6 M	inimum investment return Enter 5% of line 5	6	2,361,386.
Par	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certair	1
	foreign organizations, check here and do not complete this part.)		
1 N	ınımum ınvestment return from Part X, line 6	1	2,361,386.
2a Ta	ax on investment income for 2018 from Part VI, line 5		
b Ir	come tax for 2018. (This does not include the tax from Part VI.)		
	dd lines 2a and 2b	2c	42,965.
3 D	stributable amount before adjustments. Subtract line 2c from line 1	3	2,318,421.
4 R	ecoveries of amounts treated as qualifying distributions	4	0.
5 A	dd lines 3 and 4	5	2,318,421.
6 D	eduction from distributable amount (see instructions)	6	0.
7 D	istributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,318,421.
	TXII Qualifying Distributions (see instructions)		
	(coo noticolor)		
1 A	mounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a E	penses, contributions, gifts, etc total from Part I, column (d), line 26	1a	2,222,031.
b P	ogram-related investments - total from Part IX-B	1b	0.
2 A	mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 A	mounts set aside for specific charitable projects that satisfy the:		
a S	utability test (prior IRS approval required)	3a	•
b C	ash distribution test (attach the required schedule)	3b	
4 Q	ualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	2,222,031.
5 Fo	oundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
ın	come. Enter 1% of Part I, line 27b	5	0.
6 A	fjusted qualifying distributions Subtract line 5 from line 4	6	2,222,031.
N	ote The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies f	or the section
	4940(a) reduction of tay in those years		

Form **990-PF** (2018)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
Distributable amount for 2018 from Part XI,	острас	Pour o prior to 2011	^	2010
line 7	n		,	2,318,421.
2 Undistributed income, if any, as of the end of 2018		_	· ·	"
a Enter amount for 2017 only			0.	
b Total for prior years:				
g rotal for prior yourse		0.		
3 Excess distributions carryover, if any, to 2018:				ь
a From 2013				
b From 2014				
c From 2015	- r		٥	
d From 2016 112,009.				
e From 2017 56,742.				
f Total of lines 3a through e	168,751.			
4 Qualifying distributions for 2018 from				
Part XII, line 4: ► \$ 2,222,031.				
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				2,222,031.
e Remaining amount distributed out of corpus	0.	· · · · · · · · · · · · · · · · · · ·		
5 Excess distributions carryover applied to 2018	96,390.			96,390.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	72,361.			
b Prior years' undistributed income. Subtract	,2,3021			
line 4b from line 2b		0.	, b	
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.		C .
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		•		
be distributed in 2019			,	0.
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)	0.			
8 Excess distributions carryover from 2013	•			e
not applied on line 5 or line 7	0.	· ·		
9 Excess distributions carryover to 2019	E0 261		·	
Subtract lines 7 and 8 from line 6a	72,361.			
10 Analysis of line 9:			,	
a Excess from 2014	_			
b Excess from 2015	'			•
c Excess from 2016 15,619.			*	
d Excess from 2017 56,742.	· · · · · · · · · · · · · · · · · · ·	•		r
e Excess from 2018	к			

	CHARITABLE T			62-133	3 8941 Page 10
Part XIV Private Operating I	Foundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter that	t it is a private operating			
foundation, and the ruling is effective f	for 2018, enter the date of t	the ruling	▶		
b Check box to indicate whether the four	nd <u>ation is a private operatir</u>	ng foundation described			12(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	/	
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					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not				/	
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					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets		l			
(2) Value of assets qualifying under section 4942(1)(3)(B)(1)					
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)			1		
(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				1	
(4) Gross investment income					
Part XV Supplementary Info	ormation (Comple	te this part only	f the foundation	had \$5,000 or more	in assets
at any time during					
1 Information Regarding Foundati	on Managers:				
a List any managers of the foundation w	ho have contributed more	than 2% of the total cont	ributions received by the	foundation before the close	of any tax
year (but only if they have contributed	more than \$5,000). (See s	ection 507(d)(2).)			
NONE					
b List any managers of the foundation w			(or an equally large porti	on of the ownership of a part	nership or
other entity) of which the foundation h	as a 10% or greater interes	st.			
NONE					_
2 Information Regarding Contribu					
Check here $ ightharpoonup oldsymbol{X}$ if the foundation					its for funds. If
the foundation makes gifts, grants, etc	., to individuals or organiza	tions under other condit	ions, complete items 2a,	b, c, and d.	
a The name, address, and telephone nun	nber or email address of th	e person to whom applic	ations should be addres	sed:	
					
b The form in which applications should	DE SUDMITTEO AND INFORMA!	ion and materials they si	noula include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	ds, such as by geographica	al areas, charitable fields,	kinds of institutions, or	other factors:	

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient a Paid during the year SCHEDULE ATTACHED N/A PUBLIC PROGRAM RELATED 2,216,100. **▶** 3a 2,216,100. Total **b** Approved for future payment SCHEDULE ATTACHED N/A PUBLIC PROGRAM RELATED 1,940,000. 1,940,000. ▶ 3b Total

Part XVI-A Analysis of Income-Producing Activities

ter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)	
	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income	
Program service revenue:	code		-			
a	_	<u> </u>	+			
b	-				<u> </u>	
<u> </u>			\vdash			
d	i i		+-			
e	-		 			
g Fees and contracts from government agencies	_		+ -			
Membership dues and assessments			+			
Interest on savings and temporary cash					-	
investments						
Dividends and interest from securities			14	819,074.		
Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
Net rental income or (loss) from personal				,		
property						
Other investment income						
Gain or (loss) from sales of assets other						
than inventory			18	1,759,676.		
Net income or (loss) from special events						
Gross profit or (loss) from sales of inventory						
Other revenue:						
a	_					
b						
C	_					
d	_		ļ		-	
e	_					
		0.		2,578,750.	2,578,75	
Subtotal. Add columns (b), (d), and (e)				13	2 578 75	
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e)				13 <u>—</u>	2,370,73	
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e))				2,370,73	
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.)		mplishment of Ex	empt		2,370,73	
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) ART XVI-B Relationship of Activities	to the Acco			Purposes		
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) Total Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations.) Total Add line 12, columns (b), (d), and (e) E worksheet in line 12, columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e)	to the Acco	ın column (e) of Part XVI-A		Purposes		
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) ART XVI-B Relationship of Activities	to the Acco	ın column (e) of Part XVI-A		Purposes		
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) ART XVI-B Relationship of Activities e No. Explain below how each activity for which in	to the Acco	ın column (e) of Part XVI-A		Purposes		
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Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations.) THE Relationship of Activities e No. Explain below how each activity for which in	to the Acco	ın column (e) of Part XVI-A		Purposes		
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Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) ART XVI-B Relationship of Activities The No. Explain below how each activity for which in	to the Acco	ın column (e) of Part XVI-A		Purposes		

Part XVII	Information Regarding	Transfers to and Transactions and	Relationships Wi	th Noncharitable
	Exempt Organizations			

1 Did	the organ	nization directly or indir	rectly engage in any	of the followin	g with any other organization	on described in secti	on 501(c)		Yes	No
(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?							7,		,	
a Tran	Transfers from the reporting foundation to a noncharitable exempt organization of:							,٠-	,	, '•
(1)	1) Cash						1a(1)		X	
(2)	(2) Other assets							1a(2)		X
b Othe	er transad	ctions:						1, " 2	· ·	**
(1)	(1) Sales of assets to a noncharitable exempt organization						1b(1)		X	
(2)	Purchas	es of assets from a nor	ncharitable exempt c	organization				1b(2)		X
(3)	Rental o	f facilities, equipment,	or other assets					1b(3)		_X_
(4)	Reimbur	sement arrangements						1b(4)		<u> </u>
(5)	Loans of	r Ioan guarantees						1b(5)		<u> </u>
(6)	Perform	ance of services or me	mbership or fundrais	sıng solıcıtatıo	ns			1b(6)		_X_
c Sha	rıng of fa	cilities, equipment, ma	uling lists, other asse	ets, or paid em	ployees			1c		<u> </u>
d If th	e answer	to any of the above is	"Yes," complete the	following sche	dule. Column (b) should alv	ways show the fair n	narket value of the goods, ot	her ass	ets,	
or s	ervices g	iven by the reporting fo	oundation. If the four	ndation receive	ed less than fair market valu	ie in any transaction	or sharing arrangement, sho)W IN		
colu		he value of the goods,	T				_			
a) Line no	(b)	Amount involved	(c) Name of		e exempt organization	(d) Description	of transfers, transactions, and sha	arıng arra	ngemen	its
				N/A						
					<u> </u>					
		· -								
					•					
•										
							•			
										-
2a Is th	ne founda	tion directly or indirect	tly affiliated with, or	related to, one	or more tax-exempt organi	zations described				
		1(c) (other than section	•		, ,			Yes	X	No
		plete the following sche						_		
	00, 00,	(a) Name of org			(b) Type of organization		(c) Description of relationshi	p		
-		N/A	<u> </u>		, , , , , , , , , , , , , , , , , , , ,		· · · · · · · · · · · · · · · · · · ·			
	Under per	alties of perjury, I declare the	hat I have examined this	return, including	accompanying schedules and st	atements, and to the bes	st of my knowledge	- 170 s		
Sign	and belief	it is true, connect, and com	plete Declaration of pre	parer (other than	taxpayer) is based on all information	tion of which preparer ha	as any knowledge return	the IRS d	prepare	er
Here		171 015	Design		0808/8/11	Rus		n below?		No
	Signati	ire of officer or trustee			Date	Title	, <u>, , , , , , , , , , , , , , , , , , </u>	_ 163		, 110
	<u> </u>	rint/Type preparer's na		Preparer's si		Date	Check If PTIN			
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Use O		im shame - Inc	MALCIAN	GROUP,	1110		I IIIII SEIN P ZU II	003.	- 0	
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823622 12-11-18

FORM 990-PF	DIVIDEND	S AND INTER	EST FROM	SECURIT	IES S	TATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REV		(B) ET INVEST- ENT INCOME	
GERBER TAYLOR	116,916		0. 11	6,916.	116,916.	
RAYMOND JAMES	701,620			1,620.	701,620.	
SHIRLO, INC	239 299		0. 0.	239. 299.	239. 299.	
SPEER, INC	299	• 			299•	
TO PART I, LINE 4	819,074	•	0. 81	9,074.	819,074.	
=						
FORM 990-PF		ACCOUNTI	NG FEES		S	TATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INV MENT IN		(C) ADJUSTED ET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	_	9,750.	4	,875.		4,875.
TO FORM 990-PF, PG	L, LN 16B	9,750.	4	,875.		4,875.
FORM 990-PF	0'.	THER PROFES	SIONAL F	EES	S	татемент 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INV MENT IN		(C) ADJUSTED ET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMEN	T FEES	406,878.	406	,878.		0.
TO FORM 990-PF, PG	L, LN 16C	406,878.	406	,878.		0.

FORM 990-PF	TAX	ES	STATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAX—YE 11/30/2019 FOREIGN TAXES W/H FROM	75,000.	0.		0.
INCOME OTHER TAXES AND LICENSES	6,460. 106.	<u> </u>		53.
TO FORM 990-PF, PG 1, LN 18	81,566.	6,513.		53.
FORM 990-PF	OTHER EXPENSES		STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
INSURANCE	1,003.	0.		1,003.
TO FORM 990-PF, PG 1, LN 23	1,003.	0.		1,003.

FORM 990-PF CORPORATE STOC	CK	STATEMENT 6
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
RAYMOND JAMES & ASSOCIATES SHIRLO, INC SPEER, INC	28,937,510. 43,406. 8,260.	33,831,684. 43,406. 40,302.
TOTAL TO FORM 990-PF, PART II, LINE 10B	28,989,176.	33,915,392.

FORM 990-PF ·	OTHER INVESTMENTS	STATEMENT 7
DESCRIPTION	VALUATION METHOD BOOK VA	FAIR MARKET ALUE VALUE
GERBER TAYLOR INVESTMENT PARTNERSHIPS	FMV 10,215	5,585. 13,400,520.
TOTAL TO FORM 990-PF, PART II,	LINE 13 10,215	5,585. 13,400,520.

Contributions Paid During Year - Part XV, Line 3a

A Step Ahead Foundation	50,000 00
Birthright of Memphis	25,000 00
BSA Chickasaw Council	10,000 00
C COM	25,000 00
Cancer Card Exchange	15,200 00
Care	100 00
Catholic Charities	100,000 00
Catholic Diocese of Memphis	2,500 00
Christian Brothers High School	51,500 00
Christian Brothers University	250,000 00
Church Health Center	60,000 00
Collierville Presby	7,700 00
Community Foundation	500 00
Concord Academy	10,000 00
Cooper Street Center	50,000 00
Friends of Scouting	10,000 00
Grand Annual Collection	5,000 00
Harwood Center	180,000 00
Holy Rosary Catholic School	10,000 00
JIFF	25,000 00
Juvenile Diabetes Research	3,000 00
Madonna Learning Center	55,000 00
Memphis Botanic Gardens	35,000 00
Memphis Food Bank	50,000 00
Memphis Union Mission	30,000 00
Methodist Healthcare Foundation	500 00
Mid South Food Bank	161,000 00
MIFA	130,000 00
Mt Carmel Cemetary Assn	100 00
Porter-Leath	31,000 00
Shelby County Drug Court	25,000 00
Splash Mid South	5,000 00
St Jude's	375,000 00
St Mary's St Catherines	5,000 00
St Thomas Aquinas Cath MN	1,000 00
St Benedicts at Aubundale	50,000 00
St. Mary's Catholic Church	30,000 00
St. Paul Catholic School	60,000 00
Troop 341	20,000 00
University of Central AR Fdn	500 00
University of Memphis	100,000 00
University of Memphis Law	1,000 00
WKNO	10,500 00
Youth Villages	150,000 00
•	2,216,100 00