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OMB No. 1545-0052

## Return of Private Foundation

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

2019 Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public. Open to Public ▶ Go to www.irs.gov/Form990PF for instructions and the latest information. Inspection For calendar year 2019, or tax year beginning 01-01-2019 , and ending 12-31-2019 A Employer identification number THE MERICE BOO JOHNSTON GRIGSBY 20-8091007 FOUNDATION Number and street (or P.O. box number if mail is not delivered to street address) 15635 AIRLINE HIGHWAY B Telephone number (see instructions) (225) 753-5857 City or town, state or province, country, and ZIP or foreign postal code BATON ROUGE, LA  $\,$  70817  ${f C}$  If exemption application is pending, check here ☐ Initial return ☐ Initial return of a former public charity G Check all that apply: **D 1.** Foreign organizations, check here....... 2. Foreign organizations meeting the 85% test, check here and attach computation ... Amended return ☐ Final return Address change ☐ Name change If private foundation status was terminated ☑ Section 501(c)(3) exempt private foundation **H** Check type of organization: under section 507(b)(1)(A), check here ......  $\square$  Section 4947(a)(1) nonexempt charitable trust  $\square$  Other taxable private foundation I Fair market value of all assets at end J Accounting method: ✓ Cash ☐ Accrual If the foundation is in a 60-month termination of year (from Part II, col. (c), under section 507(b)(1)(B), check here ...... ☐ Other (specify) line 16) ▶\$ 5,746,071 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The total Disbursements Revenue and (b) Net investment (c) Adjusted net for charitable of amounts in columns (b), (c), and (d) may not necessarily expenses per books income equal the amounts in column (a) (see instructions).) (cash basis only) Contributions, gifts, grants, etc., received (attach 560,000 schedule) Check  $\blacktriangleright$   $\bigsqcup$  if the foundation is **not** required to attach 2 3 Interest on savings and temporary cash investments Dividends and interest from securities 110,627 110,627 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 34,927 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain . . . . Income modifications . 10a Gross sales less returns and allowances Less: Cost of goods sold Gross profit or (loss) (attach schedule) c Other income (attach schedule) 11 Total. Add lines 1 through 11 705,554 145,554 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees (attach schedule) . . . 5,530 2,765 Accounting fees (attach schedule) Other professional fees (attach schedule) [چە 3,446 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 21 Travel, conferences, and meetings 22 Printing and publications . . 23 Other expenses (attach schedule) 28,915 28.915 24 Total operating and administrative expenses. Add lines 13 through 23 . . . . 37,891 31,926 552,916 552,916 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 590,807 31,926 552,916 27 Subtract line 26 from line 12: Excess of revenue over expenses and 114,747 disbursements Net investment income (if negative, enter -0-)

Adjusted net income (if negative, enter -0-) . . .

Attached schedules and amounts in the description column

Beginning of year

Page 2

End of year

4,937,246

4,937,246

4,937,246

1 2

3

4

5

6

4,822,499

4,937,246

4,937,246 Form **990-PF** (2019)

0

114,747

4,822,499

4,822,499 4,822,499

		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			_
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			_
		Less: allowance for doubtful accounts ▶			
s.	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	<b>10</b> a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe )			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	4,822,499	4,937,246	5,746,071
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			
≝	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
-	22	Other liabilities (describe )			
	23	Total liabilities(add lines 17 through 22)	0	0	
Ņ		Foundations that follow FASB ASC 958, check here ▶			

Net Assets or Fund Balance and complete lines 24, 25, 29 and 30.

24

25

26

27

28

29

30

Part III

2

3

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Accounts receivable

Pledges receivable

Less: allowance for doubtful accounts ▶

Net assets without donor restrictions . . .

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Capital stock, trust principal, or current funds . . . . . . . . . .

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

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

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year-Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

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

Net assets with donor restrictions .

and complete lines 26 through 30.

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

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Part II

3

4

Page **3** 

- Capital Cams	and Losses for Tax on Thivest		1		T
	e the kind(s) of property sold (e.g., rehouse; or common stock, 200 shs	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1aSee Additional Data Table					
b					
c					
d					
e					
(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	h) r (loss) ) minus (g)
a See Additional Data Tabl	e				
b					
c					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69	,	T)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	( <b>k)</b> of col. (i) l. (j), if any	Gains (Col. ( col. (k), but not	h) gain minus less than -0-) <b>or</b> om col.(h))
<ul> <li>a See Additional Data Table</li> </ul>		3,5,55	(3)//	`	( //
b	-				
c					
d					
e					
		If gain, also enter in F	Part I line 7		
	gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi		J	3	34,927
Part V Qualification U	Jnder Section 4940(e) for Re	educed Tax on Net	Investment I	ncome	
(For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	et investment inco	me.)	
If section 4940(d)(2) applies, le	·	( )		_	
If "Yes," the foundation does no	e section 4942 tax on the distributa ot qualify under section 4940(e). Do	not complete this part	•		es 🗹 No
	nount in each column for each year;	see instructions before	e making any entri		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	<b>(d)</b> Distribution rat (col. (b) divided by c	
2018	919,660		5,214,845		0.176354
2017	1,170,250		4,817,151		0.242934
2016	738,000		3,561,250		0.207231
2015	804,556		2,636,804		0.305125
2014	1,043,575		2,351,923		0.443711
2 Total of line 1, column (d	<i>'</i>				1.375355
number of years the four	o for the 5-year base period—divide Indation has been in existence if less Incharitable-use assets for 2019 fron	than 5 years	.0, or by the 3		0.275071 5,327,750
<b>5</b> Multiply line 4 by line 3			5		1,465,510
<b>6</b> Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		1,136
<b>7</b> Add lines 5 and 6			7		1,466,646
8 Enter qualifying distributi	ons from Part XII, line 4 ,		8		552,916
	eater than line 7, check the box in Pa				

Form	990-PF (2019)									F	age <b>6</b>	
Pa	rt VII-B State	ements Regard	ling	Activities for Which	Form 4720 May Be	Required (continue	ed)					
5a	During the year d	id the foundation	n pay or incur any amount to:									
	(1) Carry on prop	oaganda, or otherv	vise a	ttempt to influence legisl	<b>✓</b>	Na						
	(2) Influence the	outcome of any s	ecific	public election (see sect	tion 4955); or to carry	□ res	•	NO				
	on, directly or	r indirectly, any vo	ter re	gistration drive?		· · 🗌 Yes		No				
	(3) Provide a gra	nt to an individual	for tr	avel, study, or other sim	ilar purposes?	Yes		No				
		-		·	c., organization described			NO				
				eligious, charitable, scien		· · L Yes	<b>✓</b>	No				
				=	ren or animals?							
b	•		•	•	ail to qualify under the ex	⊔ Yes	✓	No				
_	•			=	ter assistance? See instr				5b			
	=				ance check here	_	_					
c	-	-		does the foundation clair			Ш					
_		•			?							
		· ·		y Regulations section 53.		· · L Yes	Ш	No				
6a	Did the foundation	n, during the year,	rece	ive any funds, directly or	indirectly, to pay premit	ıms on						
	a personal benefit	t contract?				· Tyes	<b>✓</b>	No				
b	Did the foundation	n, during the year,	pay	premiums, directly or inc	lirectly, on a personal be	nefit contract?			<b>6</b> b		No	
	If "Yes" to 6b, file	Form 8870.										
7a	At any time during	g the tax year, wa	s the	foundation a party to a p	prohibited tax shelter tran	nsaction? Yes	<b>✓</b>	No				
b	If "Yes", did the fo	oundation receive	any p	roceeds or have any net	income attributable to th	ne transaction?			7b		<u> </u>	
8		-			of more than \$1,000,000							
	excess parachute	payment during tl	ne yea	ar?		· · 🗌 Yes	<b>✓</b>	No			<u> </u>	
Pa		mation About ( ontractors	Offic	ers, Directors, Trust	tees, Foundation Ma	inagers, Highly Pa	id Er	nplo	yees,	,		
_1_	List all officers,	directors, truste	$\overline{}$		nd their compensation.		L .	Т				
	(a) Name and	l address	(	<ul><li>b) Title, and average hours per week</li></ul>	(c) Compensation (If not paid, enter	(d) Contributions employee benefit plan				se acc		
	(a) Hame and	i dadi ess		devoted to position	-0-)	deferred compensat		0	ther a	llowand	es	
L LAN	E GRIGSBY			D MEMBER	0		С				0	
	AIRLINE HIGHWAY		0.00									
	N ROUGE, LA 70817		DOAD	D MEMBER								
	GRIGSBY MORAN  5 AIRLINE HIGHWAY		10.00	LD MEMBER )	0		C	'			0	
	N ROUGE, LA 70817											
TODD	WILLIAM GRIGSBY			D MEMBER	0		C				0	
	AIRLINE HIGHWAY		10.00	)								
	N ROUGE, LA 70817				_							
	A GRIGSBY SANCHEZ		25.00	D MEMBER	0		C	7			0	
	5 AIRLINE HIGHWAY N ROUGE, LA 70817											
2	Compensation o	f five highest-pa	id en	ployees (other than t	hose included on line 1	-see instructions).	If no	ne, e	nter "	NONE	."'	
				(b) Title, and average		(d) Contributions						
(a)	Name and address more thar		paid	hours per week	(c) Compensation	employee benefi plans and deferre				se acco lowano		
	more than	1 \$50,000		devoted to position		compensation	u	Ol	ner an	owanc	25	
NON	 E					'						
							1					
							1					
							+					
Tota	I number of other	employees paid av	or of F	 n			$\rightarrow$					
	. Hamber of other t	omployees paid ov	ci po	0,000		· · · · · · · ·		E^-	m 00	0-PE	(2019)	

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional servic	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produ		r of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see i	nstructions)	
Describe the two largest program-related investments made by the foundation during the	<u> </u>	Amount
1	,	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		• o
Total Add Into I through 5		Form <b>990-PF</b> (2019)

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

Page 8

5.327.750

266.388

266,388

2.273

264,115

264.115

264.115

552,916

552.916

552.916

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5

6

2c

3

4

5

6

7

1a

1b

2

За 3h

4

5

2.273

Form 990-PF (2019)

Part X

5

6

1

2a

3

4 5

6

1

2

3

4

5

b

Part XII

Part XI

d	Total (add lines 1a, b, and c)	1d	5,408,883
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	(
3	Subtract line 2 from line 1d	3	5,408,883

Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see 4 81,133

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign

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

2a

2b

Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4

Distributable amount before adjustments. Subtract line 2c from line 1. . . . . . . . . . . . . . . .

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . . . . . . . . . .

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

organizations check here 

and do not complete this part.)

Tax on investment income for 2019 from Part VI, line 5. . . . . .

Income tax for 2019. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

264,115

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Part XIII	Undistributed Income (see instruc	tions)					

a From 2014. . . . .

**b** From 2015. . . . . . . **c** From 2016. . . . . .

d From 2017. . . . .

e From 2018. . . . .

1 Distributable amount for 2019 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2019:
a Enter amount for 2018 only. . . . . .
b Total for prior years: 20\_\_\_\_, 20\_\_\_\_, 20\_\_\_\_
3 Excess distributions carryover, if any, to 2019:

f Total of lines 3a through e. . . . . . . .

d Applied to 2019 distributable amount. . . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a).)

**5** Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

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

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

Subtract lines 7 and 8 from line 6a . . . .

9 Excess distributions carryover to 2020.

**10** Analysis of line 9: **a** Excess from 2015. . .

**b** Excess from 2016. .

c Excess from 2017. . . .

d Excess from 2018. . .

e Excess from 2019. . .

6 Enter the net total of each column as

**b** Prior years' undistributed income. Subtract c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . **d** Subtract line 6c from line 6b. Taxable amount —see instructions . . . . . . . . . . . . . . . . e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . . . . . f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must 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 may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2014 not

indicated below:

4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ 552,916
 a Applied to 2018, but not more than line 2a
 b Applied to undistributed income of prior years (Election required—see instructions).
 c Treated as distributions out of corpus (Election required—see instructions).

(a)

Corpus

3,756,633

288.801

4,045,434

929.594

3,115,840

929,594 672,819

561 044

931,305 661,871

672,819 561,044

931.305

661.871

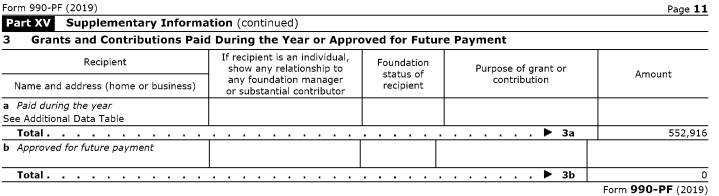
288.801

(b)

Years prior to 2018

(c)

2018



ter gros	s amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section		(e) Related or exempt
_	n service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
f						
<b>g</b> Fees	and contracts from government agencies					
	ership dues and assessments					
Intere:	st on savings and temporary cash ments					
Divide	nds and interest from securities			14	110,627	
Net re	ntal income or (loss) from real estate:					
	-financed property					
	debt-financed property					
	ntal income or (loss) from personal property investment income.					
	r (loss) from sales of assets other than					
invent				18	34,927	
Net in	come or (loss) from special events:				- 1/	
Gross	profit or (loss) from sales of inventory					
Other	revenue: a					
e _						
	and Add and common (b) (d) and (a)				145 554	
	al. Add columns (b), (d), and (e)		0	1	145,554	
Subtot <b>Total.</b>	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations.)			145,554 <b>3</b>	
Subtoo Total. (See w	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to the	lations.) le Accomplis	hment of Exem	ot Purposes	3	145,554
Subton Total. (See w	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See wart XV	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See wart XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Irt XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Irt XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Irt XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Irt XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Int XV	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Int XV	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Irt XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Irt XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Irt XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Irt XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See wart XV	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Irt XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Irt XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Irt XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Irt XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Irt XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Irt XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Irt XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See w Irt XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See wart XV ne No.	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554
Subton Total. (See wart XV	orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplis income is report	hment of Exempleted in column (e) of	ot Purposes Part XVI-A contribu	3	145,554

orm 9	90-PF	· ,									Pa	ge <b>13</b>
	: XVII	Exempt Organi	zations						nships With Nonc			
		ganization directly or in than section 501(c)(3)								n 501	Yes	No
a Tra	nsfers	from the reporting foun	dation to a no	nchai	ritable exe	mpt organizatio	n of:					
(1	<b>)</b> Cash									1a(1)		No
•	-	rassets								. 1a(2)		No
		nsactions:										l
-	-	s of assets to a nonchari	•	-						. 1b(1)		No
-	-	hases of assets from a n al of facilities, equipmer								. 1b(2)		No No
-	-	ibursement arrangemen	•							1b(4)		No
•	-	s or loan guarantees.								. 1b(5)		No
(6	<b>)</b> Perfor	rmance of services or m	embership or	fundr	aising soli	citations				1b(6)		No
c Sh	aring of	f facilities, equipment, n	nailing lists, o	ther a	assets, or p	paid employees.				. 1c		No
of in	the goo any tra	wer to any of the above ods, other assets, or sern nsaction or sharing arra	vices given by ngement, sho	the row in o	reporting f column <b>(d</b>	oundation. If the ) the value of th	e foundatione e goods, c	on receive other asse	d less than fair marke ts, or services receive	et value ed.		
(a) Lin	e No.	(b) Amount involved	(c) Name of r	noncha	ritable exen	npt organization	(d) Des	scription of	transfers, transactions, a	and sharing arra	ngemer	nts
<b>2a</b> Is	the fou	ndation directly or indire	ı ectly affiliated	with.	or related	to, one or more	e tax-exen	not organ	izations			
		in section 501(c) (other	•	,				,		✓ No		
		complete the following so		,	,, ,,							
		(a) Name of organization	on		(b	) Type of organizat	tion	1	(c) Description o	f relationship		
<b>6</b> :	of m	ler penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, co									
Sign Here		*****				2020-11-13		*****		May the IRS di return with the prepa		
		Signature of officer or to	rustee			Date	7.	Title		below (see instr.)	Yes [	□ <sub>No</sub>
		Print/Type preparer's	name	Prepa	arer's Sign	ature	Date			ΓΙΝ		
									Check if self-	P00447	7668	
Paid		SHANNON WASCO	М СРА				2020	-11-13	employed ▶ Ш			
	oarer Only		NIS T BOURG	EOIS	LLP				Fil	rm's EIN ▶72	-06367	725
			22 TREMONT	DR						(22	١ ٥٥٥	4776
BATON ROUGE, LA 70809						Pr	none no. (225	) 928-	4//0			

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation MERRILL LYNCH Ρ 2019-01-01 2019-12-31 WHITNEY - 882 Р 2019-01-01 2019-12-31 WHITNEY - 346 Р 2019-01-01 2019-12-31 WHITNEY - 569 Р 2019-01-01 2019-12-31 Ρ MERRILL LYNCH 2019-01-01 2019-12-31 CHARLES SCHWAB 2019-01-01 2019-12-31 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) (f) 165,207 163,226 1,981 1,755,928 1,779,499 -23,571273,337 323,809 -50,472 1,071,544 1,055,683 15,861 363.899 276,186 87,713 3,415 3,415 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (i) as of 12/31/69 (k) over col. (j), if any 1,981 -23,571 -50.47215,861 87,713

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

501(C)(3)

TO FURTHER THE EXEMPT

ORGANIZATION

PURPOSES OF THE RECIPIENT

▶ 3a

5,000

552,916

any foundation manager

or substantial contributor

NONE

Name and address (home or business)

AMERICAN CANCER SOCIETY

BATON ROUGE, LA 70810

10528 KENTSHIRE CT

Total .

	or substantial contributor			
a Paid during the year				
ALS ASSOCIATION - LAMS CHAPTER 11725 INDUSTRIPLEX BLVD SUITE 3 BATON ROUGE, LA 70809	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	5,000
ALZHEIMER SERVICES OF BR 3772 NORTH BLVD SUITE B BATON ROUGE, LA 70806	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	5,000

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

PURPOSES OF THE RECIPIENT

▶ 3a

552,916

ORGANIZATION

any foundation manager

or substantial contributor

Name and address (home or business)

100 NORTH ST STE 900

Total .

BATON ROUGE, LA 70802

	or substantial contributor			
a Paid during the year				
AMIKIDS BATON ROUGE 5555 BEECHWOOD DR BATON ROUGE, LA 70805	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	10,000
ARC BATON ROUGE 12616 JEFFERSON HWY BATON ROUGE, LA 70816	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	5,000
BATON ROUGE AREA FOUNDATION	NONE	501(C)(3)	TO FURTHER THE EXEMPT	30,000

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

any foundation manager

or substantial contributor

Name and address (home or business)

	or substantial continuator			
a Paid during the year				
BIG BUDDY PROGRAM1415 MAIN ST BATON ROUGE, LA 70802	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	10,000
BREADA501 N 5TH ST BATON ROUGE, LA 70802	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT	5,000

			ORGANIZATION	
BREADA501 N 5TH ST BATON ROUGE, LA 70802	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	5,000
CANCER SERVICES INC	NONE	501(C)(3)	TO FURTHER THE EXEMPT	2 00

BATON ROUGE, LA 70802	NONE	501(C)(3)	PURPOSES OF THE RECIPIENT ORGANIZATION	5,000
CANCER SERVICES INC 550 LOBDELL AVE BATON ROUGE, LA 70806	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	2,000

			ORGANIZATION	
CANCER SERVICES INC 550 LOBDELL AVE BATON ROUGE, LA 70806	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	2,000
Total			▶ 3a	552,916

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

PURPOSES OF THE RECIPIENT

▶ 3a

552,916

ORGANIZATION

any foundation manager

Name and address (home or husiness)

NEW ORLEANS, LA 70113

Total .

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
CAPITAL AREA UNITED WAY 700 LAUREL ST BATON ROUGE, LA 70802	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	5,000
CAREER COMPASS 17425 JEFFERSON HWY SUITE G BATON ROUGE, LA 70817	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	70,416

BATON ROUGE, LA 70802			ORGANIZATION	
CAREER COMPASS 17425 JEFFERSON HWY SUITE G BATON ROUGE, LA 70817	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	70,416
CITY YEAR805 HOWARD AVE	NONE	501(C)(3)	TO FURTHER THE EXEMPT	100,000

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 5,000

CYSTIC FIBROSIS FOUNDATION 10532 SOUTH GLENSTONE PLACE SUITE C BATON ROUGE, LA 70810	NONE	501(C)(3)	PURPOSES OF THE RECIPIENT ORGANIZATION	
DYSLEXIA RESOURCE CENTER	NONE	501(C)(3)	TO FURTHER THE EXEMPT	

Total .

SUITE C BATON ROUGE, LA 70810			ORGANIZATION	
DYSLEXIA RESOURCE CENTER 3172 GOVERNMENT ST BATON ROUGE, LA 70806	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	5,000
GARDERE COMMUNITY CHRISTIAN SCHOOL 8538 GRSI AVE	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	10,000

BATON ROUGE, LA 70806			ORGANIZATION	
GARDERE COMMUNITY CHRISTIAN SCHOOL 8538 GRSI AVE BATON ROUGE, LA 70810	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	10,000

GARDERE COMMUNITY CHRISTIAN SCHOOL 8538 GRSI AVE BATON ROUGE, LA 70810	NONE	\ - / \ - /	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	10,000

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

	or substantial contributor			
a Paid during the year				
GREATER BATON ROUGE HOPE ACADEMY 153333 JEFFERSON HWY	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	10,000

BATON ROUGE, LA 70817			51(6) (112E) (126) (1	
HOSPICE OF BATON ROUGE 3600 FLORIDA BLVD BATON ROUGE, LA 70806	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	5,000

3600 FLORIDA BLVD BATON ROUGE, LA 70806			PURPOSES OF THE RECIPIENT ORGANIZATION	,
JDRF INTERNATIONAL LA CHAPTER 200 VESEY ST 28TH FLOOR	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT	5,000

BATON ROUGE, LA 70806			ORGANIZATION	
JDRF INTERNATIONAL LA CHAPTER 200 VESEY ST 28TH FLOOR NEW YORK, NY 10281	NONE	\ - / \ - /	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	5,000

3a

552,916

,				
JDRF INTERNATIONAL LA CHAPTER 200 VESEY ST 28TH FLOOR NEW YORK, NY 10281	NONE	( - )( - )	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	5,00

Total .

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year JUNIOR ACHIEVEMENT OF GREATER NONE 501(C)(3) TO FURTHER THE EXEMPT 5,000 BATON ROUGE PURPOSES OF THE RECIPIENT 7809 JEFFERSON HWY ORGANIZATION BATON ROUGE, LA 70809

LOUISIANA ARTS & SCIENCE MUSEUM INC 100 RIVER ROAD SOUTH BATON ROUGE, LA 70802	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	4,500
LOUISIANA WILDLIFF FEDERATION	NONE	501(C)(3)	TO FURTHER THE EXEMPT	8 000

INC 100 RIVER ROAD SOUTH BATON ROUGE, LA 70802			PURPOSES OF THE RECIPIENT ORGANIZATION	
LOUISIANA WILDLIFE FEDERATION 337 S ACADIAN THRUWAY	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT	8,00

100 RIVER ROAD SOUTH BATON ROUGE, LA 70802			ORGANIZATION	
LOUISIANA WILDLIFE FEDERATION 337 S ACADIAN THRUWAY	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT	8,00

BATON ROUGE, LA 70806			ORGANIZATION	
337 S ACADIAN THRUWAY			PURPOSES OF THE RECIPIENT	
LOUISIANA WILDLIFE FEDERATION	NONE	501(C)(3)	TO FURTHER THE EXEMPT	8,00

552,916

337 S ACADIAN THRUWAY BATON ROUGE, LA 70806		PURPOSES OF THE RECIPIENT ORGANIZATION	
			i e

Total . .

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

a Paid during the year				
MCMAINS CHILDREN'S DEVELOPMENTAL CENTER 1805 COLLEGE DRIVE BATON ROUGE, LA 70808	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	15,000
MENTAL HEALTH ASSOCIATION	NONE	501(C)(3)	TO FURTHER THE EXEMPT	3,500

BATON ROUGE, LA 70808				
MENTAL HEALTH ASSOCIATION 544 COLONIAL DRIVE BATON ROUGE, LA 70806	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	3,500
MUSCULAR DYSTROPHY ASSOCIATION 222 S RIVERSIDE PLAZA STE 1500	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT	5,000

544 COLONIAL DRIVE BATON ROUGE, LA 70806			PURPOSES OF THE RECIPIENT ORGANIZATION	
MUSCULAR DYSTROPHY ASSOCIATION 222 S RIVERSIDE PLAZA STE 1500 CHICAGO, IL 60606	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	5,000

MUSCULAR DYSTROPHY ASSOCIATION 222 S RIVERSIDE PLAZA STE 1500 CHICAGO, IL 60606	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	5,000
Total			▶ 3a	552,916

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

a Paid during the year				
NATIONAL MULTIPLE SCLEROSIS SOCIETY 733 THIRD AVENUE NEW YORK, NY 10017	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	1,500
NEW SCHOOLS FOR BATON ROUGE	NONE	501(C)(3)	TO FURTHER THE EXEMPT	100,000

NEW YORK, NY 10017				
NEW SCHOOLS FOR BATON ROUGE 100 LAFAYETTE ST 2ND FLOOR BATON ROUGE, LA 70801	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	100,000
OPERA LOUISIANE529 CONVENTION ST BATON ROUGE, LA 70802	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT	2,500

NEW SCHOOLS FOR BATON ROUGE 100 LAFAYETTE ST 2ND FLOOR BATON ROUGE, LA 70801	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	100,00
OPERA LOUISIANE529 CONVENTION ST BATON ROUGE, LA 70802	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	2,50

Total .

BATON ROUGE, LA 70801		ORGANIZATION	
OPERA LOUISIANE529 CONVENTION ST BATON ROUGE, LA 70802	NONE	 TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	2,50
			í

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PLAYMAKERS OF BATON ROUGE NONE 501(C)(3) TO FURTHER THE EXEMPT 2,500 10 TOWER DRIVE PURPOSES OF THE RECIPIENT

BATON ROUGE, LA 70808

Total .

•				
SEXUAL TRAUMA AWARENESS & RESPONSE CENTER 5165 CORPORATE BLVD STE 200 BATON ROUGE, LA 70808	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	1,000
CT TUDE CUT DOENIC DECEADOU	NONE	F04/6\/3\	TO FURTUED THE EVENDT	10,000

ORGANIZATION

За

BATON ROUGE, LA 70808				
ST JUDE CHILDREN'S RESEARCH HOSPITAL 262 DANNY THOMAS PLACE MEMPHIS, TN 38105	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	10,000

ST JUDE CHILDREN'S RESEARCH HOSPITAL	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT	10,00
262 DANNY THOMAS PLACE			ORGANIZATION	
MEMPHIS, TN 38105				

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

_ ,				
ST LILLIAN'S ACADEMY 9755 GOODWOOD BLVD BATON ROUGE, LA 70815	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	2,000
TEACH FOR AMERICA OF SOUTH LOUISIANA	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT	50,000

DATON ROOGE, EA 70015			ORGANIZATION	
TEACH FOR AMERICA OF SOUTH LOUISIANA 501 GOVERNMENT ST SUITE 100 BATON ROUGE, LA 70802	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	50,000
THE EMERGE FOUNDATION 7784 INNOVATION PARK DR	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT	50,000

501 GOVERNMENT ST SUITE 100 BATON ROUGE, LA 70802			ORGANIZATION	
THE EMERGE FOUNDATION 7784 INNOVATION PARK DR BATON ROUGE, LA 70820	NONE	501(C)(3)	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	50,000

BATON ROUGE, LA 70002				
THE EMERGE FOUNDATION 7784 INNOVATION PARK DR BATON ROUGE, LA 70820	NONE	( - ) ( - )	TO FURTHER THE EXEMPT PURPOSES OF THE RECIPIENT ORGANIZATION	50,000

Total .

efile GRAPHIC print - DO NOT PR	ROCESS	As Filed D	ata -		DLN: 93491321071110		
TY 2019 Accounting Fees Schedule							
		THE MER FOUNDA <sup>1</sup> 20-80910		FON GRIGSBY			
Category	Am	ount	Net Investmen Income	t Adjusted Net Income	Disbursements for Charitable Purposes		
ACCOUNTING FEES		5,530	2,7	65	0		

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491321071110 TY 2019 Explanation of Non-Filing with Attorney General Statement Name: THE MERICE BOO JOHNSTON GRIGSBY FOUNDATION **EIN:** 20-8091007 Statement: ATTORNEY GENERAL OR STATE OF LOUISIANA DOES NOT ACCEPT OR REOUIRE FILING OF THE 990PF

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	l: 93491321071110		
TY 2019 Other Expenses School	edule			_		
Name:	THE MERICE BO	OO JOHNSTON GR	RIGSBY			
	FOUNDATION					
EIN:	20-8091007					
Other Expenses Schedule		,				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
BANK CHARGES	17	17		0		
MANAGEMENT FEES	28,604	28,604		0		
MISCELLANEOUS	294	294		0		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491321071110
TY 2019 Substantial Contribut Schedule	cors		
Name:	THE MERICE BOO JOH	INSTON GRIGSBY	
	FOUNDATION		
EIN:	20-8091007		
Name		Add	ress
CAJUN INDUSTRIES LLC		15635 AIRLINE HWY BATON ROUGE, LA 70817	
LEONARD L GRIGSBY		19145 WEST MUIRFIELD BATON ROUGE, LA 70810	

efile GRAPHIC print - DO NOT PRO	OCESS As Filed Data	ı <b>-</b>	DLI	N: 93491321071110				
TY 2019 Taxes Schedule								
Name: THE MERICE BOO JOHNSTON GRIGSBY FOUNDATION EIN: 20-8091007								
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
TAXES - FOREIGN	246	246		0				
TAXES - US	3,200	0		0				

efile GRAPHIC print - DO	NOT PROCESS As Filed Data	-		DLN: 93491321071110		
Schedule B	Schedule of Contributors			OMB No. 1545-0047		
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF.  ► Go to <a href="https://www.irs.gov/Form990">www.irs.gov/Form990</a> for the latest information.			2019		
Name of the organization THE MERICE BOO JOHNSTO FOUNDATION	DN GRIGSBY		20-8091007	dentification number		
Organization type (chec	k one):					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	☐ 527 political organization					
Form 990-PF	√ 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	☐ 501(c)(3) taxable private foundation					
	ion filing Form 990, 990-EZ, or 990 property) from any one contributor.					
Special Rules						
under sections 50 received from any	on described in section 501(c)(3) fil 9(a)(1) and 170(b)(1)(A)(vi), that c one contributor, during the year, t 1h, or (ii) Form 990-EZ, line 1. Co	necked Schedule A (Form 990 otal contributions of the greater	or 990-EZ), Part II, line 13,	16a, or 16b, and that		
during the year, to	on described in section 501(c)(7), (a tal contributions of more than \$1,0 ne prevention of cruelty to children	00 exclusively for religious, ch	aritable, scientific, literary, d			
during the year, could be during the year.	on described in section 501(c)(7), (contributions exclusively for religious ked, enter here the total contribution mplete any of the parts unless the le, etc., contributions totaling \$5,00	s, charitable, etc., purposes, buns that were received during the General Rule applies to this o	ut no such contributions tota ne year for an <i>exclusively</i> re rganization because it rece	aled more than \$1,000. eligious, charitable, etc.,		
990-EZ, or 990-PF), but it	that isn't covered by the General I must answer "No" on Part IV, line rt I, line 2, to certify that it doesn't r	2, of its Form 990; or check th	ne box on line H of its Form			
For Paperwork Reduction Ac	t Notice, see the Instructions	Cat. No. 30613X	Schedule B (Form 990	), 990-EZ, or 990-PF) (2019)		

for Form 990, 990-EZ, or 990-PF.

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)		Page <b>4</b>			
	rganization CE BOO JOHNSTON GRIGSBY CON		Employer identification number 20-8091007			
Part III	than \$1,000 for the year from any one contributo	r. Complete columns (a) thr of exclusively religious, cha actions.) ► \$	ed in section 501(c)(7), (8), or (10) that total more ough (e) and the following line entry. For ritable, etc., contributions of \$1,000 or less for			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift Transferee's name, address, and ZIP 4		Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	Transferee's name, address, and ZIP 4	elationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
	Transferee's name, address, and ZIP 4	Re	elationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	- (c) Use of gift	(d) Description of how gift is held			
	Transferee's name, address, and ZIP 4	(e) Transfer of gift Re	elationship of transferor to transferee			
			Schedule B (Form 990, 990-EZ, or 990-PF) (2019)			