Form 990-PF

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

2019

| or caler | ndar year 2019 or tax year beginning | | , and ending | | |
|----------------------------------|---|---|--|--|---|
| Name o | f foundation | | | A Employer identification | number |
| THE | SPARROW CHARITABLE FOU | NDATION | | 20-0488561 | |
| Number a | and street (or P.O. box number if mail is not delivered to street | address) | Room/suite | B Telephone number | |
| 650 | 6-ORCHID LANE | | | 214-349-50 | 55 |
| City or t | town, state or province, country, and ZIP or foreign p | ostal code | | C If exemption application is pe | ending, check here |
| DAL | LAS, TX 75230 | | | | |
| Check | k all that apply: Initial return | Initial return of a f | ormer public charity | D 1. Foreign organizations | s, check here 🕨 🔃 |
| | Final return | Amended return | | 2 Ferriga erganizations ma | ation the 9594 test |
| | Address change | Name change | | Foreign organizations me check here and attach co. | mputation D |
| | k type of organization: X Section 501(c)(3) e | | \mathcal{M} | 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 🕨 🔼 |
| Fair ma | · · · · · · · · · · · · · · · · · · · | ing method. X Cash | Accrual | F If the foundation is in a | 60-month termination |
| (from F | Part II, col. (c), line 16) | ther (specify) | ·- | under section 507(b)(1) | (B), check here |
| ▶ \$ | 13 , 818 . (Part I, colu | mn (d), must be on cash bas | SIS.) | | T |
| <u>Ŗartal</u> | Analysis of Revenue and Expenses (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) |
| 1 | Contributions, gifts, grants, etc., received | 1,800,000. | | N/A | |
| 2 | Check It if the foundation is not required to attach Sch. B | | | | |
| 3 | Interest on savings and temporary cash investments | 3,654. | 3,654. | AND A DESCRIPTION OF THE PROPERTY OF THE PROPE | STATEMENT: 1 |
| 1 | Dividends and interest from securities | 3,001 | 3,332 | | W 200 - 12 - 12 - 12 - 12 - 12 - 12 - 12 |
| 52 | Gross rents | | | ··- | 7-4-133 |
| ` | Net rental income or (loss) | | | | 70777 |
| | Net gain or (loss) from sale of assets not on line 10 | ONE A . Children Stronger School and Market Landson Cl 2400 | | | |
| 의 , | Gross sales price for all | | | | T. M. W. C. |
| ᇷ | Capital gain net income (from Part IV, line 2) | | 0. | 30.00 | VED |
| 월 8 | Net short-term capital gain | | | REUS | 301 |
| 9 | Income modifications | | | | 0000191 |
| 1 - | Gross sales less returns and allowances | | 2/2003 | CANARA P | 5 (05 18) |
| | Less Cost of goods sold | | * * * * * * * * * * * * * * * * * * * | | |
| | Gross profit or (loss) | | 1977 | la la constant | ENIU |
| 111 | · · · · · | | | OGE | |
| 12 | Total. Add lines 1 through 11 | 1,803,654. | 3,654. | | |
| 13 | Compensation of officers, directors, trustees, etc | 0. | 0. | | 0 |
| 14 | Other employee salaries and wages | | | • | |
| 15 | Pension plans, employee benefits | | | | |
| ရွိ 16a | Legal fees | | | | |
| 16a b | Accounting fees STMT 2 | 2,524. | 1,262. | | 1,262 |
| 윘 | Other professional fees | | | | |
| e 17 | Interest | | | | |
| 18 | Taxes STMT 3 | 11. | 0. | | 0 |
| 19 | Depreciation and depletion | | | | |
| 20 | Occupancy | | | | |
| ₽ 21 | Travel, conferences, and meetings | 2,639. | 0. | | 2,639 |
| 22 | Printing and publications | | | | |
| Operating and Administrative Exp | Other expenses | | | | |
| 24 | Total operating and administrative | - 454 | 1 000 | | 2 001 |
| De | expenses. Add lines 13 through 23 | 5,174. | 1,262. | Mark Considerate December | 3,901 1,796,450 |
| 25 | Contributions, gifts, grants paid | 1,796,450. | | | 1,/96,450 |
| 26 | Total expenses and disbursements. | 1 001 604 | 1 000 | | 1 000 251 |
| + | Add lines 24 and 25 | 1,801,624. | 1,262. | 200. Kroeseen herbeiligen ein wir | 1,800,351 |
| 27 | Subtract line 26 from line 12; | | 第16 | | |
| | Excess of revenue over expenses and disbursements | 2,030. | | | |
| - 1 | Net investment income (if negative, enter -0-) | | 2,392. | | |
| 1 . | Adjusted net income (if negative, enter -0-) | | 12-11-10/06/67/07-16-15 | N/A | Form 990-PF (201 |

| For | m 99 | 0-PF (2019) THE SPARROW CHARITABLE | FOUNDATION | 20- | 0488561 | Page 2 |
|--------------------------|-------|--|---|---|---|---|
| E D | **** | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | End o | of year | |
| 217 | art; | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market | Value |
| | 1 | Cash - non-interest-bearing | | | | |
| | 2 | Savings and temporary cash investments | 11,788. | 13,818. | 13 | <u>,818.</u> |
| | 3 | Accounts receivable | | | | |
| | | Less; allowance for doubtful accounts | | | | |
| | 4 | Pledges receivable > | | 7 | | 700 |
| | | Less: allowance for doubtful accounts | | | | |
| | 5 | Grants receivable | | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | | |
| | - | disqualified persons | | | | |
| | 7 | Other notes and loans receivable | | | | |
| | - | Less: allowance for doubtful accounts | | | | |
| /۸ | 8 | Inventories for sale or use | | | | |
| Assets | | Prepaid expenses and deferred charges | | | | |
| Ass | | Investments - U S and state government obligations | | | | |
| | | Investments - corporate stock | | | 1 | |
| | l | Investments - corporate bonds | | ···· | | |
| | l . | Investments - land, buildings, and equipment basis | | | 15 × 500 1760 | a 22550. H |
| | '' | Less accumulated depreciation | | 10.1. (1.2. 11. 2.2. 12. 12. 12. 12. 12. 12. 12 | | M-35 ************************************ |
| | 12 | Investments - mortgage loans | | | | |
| | 13 | Investments - other | | | | |
| | l . | Land, buildings, and equipment basis | CONTRACTOR OF THE STATE OF THE | | FEBRUAT COLLE | |
| | 14 | Less accumulated depreciation | | <u> </u> | | |
| | 4.5 | | | ···· | | |
| | | Other assets (describe) Total assets (to be completed by all filers - see the | | | | |
| | 16 | | 11,788. | 13,818. | 13 | ,818. |
| _ | 47 | Instructions. Also, see page 1, item I) | 11,700. | 13,010. | | |
| | l | Accounts payable and accrued expenses | | | | COCKER 2013 |
| | 18 | Grants payable | | | | |
| les | 19 | Deferred revenue | | | | 5-0200 |
| Ħ | 20 | Loans from officers, directors, trustees, and other disqualified persons | · | | #41 MAR A 7 MAR | S-200757-1 |
| Liabilities | 21 | Mortgages and other notes payable | | | 4 | |
| _ | 22 | Other liabilities (describe | <u> </u> | | | 5. 542460 |
| | | Tabel to bilde as (add lines 17 through 22) | 0. | 0. | | |
| _ | 23 | Total liabilities (add lines 17 through 22) | 0. | | · · · · · · · · · · · · · · · · · · · | 52524753 |
| | | Foundations that follow FASB ASC 958, check here | | | | |
| ces | ١., | and complete lines 24, 25, 29, and 30. | | | | |
| anc | 24 | Net assets without donor restrictions | | | | 77.1.10.057.74 |
| Net Assets or Fund Balan | 25 | Net assets with donor restrictions | | | AUSTER VIOLEN | |
| 힏 | | Foundations that do not follow FASB ASC 958, check here | | | | |
| Ī | | and complete lines 26 through 30. | 0. | 0. | | |
| ō | 26 | Capital stock, trust principal, or current funds | 0. | 0. | (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) | |
| ets | 27 | Paid-in or capital surplus, or land, bldg., and equipment fund | 11,788. | 13,818. | | 0.24522224 01.5502234 |
| Ass | 28 | Retained earnings, accumulated income, endowment, or other funds | 11,788. | 13,818. | | 20/20/04/20/2/2/2/2/2/2/2/2/2/2/2/2/2/2/ |
| let | 29 | Total net assets or fund balances | 11,700. | 13,010. | 70.00 A. 100.00 C. 100.00 | <u> </u> |
| ~ | l | | 11,788. | 13,818. | | |
| _ | 30 | Total liabilities and net assets/fund balances | | 13,010. | Children State / 442-11 | ************************************** |
| ₽. | art. | Analysis of Changes in Net Assets or Fund B | alances | | | |
| = | | | 20 | | <u> </u> | |
| 1 | | net assets or fund balances at beginning of year - Part II, column (a), line | 23 | | 11 | ,788. |
| _ | | it agree with end-of-year figure reported on prior year's return) | | 1 2 | | ,030. |
| | | amount from Part I, line 27a | | 2 3 | | 0. |
| | | r increases not included in line 2 (itemize) | | | 12 | ,818. |
| | | lines 1, 2, and 3 | | 5 | 13 | 0. |
| | | eases not included in line 2 (itemize) | olumn (h) Jina 20 | | 12 | ,818. |
| 6 | ıotal | net assets or fund balances at end of year (line 4 minus line 5) - Part II, c | oranin (u), iiile za | | Form 990- | |
| | | | | | | - (2013) |

| Part IV Capital Gains a | and Lo | sses for Tax on In | vestment | Income | | | | , | | |
|---|------------------------|---|-----------------------------|---------------------------------------|------------------|---------------------------|--------------------------|---------------------|------------------------------|------------------------------------|
| (a) List and describe 2-story brick wa | the kınd(s rehouse, | s) of property sold (for exar or common stock, 200 shs | mple, real esta MLC Co.) | te, | (b) D | How ac - Purc - Don | cquired hase ation | (c) Date (mo., c | acquired day, yr) | (d) Date sold (mo., day, yr.) |
| 1a | | | | | | | | | | |
| b NO | NE | | | | ļ., | | | | | |
| _c | | | | | - | | | | | |
| | | | | | | | | | | |
| e | | | | | Ц, | | | | | <u> </u> |
| (e) Gross sales price | (1) | Depreciation allowed (or allowable) | | st or other basis expense of sale | | | | | Sain or (loss s (f) minus | |
| <u>a</u> | | | ļ | | | | | | | |
| b | | | | | _ | | | | | |
| <u>c</u> | | | | | \dashv | | | | | |
| _d | | | | · | | | | — | | |
| Complete only for assets showin | u usin in | column (h) and owned by t | he foundation | on 12/31/69 | \neg | | | N Gaine // | Col. (h) gain | minus |
| Complete only for assets showing | | (i) Adjusted basis | | cess of col. (I) | | | co | l. (k), but | not less tha | n -0-) or |
| (ı) FMV as of 12/31/69 | | as of 12/31/69 | | col. (j), if any | | | | Losses | (from col. (| (h)) |
| a | | | | <u> </u> | \dashv | | | | <u> </u> | |
| <u> </u> | | | - | | | | | | | |
| С | | | | | | - | | | | |
| d | | | | | | | | | | |
| e | | | | | | | | | | |
| | | ∫ If gain, also enter | ın Part I. line | 7 |) | | | | | |
| 2 Capital gain net income or (net ca | pital loss | | | | } | 2 | | | | |
| 3 Net short-term capital gain or (los | s) as def | | | | | | | | | |
| If gain, also enter in Part I, line 8, | • | • • | 0 (0). | |] [| | | | | |
| If (loss), enter -0- in Part I, line 8 | · · · · · · | · | | | Ш | 3 | L., | | | |
| Part V Qualification U | nder S | ection 4940(e) for | Reduced | lax on Net | inve | stm | ent Inco | ome | | |
| (For optional use by domestic private | foundati | ons subject to the section 4 | 940(a) tax on | net investment inc | come | .) | | | | |
| If section 4940(d)(2) applies, leave th | ue nart hi | ank | | | | | | | | |
| 11 Section 4340(a)(2) applies, leave ti | no part bi | ank | | | | | | | | |
| Was the foundation liable for the sect | | | | · · · · · · · · · · · · · · · · · · · | od? | | | | | Yes X No |
| If "Yes," the foundation doesn't qualif | | | | | | | | | | |
| 1 Enter the appropriate amount in (a) | acn colui | | istructions bei | ore making any er | | | | | | (4) |
| Base period years Calendar year (or tax year beginnin | ng in) | (b) Adjusted qualifying dist | | Net value of no | (c) nchai | ıtable- | | | Distrit (col. (b) div | oution ratio rided by col. (c)) |
| 2018 | | | 2,591. | | | | $\frac{0,973}{0,040}$ | | _ | 8.019153 |
| 2017 | | | 7,475. | | | | 8,048 | | | 6.785732 |
| 2016 | | | 9,588. | | | | 1,017 | | | 7.840061 |
| 2015 | | | 8,978. | | | | $\frac{7,488}{7,304}$ | | | 6.449175 |
| 2014 | 1 | 1,00 | 0,275. | | | | 7,704 | - | r | 4.392874 |
| 2 Total of line 1, column (d) | | | | | | | | 2 | | 33.486995 |
| 3 Average distribution ratio for the S | | | on line 2 by 5.0 |), or by the numbe | er of y | ears/ | | | | C COBOO |
| the foundation has been in exister | ice if less | than 5 years | | | | | | 3 | | 6.697399 |
| 4 Enter the net value of noncharitab | le-use as: | sets for 2019 from Part X, I | ine 5 | | | | | 4 | | 145,319. |
| | | • | | | | | | | | |
| 5 Multiply line 4 by line 3 | | | | | | | | _ 5 | | 973,259. |
| | | | | | | | | | | |
| 6 Enter 1% of net investment incom | e (1% of | Part I, line 27b) | | | | | | 6 | | 24. |
| | | | | | | | | | 1 | 072 002 |
| 7 Add lines 5 and 6 | | | | | | | | 7 | | 973,283. |
| 8 Enter qualifying distributions from | Dart VII | line 4 | | | | | | 8 | | 1,800,351. |
| | | | 1h and as | late that new uses | 0 2 10 | / tou - | ato | | | _,, |
| If line 8 is equal to or greater than See the Part VI instructions | inie /, Cl | HECK THE DOX III PART VI, IINE | iu, and comp | nete that part using | ya 1` | /O (4X [| a1 5 . | | | |
| 923521 12-17-19 | | | | | | ! | • | | | orm 990-PF (2019) |



| | 990-PF (2019) THE SPARROW CHARITABLE FOUNDAT: | ION (a), 49 | 940(b), 49 | 40(e), or 49 | 20- 48- | 0488! see ins | 561 structio | Page 4 |
|-------|--|----------------|------------------|--------------------|------------|------------------|---|--|
| 44.00 | Exempt operating foundations described in section 4940(d)(2), check here and er | | |) | Mar Ac | 10 F (21/2) | | |
| 14 | Date of ruling or determination letter | | | πs) | | | ¥ | 3.3 |
| h | Domestic foundations that meet the section 4940(e) requirements in Part V, check here | | | , | 1 | | | 24. |
| U | of Part I, line 27b | ٠ ــــــــ ، | 4.10 011101 170 | | | | Seath Sea | *** |
| c | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% | of Part | I, line 12, col. | .(b) | | | | |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; oth | | | (-) | 2 | Strenamaziwa | District Services | 0. |
| | Add lines 1 and 2 | , | / | | 3 | | | 24. |
| | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, other | hers, ent | ter -0-) | | 4 | | | 0. |
| | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | , | | 5 | | | 24. |
| | Credits/Payments; | | | | | | | |
| | 2019 estimated tax payments and 2018 overpayment credited to 2019 | Ga] | | 0. | | annindrodhdaana | | |
| | Exempt foreign organizations - tax withheld at source | 6b | | 0. | | | | |
| | Tax paid with application for extension of time to file (Form 8868) | 6c | | 0. | | | | |
| | Backup withholding erroneously withheld | 6d | | 0. | | | 1 | |
| | Total credits and payments. Add lines 6a through 6d | | | | 7 | | | 0. |
| | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack. | ched | | | 8 | | | 0. |
| | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | > | 9 | | | 24. |
| | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | ▶ | 10 | | | |
| 11 | Enter the amount of line 10 to be: Credited to 2020 estimated tax | | | Refunded ► | 11 | | | |
| Ŗã | rt VII-A Statements Regarding Activities | | | | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legisl | ation or | did it particip | atc or intervene | ın | | ₹ | es No |
| | any political campaign? | | | | | | 1a | X |
| ь | Did it spend more than \$100 during the year (either directly or indirectly) for political purpos | es? See | the instruction | ons for the defini | tion | | 1b | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies o | f any ma | aterials publis | hed or | | | | |
| | distributed by the foundation in connection with the activities. | | | | | | | |
| С | Did the foundation file Form 1120-POL for this year? | | | | | | 1c | X |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the | | | | | | | |
| | (1) On the foundation. > \$ (2) On foundation managers. | ▶ \$. | | 0. | | ŀ | | |
| | Enter the reimbursoment (if any) paid by the foundation during the year for political expendit | urc tax ı | imposed on fe | oundation | | ľ | | |
| | managers > \$O. | | | | | j | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IN | S3 | | | | 1 | 2 | X |
| | If "Yes," attach a detailed description of the activities. | | | | | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing in | nstrumer | nt, articles of | incorporation, or | | | | |
| | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | | | } | 3 | <u> </u> |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year | ? | | | | . , , } | 4a | <u> </u> |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | | | | N | /A | 4b | 17 |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | | | } | 5 254 | X See Seeding |
| | If "Yes," attach the statement required by General Instruction T | | | | | Ì | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit | her: | | | | | | |
| | By language in the governing instrument, or | | | | | 3 | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory | directio | ons that confli | ct with the state | Iaw | ľ | | |
| | remain in the governing instrument? | | | 15 | | } | 6 X | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," compl | ete Part | II, col. (c), ar | nd Part XV | | ŀ | 7 X | * ************************************ |
| | | | | | | 1 | | |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instruction | ns. – | | | | | | |
| _ | TX | 4 | Demonal (== 4= | | | | | |
| | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At | iorney G | senerai (or de | signate) | | | 8b X | |
| | of each state as required by General Instruction G? If "No," attach explanation | st.o 40 - | 40(1)(0) c= 40 | 10(1)(E) for entry | dor | ŀ | 8b X | |
| | Is the foundation claiming status as a private operating foundation within the meaning of sec | | | +∠(J)(⊃) for calci | iuai' | ľ | 320501 5080 | x ~ |
| | year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," comp | | | . 4.4 | | ł | 9 | $\frac{1}{x}$ |
| 10 | Did any persons become substantial contributors during the tax year? if "Yes," attach a schedul | e listing th | ner names and a | OCT 6SS6S | | <u>}</u> | m 990-P | |
| | | | | | | 1 011 | ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | - (2013) |

923531 12-17-19

| ₹Pa | rt VIIA Statements Regarding Activities (continued) | | | |
|------------|---|--|---------------------|----------|
| | | 2003 | Yes | No |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | | |
| | section 512(b)(13)? If "Yes," attach schedule. See instructions | 11 | | Х |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | | | |
| | If "Yes," attach statement. See instructions | 12 | | Х |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | <u> </u> |
| | Website address ► N/A | | | |
| 14 | The books are in care of ▶ RAYMOND HARRIS Telephone no. ▶ 214-34 | <u> 19-5</u> | <u>055</u> | |
| | Located at ▶ 6506 ORCHID LANE, DALLAS, TX ZIP+4 ▶7 | <u>5230</u> | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | | . ▶ | · 🔲 |
| | and enter the amount of tax-exempt interest received or accrued during the year | N | /A | |
| 16 | At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | |
| | securities, or other financial account in a foreign country? | 16 | Conse | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | | | |
| " . | foreign country | | 洲地 | twee a |
| "PE | Statements Regarding Activities for Which Form 4720 May Be Required | 188885 | Vaa | Nia |
| | File Form 4720 if any Item is checked in the "Yes" column, unless an exception applies. | 第75.00 存在数据 | Yes | No |
| 1a | 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 | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No | | | |
| | | | | 293 |
| | (4) | | | |
| | | | 55/2* (1) 01" 3" | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No | | | |
| | | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | |
| | If the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes X No | | | |
| | of fany 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 | 36.752. 1b | 15.300 F | tikisena |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | |
| | E Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | | | |
| | before the first day of the tax year beginning in 2019? | 1c | IARALIA. | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | 83 | 200 | |
| - | defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| 8 | At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines | | | |
| • | 6d and 6e) for tax year(s) beginning before 2019? | | | |
| | If "Yes," list the years | | | |
| ь | Are there any years licted in 2a for which the foundation is not applying the provisions of section 1012(a)(2) (relating to incorrect | 2220 | | |
| | 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. | | | |
| | > | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| | during the year? $oxed{X}$ No | | | |
| b | old "Yes," did it have excess business holdings in 2019 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 Form 4720, | | <i>1</i> 237 | |
| | Schedule C, to determine if the foundation had excess business holdings in 2019) N/A | 3b | | 77 |
| | Did the foundation invest during the year any amount in a manner that would jeopardize its charilable purposes? | 48 | 2 B W W | 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> | v |
| | had not been removed from jeopardy before the first day of the tax year beginning in 2019? | 4b | | X |

| Form 990-PF (2019) THE SPARROW CHARITABLE F | OTINID A WIT ON | | 20-04885 | 5 61 Page 6 |
|---|---|---|---|--|
| Part VII B Statements Regarding Activities for Which I | | equired (contin | | OI Page 6 |
| 5a During the year, did the foundation pay or incur any amount to: | | contin | <u>(#e0)</u> | Yes No |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | n 4045(a)\2 | | es 🗓 No | |
| (2) Influence the outcome of any specific public election (see section 4955); | | | E2 (37) IAO | |
| • | or to carry on, onectily or mone | | es 🗶 No | |
| any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purpose: | . 2 | | es X No | |
| (4) Provide a grant to an introductarior travel, study, or other similar purpose: | | '' | 55 (AL) NO | |
| 4945(d)(4)(A)? See instructions | iii described iii section | | es 🗓 No | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary | or educational nurnoses or f | · | | |
| the prevention of cruelty to children or animals? | , or educational purposes, or i | | es 🗶 No | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur | ider the excentions described | | 23 (21) 110 | |
| section 53 4945 or in a current notice regarding disaster assistance? See instr | | in riegulations | N/A | 5b |
| Organizations relying on a current notice regarding disaster assistance, check | | | | SEA SEA PENE |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f | | ined | | |
| expenditure responsibility for the grant? | | | es 🗌 No | |
| 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 | nav nremiums on | | | |
| a personal benefit contract? | pay promisino on | | es X No | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a | personal benefit contract? | ·· | | 6b X |
| If "Yes" to 6b, file Form 8870. | Jor Sonar Bonone Contract | | *** | ACC CERT ASSA |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax: | helter transaction? | [Y | s 🗓 No 📱 | The state of the s |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu | | | | 7b |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$ | | | | |
| excess parachute payment(s) during the year? | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | es 🗶 No 🖟 | |
| Part VIII Information About Officers, Directors, Trust | occ Foundation Mar | | | |
| Paid Employees, and Contractors | ees, roundation wat | nagers, Hignly | | |
| | heir compensation. | | | |
| Paid Employees, and Contractors | | (c) Compensation (if not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to | heir compensation. (b) Title, and average hours per week devoted | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address | heir compensation. (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and delerred compensation | (e) Expense account, other allowances |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and t (a) Name and address RAYMOND HARRIS | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR | (c) Compensation (If not paid, enter -0-) | compensation | allowances |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 MARYDEL HARRIS 6506 ORCHID LANE | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 | (c) Compensation (If not paid, enter -0-) | compensation | allowances |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 MARYDEL HARRIS | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 DIRECTOR 0.00 | (c) Compensation (If not paid, enter -0-) | compensation | allowances |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 MARYDEL HARRIS 6506 ORCHID LANE DALLAS, TX 75230 STEPHEN R. HARRIS | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 DIRECTOR | (c) Compensation (If not paid, enter -0-) | O . | allowances 0. |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 MARYDEL HARRIS 6506 ORCHID LANE DALLAS, TX 75230 STEPHEN R. HARRIS 6506 ORCHID LANE | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR | (c) Compensation (If not paid, enter -0-) 0. | O. | 0. |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 MARYDEL HARRIS 6506 ORCHID LANE DALLAS, TX 75230 STEPHEN R. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR | (c) Compensation (If not paid, enter -0-) | O . | allowances 0. |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 MARYDEL HARRIS 6506 ORCHID LANE DALLAS, TX 75230 STEPHEN R. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR | (c) Compensation (If not paid, enter -0-) 0. | O. | 0. |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 MARYDEL HARRIS 6506 ORCHID LANE DALLAS, TX 75230 STEPHEN R. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR | (c) Compensation (If not paid, enter -0-) 0. | 0 . 0 . | 0. |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 MARYDEL HARRIS 6506 ORCHID LANE DALLAS, TX 75230 STEPHEN R. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR | (c) Compensation (If not paid, enter -0-) 0. | O. | 0. |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 MARYDEL HARRIS 6506 ORCHID LANE DALLAS, TX 75230 STEPHEN R. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 LIRECTOR | (c) Compensation (If not paid, enter -0-) 0. | 0. 0. | 0 . 0 . 0 . |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 MARYDEL HARRIS 6506 ORCHID LANE DALLAS, TX 75230 STEPHEN R. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 2 Compensation of five highest-paid employees (other than those incompany) and more than \$50,000 | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR 0.00 DIRECTOR | (c) Compensation (If not paid, enter -0-) 0. | 0 . 0 . | 0. |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 MARYDEL HARRIS 6506 ORCHID LANE DALLAS, TX 75230 STEPHEN R. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 2 Compensation of five highest-paid employees (other than those inc | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 DIRECTOR | (c) Compensation (If not paid, enter -0-) 0. 0. | O . O . O . (d) Contributions to employee benefit plans and deferred | 0. 0. 0. (e) Expense account, other |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 MARYDEL HARRIS 6506 ORCHID LANE DALLAS, TX 75230 STEPHEN R. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 2 Compensation of five highest-paid employees (other than those incompany) and more than \$50,000 | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 DIRECTOR | (c) Compensation (If not paid, enter -0-) 0. 0. | O . O . O . (d) Contributions to employee benefit plans and deferred | 0. 0. 0. (e) Expense account, other |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 MARYDEL HARRIS 6506 ORCHID LANE DALLAS, TX 75230 STEPHEN R. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 2 Compensation of five highest-paid employees (other than those incompany) and more than \$50,000 | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 DIRECTOR | (c) Compensation (If not paid, enter -0-) 0. 0. | O . O . O . (d) Contributions to employee benefit plans and deferred | 0. 0. 0. (e) Expense account, other |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 MARYDEL HARRIS 6506 ORCHID LANE DALLAS, TX 75230 STEPHEN R. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 2 Compensation of five highest-paid employees (other than those incompany) and more than \$50,000 | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 DIRECTOR | (c) Compensation (If not paid, enter -0-) 0. 0. | O . O . O . (d) Contributions to employee benefit plans and deferred | 0. 0. 0. (e) Expense account, other |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 MARYDEL HARRIS 6506 ORCHID LANE DALLAS, TX 75230 STEPHEN R. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 2 Compensation of five highest-paid employees (other than those incompany) and more than \$50,000 | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 DIRECTOR | (c) Compensation (If not paid, enter -0-) 0. 0. | O . O . O . (d) Contributions to employee benefit plans and deferred | 0. 0. 0. (e) Expense account, other |
| Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and to (a) Name and address RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 MARYDEL HARRIS 6506 ORCHID LANE DALLAS, TX 75230 STEPHEN R. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 ELIZABETH A. HARRIS 6506 ORCHID LANE DALLAS, TX 75230 2 Compensation of five highest-paid employees (other than those incompany) and more than \$50,000 | heir compensation. (b) Title, and average hours per week devoted to position DIRECTOR 0.00 DIRECTOR | (c) Compensation (If not paid, enter -0-) 0. 0. | O . O . O . (d) Contributions to employee benefit plans and deferred | 0. 0. 0. (e) Expense account, other |

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

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| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndations, | see instructions) |
|----|--|---------------------------|-------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| а | Average monthly fair market value of securities | 1a | 0. |
| b | Average of monthly cash balances | 1b | 147,532. |
| | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 147,532. |
| | Reduction claimed for blockage or other factors reported on lines 1a and | 1 (2) | |
| | 1c (attach detailed explanation) 1e 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 147,532. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 2,213. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 145,319. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 7,266. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here ▶ ☐ and do not complete this part.) | d certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 7,266. |
| 2a | Tax on investment income for 2019 from Part VI, line 5 | | |
| b | Income tax for 2019. (This does not include the tax from Part VI.) | | |
| c | Add lines 2a and 2b | 2c | 24. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 7,242. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 7,242. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 7,242. |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | 1 000 051 |
| a | | 1a | 1,800,351. |
| þ | Program-related investments - total from Part IX-B | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | 4 000 054 |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 1 | 4 | 1,800,351. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | 0.4 |
| | income. Enter 1% of Part I, line 27b | 5 | 24. |
| 6 | Adjusted qualifying distributions Subtract line 5 from line 4 | 6 | 1,800,327. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years. | ualifies fo | r the section |

Page 9

Undistributed Income (see instructions) Part XIII (c) (d) (b) 2018 2019 Years prior to 2018 Corpus 1 Distributable amount for 2019 from Part XI. 7,242. line 7 2 Undistributed income, if any, as of the end of 2019 0. a Enter amount for 2018 only **b** Total for prior years: 0. 3 Excess distributions carryover, if any, to 2019: 988,894. a From 2014 2,479,608. 1,877,537. **b** From 2015 c From 2016 2,479,073. d From 2017 2,000,064. e From 2018 9,825,176. f Total of lines 3a through e 4 Qualifying distributions for 2019 from Part XII, line $4^{\circ} > \$ 1,800,351$. 0 a Applied to 2018, but not more than line 2a b Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 7,242.d Applied to 2019 distributable amount 1,793,109 e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2019 0. 0. must be shown in column (a)) 6 Enter the net total of each column as indicated below: 11,618,285 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0. 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 0. assessed d Subtract line 6c from line 6b. Taxable 0. amount - see instructions e Undistributed income for 2018. Subtract line 0 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election 0. may be required - see instructions) 8 Excess distributions carryover from 2014 988,894 not applied on line 5 or line 7 9 Excess distributions carryover to 2020. 10,629,391 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 2,479,608. a Excess from 2015 1,877,537. b Excess from 2016 2,479,073. c Excess from 2017 2,000,064. d Excess from 2018

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e Excess from 2019

Form 990-PF (2019)

1,793,109

| | | BLE FOUNDAT | | 20-04 | 88561 Page 10 |
|---|---|--|---------------------------|-----------------------------|-------------------|
| Part XIV Private Operating Found | | | A, question 9) | N/A | |
| 1 a If the foundation has received a ruling or dete | | | | | |
| foundation, and the ruling is effective for 201 | 9, enter the date of th | e ruling | ▶ | | |
| b Check box to indicate whether the foundation | is a private operating | foundation described in | | 4942(j)(3)49 |)42(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | _ |
| income from Part I or the minimum | (a) 2019 | (b) 2018 | (c) 2017 | (d) 2016 | (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 | 1 | | | | |
| used directly for active conduct of | 1 | | | | |
| 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 | | | 1 | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter | | | | | |
| 2/3 of minimum investment return shown in Part X, line 6, for each year | | | | | |
| listed | | | | | |
| c "Support" alternative test - enter | į | | | | |
| (1) Total support other than gross | | | | | |
| investment income (interest, | : | | | | |
| dividends, rents, payments on securities loans (section | ļ. | | | | |
| 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public | | | | | |
| and 5 or more exempt organizations as provided in | | | | | |
| section 4942(j)(3)(B)(III) | | | | | |
| (3) Largest amount of support from | | | | | |
| an exempt organization | | | | | |
| (4) Gross investment income | | | | | <u> </u> |
| Part XV Supplementary Informa | | | the foundation | had \$5,000 or mor | e in assets |
| at any time during the y | ear-see instru | ctions.) | | | |
| 1 Information Regarding Foundation Ma | • | | | | |
| a List any managers of the foundation who have year (but only if they have contributed more t | e contributed more th han \$5,000). (See sec | an 2% of the total contri ction 507(d)(2)) | butions received by the | foundation before the clos | e of any tax |
| SEE STATEMENT 4 | | | | | |
| b List any managers of the foundation who own | | | or an equally large porti | on of the ownership of a pa | rtnership or |
| other entity) of which the foundation has a 10 | % or greater interest. | | | | |
| NONE | | | | | |
| 2 Information Regarding Contribution, C | | | | | |
| Check here $\triangleright X$ if the foundation only method the foundation makes gifts, grants, etc., to income | | | | | sts for funds. If |
| | | | | | |
| a The name, address, and telephone number or | email address of the | person to whom applica | itions should be addres | sed: | |
| | | | | | |
| b The form in which applications should be sub | mitted and information | on and materials they sho | ould include: | | |
| c Any submission deadlines; | | | | | |
| | h oo bu sassassas | nrnon obsertable fielde i | undo of partituitions == | other factors: | |
| d Any restrictions or limitations on awards, suc | n as by geographical | areas, charnaoid ficios, l | นเกษร อา เกรนเนนยกร, 01 | omer faciells. | |
| | | | | | |

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THE SPARROW CHARITABLE FOUNDATION

Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated. | ter gross amounts unless otherwise indicated Unrelated business income Excluded by section 512, 513, or 514 | | (e) ' | | |
|---|---|---------------------------------------|--|--|--|
| Eliter gross amounts unless unlerwise molected. | (a) Business | (b) Amount | (C) Exclu- sion | (d) Amount | Related or exempt function income |
| 1 Program service revenue: | code | Amount | code | Amount | Tunction income |
| a | | | | | |
| b | | | | | |
| c | | | ļ | | |
| d | | | <u> </u> | | |
| e | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | 14 | 3,654. | |
| 4 Dividends and interest from securities | | · | | | |
| 5 Net rental income or (loss) from real estate: | | STEPPEN AND ST | | | |
| a Debt-financed property | G. 1. 27.0 (2007) + 4 - 2 | MC WOOD COOP A P TANKE S | 144-A #3 | Carl Martin The Design of Strang Strains | The state of the state of the state of |
| | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | 1 | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | ├ | | |
| 9 Net income or (loss) from special events | | | <u> </u> | | |
| 10 Gross profit or (loss) from sales of inventory | ļ | | | | |
| 11 Other revenue: | 1 | | | | |
| a | | | | | |
| b | | | | | |
| C | ļ | | | | |
| d | | | | | |
| e | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | ESSENCE. | 0. | ¥23. | 3,654. | 0. |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 3,654. |
| (See worksheet in line 13 instructions to verify calculations) | | | | | |
| Part XVI:B Relationship of Activities to | o the Acco | mnlishment of Exe | emnt | Purposes | |
| Treationship of Activities to | o the Acce | | | | |
| Line No. Explain below how each activity for which inco | me is reported | ın column (e) of Part XVI-A | contrit | outed importantly to the accord | nplishment of |
| the foundation's exempt purposes (other than | by providing fu | nds for such purposes). | | | |
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| | | | | | Form 990-PF (2019) |

923621 12-17-19

| Form 9 | 990-PF (2 | 019) THE S | PARROW C | HARITAB | LE FOUNDATION | 1 | 20-0 | 488561 | Pa | age 13 |
|----------|------------------|--|------------------------|-----------------------|---------------------------------------|---------------------------------------|--------------------------------|----------------------------|-------------|---------------|
| Par | t XVII | | | | nd Transactions ar | | nips With Nonch | naritable | | |
| | | Exempt Organ | izations | | | | | | | , |
| 1 (| Old the or | ganization directly or indi | rectly engage in ar | ny of the followin | ig with any other organization | on described in sec | tion 501(c) | | Yes | No |
| (| other that | n section 501(c)(3) organ | nizations) or in sec | tion 527, relating | to political organizations? | | | | 1 | |
| a | Fransfers | from the reporting found | ation to a nonchari | itable exempt org | ganization of, | | | I meanalm | ressignand | 110 25 500 1 |
| (| 1) Cash | | | | | | | 1a(1) | ļ | X |
| (| 2) Other | assets | | | | | | 1a(2) | L | X |
| ь (| Other tran | sactions; | | | | | | | | |
| (| 1) Sales | of assets to a noncharita | ble exempt organi | zation | | | | 1b(1) | ļ | X |
| (| 2) Purch | nases of assets from a no | ncharitable exemp | t organization | | | | 1b(2) | <u> </u> | X |
| (| 3) Renta | il of facilities, equipment, | or other assets | | | | | 1b(3) | | X |
| (| 4) Reiml | bursement arrangements | | | | | | 1b(4) | _ | X |
| (| 5) Loans | s or loan guarantees | | | | | | 1b(5) | 1 | X |
| (| 6) Perfo | rmance of services or me | embership or fundi | raising solicitatio | ns | | | 1b(6) | | X |
| c S | Sharing of | f facilities, equipment, ma | uling lists, other as | ssets, or paid em | ployees | | | 1c | | X |
| | | | | | dule. Column (b) should alv | | | | sets, | |
| (| or service: | s given by the reporting f | oundation. If the fo | oundation receive | ed less than fair market valu | e in any transaction | n or sharing arrangeme | nt, show in | | |
| | column (d |) the value of the goods, | , | | | | | | | |
| (a) Lin | e no | (b) Amount involved | (c) Name | | e exempt organization | (d) Description | on of transfers, transactions, | , and sharing arr | angemer | nts |
| | | | <u> </u> | N/A | | | | | | |
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| | | | J | | | | | | | |
| | | - | • | | or more tax-exempt organi | zations described | | | তি | ∃ No |
| | | 501(c) (other than section | | section 5277 | | | | Yes | (7 | NO |
| <u> </u> | f "Yes," co | omplete the following sch (a) Name of org | | | (b) Type of organization | · · · · · · · · · · · · · · · · · · · | (c) Description of rela | tionshin | | |
| | | <u>\./</u> | Janization | | (b) Type of organization | | (c) Description of rela | tionsinp | | |
| | | N/A | | | | | | | | |
| | | | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| | | | | | | | · | · · · · · - | | _ |
| | | / | | | | | | | | |
| | Under | penalties of per try, I declare t | that I have examined t | his return, including | accompanying schedules and st | atements, and to the b | est of my knowledge | | | |
| Sig | Londible | | | | taxpayer) is based on all information | | | May the IRS return with th | e prepar | er |
| Her | | Mixte | 30000 | ~/ | 3/20/20 | PRESI | DENT | shown below | | su No |
| | | ature of officer or trustee | | | Date | Title | | | - | .10 |
| | [J.g. | Print/Type preparer's na | | Preparer's s | | Date | Check If P | TIN | | |
| | | | ÷ | 00 | | | self- employed | | | |
| Paid | d | JUSTIN W. | REEVES | (JX | WX | 03/17/2020 | | P01248 | 048 | |
| Pre | parer | Firm's name ► WEA | | TIDWELL | | · | Firm's EIN ► 75 | | | |

Phone no. 972.490.1970

Preparer **Use Only**

Firm's address ► 2300 N. FIELD ST., STE. 1000 DALLAS, TX 75201

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Name of the organization

Employer identification number

THE SPARROW CHARITABLE FOUNDATION

20-0488561

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF

X 501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributors

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year **▶** \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)



Name of organization

Employer identification number

| THE S | PARROW CHARITABLE FOUNDATION | 20 |)-0488561 |
|------------|--|----------------------------|---|
| Part I | Contributors (see instructions) Use duplicate copies of Part I if additional | space is needed | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | RAYMOND HARRIS 6506 ORCHID LANE DALLAS, TX 75230 | \$ 1,800,000. | Person X Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Omnicash Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions) |

Name of organization

Employer identification number

THE SPARROW CHARITABLE FOUNDATION

20-0488561

| Part II | Noncash Property (see instructions) Use duplicate copies of Part II i | if additional space is needed | |
|------------------------------|---|--|----------------------|
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | - - - - - - - - - - | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | - - - - s | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | - - - - - - - - - - | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | - - - - - - - - - | |

923454 11-06-19

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

Relationship of transferor to transferee

| FORM 990-PF INTEREST ON SAVI | INGS AND TEM | PORARY (| CASH II | NVESTMENTS | STATEMENT 1 |
|----------------------------------|------------------------------|----------|---------------------------------|------------------------------|-------------------------------|
| SOURCE | (A) REVENUE PER BOOKS | | (B) NET INVESTMENT INCOME | | (C) ADJUSTED NET INCOME |
| INDEPENDENT BANK | | 3,654. | 3,654. | | |
| TOTAL TO PART I, LINE 3 | | 3,654. | | 3,654. | |
| FORM 990-PF | ACCOUNTI | NG FEES | | | STATEMENT 2 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | | EST- | (C) ADJUSTED NET INCOM | |
| ACCOUNTING FEES | 2,524. | 1,262. | | | 1,262. |
| TO FORM 990-PF, PG 1, LN 16B | 2,524. | 1 | ,262. | | 1,262. |
| FORM 990-PF | TAXES | | | STATEMENT 3 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | | EST- | (C) ADJUSTED NET INCOM | |
| EXCISE TAX | 11. | | 0. | | 0. |
| - TO FORM 990-PF, PG 1, LN 18 | 11. | | 0. | | 0. |

FORM 990-PF PART XV - LINE 1A STATEMENT 4
LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

RAYMOND HARRIS MARYDEL HARRIS