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.

2019

OMB No 1545-0047

			f the Treasury	▶ Do not enter social security num	bers on this fo	rm as it	may be made po	ıblic.\()	(1)	
			nue Service	► Go to www.irs.gov/Form990PF	for instruction			ion.	(C Oper	to Public Inspection
	For	calen	dar year 20	019 or tax year beginning		<u>, 2019,</u>	and ending		_	, 20
21	Nam	e of four	ndation				A Employ	er identifi	cation numb	er
20	Th	e Py	ramid Pe	ak Foundation			45-3	44434	1	
6	Num	ber and	street (or P O	box number if mail is not delivered to street address)		Room/s	suite B Telepho	ne numbe	r (see instruc	tions)
က	13	50 C	oncourse	Avenue		383	(901)818-	5239	
~	City	or town,	state or provin	nce, country, and ZIP or foreign postal code						ding, check here ▶ □
AP			s TN 381							g,
			all that app		rn of a former	nublic c	harity D 1. Forei	n organiz	ations check	here ►
\Box	u	Officer	an triat app	Final return Amended		public o		-		_
7				Address change Name ch					ations meeting attach comp	ig the 85% test,
Ź		Ob1-		Address change Ivame ch	organization.	nere and	attach comp	utation terminated under		
X	H	Cneck	type or org	anization: Section 501(c)(3) exempt nonexempt charitable trust Other t	private jourig	NON LIS	Section	507(b)(1)(A	on status was N. check here	e P
SCANNED				nonexempt charitable trust Uther t	axable private	Tourida	ition.	(-/(-/(7,	, , ,
••				of all assets at J Accounting metho		L				th termination
				n Part II, col. (c), Other (specify) 14, 166, 905. (Part I, column (d), must		NON Q	752020 ^{under s}	ection 507	(b)(1)(B), ched	ck here . ▶ [_]
					be on cash bas	is) ·	9-1-0	т		
አ.	Pa	art I		of Revenue and Expenses (The total of	(a) Revenue	and	(h) Net investment	(c) A	djusted net	(d) Disbursements for charitable
				olumns (b), (c), and (d) may not necessarily equal	expenses i	[ං] චgde	(b) Net investment In Uncome		ncome	purposes
K			the amounts	ın column (a) (see instructions))						(cash basis only)
		1	Contribution	ns, gifts, grants, etc , received (attach schedule)	35,000,0	000.				
		2	Check ► [If the foundation is not required to attach Sch. B						
		3	Interest on	savings and temporary cash investments	183,6	685.	183,685.			
		4		and interest from securities	4,546,6	570.	4,546,670.	Ì		
		5a	_	S						1
		b		income or (loss)				1		j
	a)	6a		r (loss) from sale of assets not on line 10	187,165,	632				i
	Revenue	b		price for all assets on line 6a 467,024,117			6a Stmt			1
	ē	7		in net income (from Part IV, line 2)	•		87,165,632	 		i
	è	8		term capital gain		_	107,103,032.	2 0	84,218.	1
	_	9						1 2,0	04,210.	1
		_		1				 		
		10a	-	less returns and allowances				- 		
		b		of goods sold				-		
		С	•	it or (loss) (attach schedule)			FO 176	 		
		11		me (attach schedule) See . Stmt	58,		58,176.		04 010	
		12		l lines 1 through 11			91,954,163.	2,0	84,218.	201 005
	Ś	13	· · · · · · · · · · · · · · · · · · ·	ation of officers, directors, trustees, etc.	610,6			 		391,995.
	Se	14	•	loyee salaries and wages	277,6			-		277,669.
	ē	15		ans, employee benefits	172,8					99,265.
	×	16a	Legal fees	(attach schedule) . L-16a Stmt		475.		-		1,475.
	a)	b	Accounting	g fees (attach schedule) L-16b. Stmt	12,2			ļ		9,205.
	.≧	С	Other profe	essional fees (attach schedule) L-16c Stmt	635,3	323.				634,283.
	ā	17								
2020	<u>ist</u>	18	Taxes (atta	ach schedule) (see instructions) See. Stmt	1,893,4	466.				0.
7	and Administrative Expenses	19	Depreciation	on (attach schedule) and depletion	73,3	175.				
30	dn	20	Occupancy	y						
ت	4	21		oferences, and meetings	15,	756.				15,756.
DEC	ñ	22		nd publications						
	D	23		enses (attach schedule) See Stmt .	720,	175.	664,799.			41,591.
도도	Ĕ	24		erating and administrative expenses			· ·	1		
78	rai	- '	•	13 through 23	4,412,8	381	664,799.			1,471,239.
	Operating	25		ons, gifts, grants paid	404,932,					404,932,686.
eceived In Ithing Opten	0	26		nses and disbursements. Add lines 24 and 25			664,799.			406,403,925.

For Paperwork Reduction Act Notice, see instructions.

Subtract line 26 from line 12:

Excess of revenue over expenses and disbursements

Net investment income (if negative, enter -0-) .

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

REV 04/21/20 PRO

191,289,364

Form **990-PF** (2019)

2,084,218.

27

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	En	of year		
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash-non-interest-bearing					
	2	Savings and temporary cash investments	4,385,610.	3,650,931	. 3,650,931.		
	3	Accounts receivable ▶					
		Less: allowance for doubtful accounts ▶					
1	4	Pledges receivable ▶					
ŀ		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) ▶ 9,750,000.	L-7 Stmt				
		Less. allowance for doubtful accounts ▶ 0.	9,250,000.	9,750,000	. 9,750,000.		
\$	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
As	10a	Investments – U.S. and state government obligations (attach schedule)	14,977,115.	13,999,714	. 13,999,714.		
	b	Investments—corporate stock (attach schedule) L-10b Stmt	581,776,837.	225,537,940	. 225,537,940.		
	С	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) . L-13. Stmt	19,110,607.	20,231,886	. 20,231,886.		
	14	Land, buildings, and equipment: basis ▶					
		Less: accumulated depreciation (attach schedule) ▶	655,872.	609,005	. 609,005.		
	15	Other assets (describe ► L-15 Stmt)	169,522.	387,429			
	16	Total assets (to be completed by all filers—see the					
		instructions. Also, see page 1, item l)	630,325,563.	274,166,905	. 274, 166, 905.		
	17	Accounts payable and accrued expenses	1.	0			
,	18	Grants payable					
ĕ.	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			1		
iat	21	Mortgages and other notes payable (attach schedule)					
_	22	Other liabilities (describe ▶)					
	23	Total liabilities (add lines 17 through 22)	1.	0			
ŝŝ		Foundations that follow FASB ASC 958, check here			•		
alances		and complete lines 24, 25, 29, and 30.			ļ		
<u>ā</u>	24	Net assets without donor restrictions					
∞ ∣	25	Net assets with donor restrictions					
밀		Foundations that do not follow FASB ASC 958, check here ▶ 🗵					
ᇎ		and complete lines 26 through 30.					
5	26	Capital stock, trust principal, or current funds					
ğ	27	Paid-in or capital surplus, or land, bldg., and equipment fund					
Se	28	Retained earnings, accumulated income, endowment, or other funds	630,325,562.				
AS	29	Total net assets or fund balances (see instructions)	630,325,562.	274,166,905			
Net Assets or Fund	30	Total liabilities and net assets/fund balances (see					
		ınstructions)	630,325,563.	274,166,905			
	rt III	Analysis of Changes in Net Assets or Fund Balances					
1	Tota	Il net assets or fund balances at beginning of year-Part II, colu	mn (a), line 29 (mus	st agree with			
		of-year figure reported on prior year's return)					
2	Ente	er amount from Part I, line 27a		, , , , , , , , , , , , , , , , , , , ,			
3		er increases not included in line 2 (itemize) ▶					
4		lines 1, 2, and 3					
5	Dec	reases not included in line 2 (itemize) ► <u>Unrealized loss</u>		5			
6	Tota	Il net assets or fund balances at end of year (line 4 minus line 5)	Part II, column (b), li	ne 29 6	274,166,905.		

Part	V Capital Gains an	d Losses for Tax on Investn	nent Income					
	(a) List and describe the k 2-story brick wareho	ind(s) of property sold (for example, real e use, or common stock, 200 shs MLC Co	state,)	(b) How acquired P—Purchase D—Donation	(c) Date acq (mo , day,			
1a	Southeastern Conce	ntrated Value Fund		P	04/09/20	015 04/10/2019		
b	Southeastern Conce	ntrated Value Fund		P	04/09/20			
		onal cap gain distrib		P	04/11/20			
		rtners cap qaın dıstr	ibution	P	10/23/20	013 11/27/2019		
<u> </u>	See Statement		<u> </u>	<u> </u>				
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expe	r other basis ense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))			
a	418,551,817.			52,000,000.		166,551,817.		
b	44,727,568.			<u>27,328,000.</u>		17,399,568.		
<u>c</u>	2,084,218.			0.		2,084,218.		
<u>d</u>	507,024.		<u> </u>	0.		507,024.		
<u>е</u>	1, 153, 490.	owing gain in column (h) and owned	by the foundation	530, 485.		623,005.		
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	ss of col (i) (j), if any	col (k),	ains (Col. (h) gain minus i, but not less than -0-) or .osses (from col. (h))		
а						166,551,817.		
b						<u>17,399,568.</u>		
c						2,084,218.		
d					-	507,024.		
е					<u> </u>	623,005.		
2	Capital gain net income of		also enter in Pa , enter -0- in Pa		2	187,165,632.		
3	If gain, also enter in Part	in or (loss) as defined in sections I, line 8, column (c). See instru	ictions. If (loss)), enter -0- ın }	3	2,084,218.		
Part		der Section 4940(e) for Redu			Income			
Was t	s," the foundation doesn't	ve this part blank. section 4942 tax on the distribution qualify under section 4940(e) Do ount in each column for each ye	not complete t	his part.				
<u>'</u>	(a)		ar, see the mount		arring arry or	(d)		
Cale	Base period years endar year (or tax year beginning ii	(b) Adjusted qualifying distribution	s Net value o	(c) of noncharitable-use a	ssets (Distribution ratio (col (b) divided by col (c))		
	2018	145,058,2	71.	715,677,6	504.	0.202687		
	2017	105,861,9		791,594,9	77.	0.133732		
	2016	38,894,9	43.	722,224,6	35.	0.053854		
	2015	66,808,3	89.	618,740,3		0.107975		
	2014	35,547,3	65.	440,069,7	72.	0.080777		
2	Total of line 1, column (d					0.579025		
3	Average distribution ration the number of years the f	o for the 5-year base period—divided to the foundation has been in existence	vide the total or e if less than 5 ye	n line 2 by 5.0, o ears	r by . 3	0.115805		
4	Enter the net value of nor	ncharitable-use assets for 2019 f	rom Part X, line	5	. 4	447,734,409.		
5	Multiply line 4 by line 3				. 5	51,849,883.		
6 Enter 1% of net investment income (1% of Part I, line 27b)					. 6	1,912,894.		
7	Add lines 5 and 6				. 7	53,762,777.		
8		ons from Part XII, line 4				406, 403, 925.		
	If line 8 is equal to or gre Part VI instructions.	ater than line 7, check the box in	n Part VI, line 1b	o, and complete	tnat part usi	ng a 1% tax rate. See the		

1.6

Page 4

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instr	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. 1			1
	Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1,9	12,8	94.
	here ► 🗵 and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of			
	Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			Ο.
3	Add lines 1 and 2	1,9	12,8	94.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	1,9	12,8	94.
6	Credits/Payments.			
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 2,331,321.			ł
b	Exempt foreign organizations—tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d	2,3	31,3	21.
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10	4	18,4	27.
11	Enter the amount of line 10 to be. Credited to 2020 estimated tax ▶ 418, 427. Refunded ▶ 11	-		
Part	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		×
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		×
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.	1c		×
C	Did the foundation file Form 1120-POL for this year?	10		
d	(1) On the foundation. ► \$ (2) On foundation managers. ► \$			
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	ĺ		
е				
2	on foundation managers. ► \$ Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		×
2	If "Yes," attach a detailed description of the activities.			$\hat{\Box}$
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3		×
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	×	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	×	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		×
	If "Yes," attach the statement required by General Instruction T.	1		1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that		<u> </u>	
_	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	×	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶	1		
	TN	1		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		<u> </u>	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"			(
	complete Part XIV	9	<u> </u>	_ <u>×</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		_ <u>×</u> _

Part	VII-A Statements Regarding Activities (continued)			
		L	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		×
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	×	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	
	Website address ► N/A			
14	The books are in care of ► Melissa R. Russell Telephone no. ► (901) 8	318-	5239	
4-	Located at ▶ 1350 Concourse Avenue, Suite 383 Memphis TN ZIP+4 ▶ 38104			
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		•	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	×	
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country > EI	i		
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Yes	No
4	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		res	140
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 No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	ŀ		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?	!		
	(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.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here	1b		×
С	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		×
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
а	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 > 20 , 20 , 20 , 20	İ		
D	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		×
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶ 20 , 20 , 20 , 20	}		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 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			1
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			اپا
	foundation had excess business holdings in 2019.)	3b 4a		×
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	70		
Ü	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		

BAA

Part	VIBB Statements Regarding Activities	<u>s for V</u>	Vhich Form	4720	May Be F	Require	ed (conti	nued)			
5a	During the year, did the foundation pay or incur	any am	nount to.						· ·	Yes	No
	(1) Carry on propaganda, or otherwise attempt		•	•	•	• •	☐ Yes	⊠ No			
	(2) Influence the outcome of any specific publi	c elect	ion (see sect	ion 495	5); or to c	arry on	,				
	directly or indirectly, any voter registration di	rive?					☐ Yes	⊠ No			
	(3) Provide a grant to an individual for travel, stu	ıdy, or	other sımilar	purpos	es?		☐ Yes	⊠ No			
	(4) Provide a grant to an organization other than section 4945(d)(4)(A)? See instructions	n a cha	aritable, etc.,	organız	ation desc	rıbed ır	1	⊠ No			
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to a							— ⊠ No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the in Regulations section 53.4945 or in a current no							scribed			
С	Organizations relying on a current notice regarding disaster assistance, check here										
6a	Did the foundation, during the year, receive any	funds,	directly or in	directly	, to pay pre	emiums	_	হিন ১১		,	
	on a personal benefit contract?						∐ Yes	`⊼ No			
ь	If "Yes" to 6b, file Form 8870.										
7a	At any time during the tax year, was the foundation										
b	If "Yes," did the foundation receive any proceed		•					า? .	7b		
8	Is the foundation subject to the section 4960 ta										
- E	remuneration or excess parachute payment(s) de							No L			
Fan	VIII Information About Officers, Direc	tors,	rustees, F	ounda	tion Mana	agers,	Hignly F	aid E	mpioy	ees,	
_	and Contractors	lotion		d thair		otion (Saa instru	ictions			
_ <u>'</u>	List all officers, directors, trustees, and found		e, and average		mpensation	,	Contribution				
	(a) Name and address	hou	irs per week ted to position	(lf n	ot paid, ter -0-)	emplo	oyee benefit erred compe	plans	(e) Expe other a	nse acc allowan	
	es R. Boyd	Exec. D	or. & Director								_
	Concourse Avenue, Ste 383 Memphis TN 38104		40.00	3 9	91,995.		55,	000.			0.
	Harper Poplar Avenue, Ste 900 Memphis TN 38119	Dire	1.00		0.		0.				0.
	ussa R. Russell	CFO/	Treasurer								_
	Concourse Avenue, Ste 383 Memphis TN 38104		40.00	2:	18,703.	53,08		083.			0.
See	Statement		3 00		0			_			^
2	Compensation of five highest-paid employee "NONE."	es (oth	3,00 er than tho	se inclu	uded on li	ne 1—	see instr	0. uctions	s). If no	one, e	0. enter
	(a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	veek	(c) Comper	nsation	(d) Contribution employee plans and compens	benefit deferred	(e) Exper	nse acc	
Sher	ry D. Crane		Business M	anager						•	
	Concourse Avenue, Ste 383 Memphis TN 3		4	0.00	93,	503.	21,	<u>3</u> 40.			0.
	elle Armstrong		Instruction support	coordinator							
	Concourse Avenue, Ste. 383 Memphis TN 3		1	0.00	184,	167.		0.		•	0.
Total	number of other employees paid over \$50,000.							. •	0		
									orm 99 0		

romi 990-rr (2019)		rage
Part VIII Information About Officers, Directors, Trustees, Four and Contractors (continued)	ndation Managers, Highly Paid Er	nployees,
3 Five highest-paid independent contractors for professional services	s. See instructions. If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Health and Education Consultants, LLC	Consulting	
666 West Drive C/O 670 West Drive Memphis TN 38112	<u>-</u>	165,000.
EdSpace Consulting	Consulting	
186 S. Belvedere Blvd. Memphis TN 38104		150,000.
Davidson Hill Consutling	Consulting	
2182 Spicer Cove Memphis TN 38134		110,000.
Mıriam Dean Stokes Brown	Consulting	
150 Point Clear Cove Eads TN 38028		101,239.
Lester Merriweather	Consulting	
176 Golf Club Circle Memphis TN 38109		76,865.
	<u> </u>	
Part IX-A Summary of Direct Charitable Activities		· · · · · · · · · · · · · · · · · · ·
List the foundation's four largest direct charitable activities during the tax year. Include releving organizations and other beneficiaries served, conferences convened, research papers produce	ant statistical information such as the number of ed, etc	Expenses
1 The Foundation performs no direct charitable as	ctivities. The exempt	·
purpose is carried out via contributions to ex	isting charitable	
organizations.		404,932,868.
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see inst	tructions)	
Part IX-B Summary of Program-Related Investments (see Institute Describe the two largest program-related investments made by the foundation during the tax y		Amount
1 None		
NOTIC		
		0.
2		
		1
All other program-related investments. See instructions		
· m c.m.c. E. c.2 m. r m c c m c c c c		1

Form 99	90-PF (2019)		Page 8
Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	ign fo	
	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	440,301,370.
b	Average of monthly cash balances	1b	5,381,312.
C	Fair market value of all other assets (see instructions)	1c	8,870,018.
d	Total (add lines 1a, b, and c)	1d	454,552,700.
е	Reduction claimed for blockage or other factors reported on lines 1a and	l	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	454,552,700.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	1	
	ınstructions)	4	6,818,291.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	447,734,409.
6	Minimum investment return. Enter 5% of line 5	6	22,386,721.
<u>Part</u>	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	ound	ations
1	Minimum investment return from Part X, line 6	1	22,386,721.
2a	Tax on investment income for 2019 from Part VI, line 5		<u> </u>
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b	1	
С	Add lines 2a and 2b	2c	1,912,894.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	20,473,827.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	20,473,827.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	20,473,827.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	406,403,925.
b	Program-related investments—total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	<u></u>
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	406,403,925.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	1 010 00.
	Enter 1% of Part I, line 27b. See instructions	5	1,912,894.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	404,491,031.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whe	ther the foundation

Part	XIII Undistributed Income (see instruc	tions)			
,		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				20,473,827.
2	Undistributed income, if any, as of the end of 2019.				
а	Enter amount for 2018 only				
b	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2019				
а	From 2014 13,990,300	<u>. </u>			
b	From 2015				
С	From 2016 3,085,795				
d	From 2017 67, 383, 219				
e	From 2018				
f	Total of lines 3a through e	231,324,938.			
4	Qualifying distributions for 2019 from Part XII. line 4: ► \$ 406,403,925.				
а	Applied to 2018, but not more than line 2a .				
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2019 distributable amount				20,473,827.
е	Remaining amount distributed out of corpus	385,930,098.			
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))			55	
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	617,255,036.			
b	Prior years' undistributed income. Subtractione 4b from line 2b		0.		
С	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		0.		
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions			0.	
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be	•			
	distributed in 2020				0.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)			pen de l	s is a demission where
8	Excess distributions carryover from 2014 no applied on line 5 or line 7 (see instructions) .	13,990,300.			۰
9	Excess distributions carryover to 2020				
	Subtract lines 7 and 8 from line 6a	603,264,736.			
10	Analysis of line 9:				
а	Excess from 2015 37, 323, 215				
b	Excess from 2016 3,085,795	 -			
C	Excess from 2017 67, 383, 219				
d	Excess from 2018 109, 542, 409				ļ
е	Excess from 2019 385, 930, 098	•			

factors:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

Part XV Supplementary Information (cont 3 Grants and Contributions Paid During	tinued)	ed for Fu	ture Payment	<u> </u>
	If recipient is an individual,	Foundation		
Recipient	If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		_
a Paid during the year Community Fdn of Greater Memphis 1900 Union Avenue Memphis TN 38104	N/A	501 (c) 3	various	404,932,686.
Total				3a 404, 932, 686.
b Approved for future payment				
Total				3b

Ente	r`gros	s amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by sect	ion 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemption function income (See instructions)
1	•	ram service revenue.			· · · — · · · ·		
	a _				-	 	<u> </u>
	ь _			-			-
	° –						
	d _				ļ		
	e _				ļ		
	' <u>-</u>						
_	_	ees and contracts from government agencies					···
2		bership dues and assessments		·	ļ		
3		est on savings and temporary cash investments			14	183,685.	
4		lends and interest from securities			14	4,546,670.	
5		ental income or (loss) from real estate:		·			
		lebt-financed property			 		
_		lot debt-financed property			 		
6		ental income or (loss) from personal property			ļ		
7		r investment income				100 100	
8		or (loss) from sales of assets other than inventory		·—	19	187,165,632.	
9		ncome or (loss) from special events	-		<u> </u>		
10		s profit or (loss) from sales of inventory		 		50.154	
11		rrevenue: a Other portfolio Income			1.4	58,176.	
	ь _			·	 		
					 		
	d _				 		
	е _						
40	0	atal Andreas (b) (d) and (a)				101 054 163	
12	Subto	otal. Add columns (b), (d), and (e)				191, 954, 163.	21 054 162
13	lotai	I. Add line 12, columns (b), (d), and (e)				191,954,163. 13 19	91,954,163.
13 (See	l otal works	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation	s.)		· · · · ·	191,954,163. 13 19	91,954,163
าง (See Par	works t XV	sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13 19	
See Par	l otal works	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation	s.) ccomplishm	ent of Exemp	ot Purposes	13 19	
See Par	works t XV	sheet in line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	ot Purposes	13 19	
See Par Lin	works t XV	sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes	13 19	
See Par	works t XV	sheet in line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	ot Purposes	13 19	
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See Par Lin	works t XV	sheet in line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	ot Purposes	13 19	
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See Par Lin	works t XV	sheet in line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm	ent of Exemp	ot Purposes	13 19	
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Form **990-PF** (2019)

BAA

Part	XVII	Informatio Organizati	_	ding Tra	nsfers to	and Tran	saction	ns and I	Relationsh	ips V	Vith N	onch	aritable	e Exe	mpt
1 a	in sec organiz Transfe	e organization of etion 501(c) (c) zations? ers from the rep	other than	n section undation t	501(c)(3) o a nonch	organizati aritable exe	ons) or empt org	in sect	on 527, re					Yes	No
	• •	sh											1a(1)		×
		ner assets .											1a(2)		<u>×</u>
b		transactions.											11.41		
		les of assets to											1b(1)		×
		rchases of asse							• • • •				1b(2)		×
		ntal of facilities		•						• •			1b(3)	-	×
		imbursement a	_								• •		1b(4) 1b(5)		×
		ans or loan gua rformance of se									• •		1b(5)		×
С		g of facilities, e				-							10(0)		×
d		answer to any		_				-						fair m	
u	value c	of the goods, o	ther asset	ts, or serv	ices given	by the rep	orting fo	undation	. If the foun	datior	n recei	ved les	ss than	faır m	arket
		n any transacti													
(a) Line	e no (b)	Amount involved	(c) N	lame of nonc	haritable exe	empt organizati	on	(d) Desc	ription of transf	ers, tra	nsaction	s, and s	haring arri	angeme	ents
										_					
				<u></u>											
					_				<u> </u>						
									<u> </u>						
															
		·	<u> </u>									_			——
			<u> </u>												
			 										_		
			<u> </u>												
2a		foundation dire							nore tax-exe	mpt (organiz	ations	3		
	describ	oed in section 5	501(c) (oth	er than se	ction 501	(c)(3)) or in s	section 5	527? .					☐ Ye	s 🗵	No
b	If "Yes	," complete the	following	schedule											
		(a) Name of organ	ızatıon			(b) Type of org	anization			(c) De	scription	of relati	ionship		
<u>~</u>		penalties of perjury, I and complete Decl										ny knowl	edge and b	elief, it	ıs true,
Sign		and complete Deci-	arattori or prej)	parer (other th	an taxpayer, i	, /	ino/mation c	n willen prej	Jaiei nas any kin	wiedge			IRS discu		
Here	17	Velena C	Unell		11/6/2020 Treasurer				r				preparer s ructions [
		ure of officer or trus				Date	Title		<u>,, </u>		L				
Paid		Print/Type preparer	's name		Preparer's	s signature			Date		Check	☐ if	PTIN		
Prepa			- 	- 7 [z	- Dr z	ranz	6 4			c	L	pioyed	<u>L</u>		
Use (עוווע ⊢	irm's name		<u> </u>		<u> </u>	<u> </u>	_		Phon	s EIN ▶				

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

2019

Employer identification number

The	Pyramid Peak F	oundation	45-3444341		
Organiz	ation type (check or	ne)			
Filers o	f:	Section:			
Form 99	0 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		▼ 501(c)(3) exempt private foundation			
		4947(a)(1) nonexempt charitable trust treated as a private foundation			
501(c)(3) taxable private foundation					
Note: O instructi Genera	ons. Rule For an organization	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions	tributions totaling \$5,000		
Special					
	For an organization regulations under set 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 3 ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 99) that received from any one contributor, during the year, total contributed the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line	90 or 990-EZ), Part II, line Itions of the greater of (1)		
	contributor, during t	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that he year, total contributions of more than \$1,000 exclusively for religious hall purposes, or for the prevention of cruelty to children or animals. Co	s, charitable, scientific,		
	contributor, during to contributions totaled during the year for a General Rule applie	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that he year, contributions exclusively for religious, charitable, etc., purposed more than \$1,000. If this box is checked, enter here the total contribution exclusively religious, charitable, etc., purpose. Don't complete any ones to this organization because it received nonexclusively religious, charitable, etc., purpose.	es, but no such utions that were received if the parts unless the aritable, etc , contributions		

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).

Name of organization
The `Pyramid Peak Foundation

Employer identification number

45-3444341

Part I	Contributors (see instructions). Use duplicate co	pies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Otis M. Hawkins 1350 Concourse Avenue, Ste. 383 Memphis TN 38104	\$ 35,000,000.	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization
The Pyramid Peak Foundation

Employer identification number

45-3444341

Part II Non-	ash Property	(see instructions).	Use duplicate copies	of Part II if a	additional space is needed.
--------------	--------------	---------------------	----------------------	-----------------	-----------------------------

		T	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	·
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
		L	

Name of or	=	·			Employer identification number		
	ramid Peak Foundation				45-3444341		
Part III	Exclusively religious, charitable, et (10) that total more than \$1,000 for the following line entry. For organizate contributions of \$1,000 or less for the	the year from any tions completing Pa	one contributor. rt III, enter the total	Complete of all of exclusi	columns (a) through (e) and vely religious, charitable, etc.,		
_	Use duplicate copies of Part III if add	ditional space is nee	ded.				
(a) No. from Part I			of gift	(d) Des	scription of how gift is held		
	(e) Transfer of gift						
	Transferee's name, address, ar	Relatio	nship of trai	nsferor to transferee			
		•••••••					
(a) No. from Part I	(b) Purpose of gift (c) Use of gift (d) I		(d) Des	scription 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		of gift	(d) Des	scription of how gift is held		
					·		
-	(e) Transfer of gift						
	Transferee's name, address, ar	Relatio	nship of trar	nsferor to transferee			
(a) No. from Part I	(b) Purpose of gift (c) Use		of gift	(d) Des	cription of how gift is held		
			•••••				
	(e) Transfer of gift						
	Transferee's name, address, an			nship of trar	nsferor to transferee		

Form 990-PF: Return of Private Foundation

Part IV: Capital Gains and Losses for Tax on Investment Income

Continuation Statement

(a) List and describe (e.g., real estate, common stoc	(b) How acquired P-Purchase D-Donation	(c) Date	(d) Date		
SAM Asıa Pacific Oppor		P	05/31/17	12/31/19	
Innova Fund III K-1			P	08/29/14	12/31/19
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1	st or other us expense of sale	(h) Gain (e) plus (g	(f) minus
0.			530,485.		-530,485.
1,153,490.			0.		1,153,490.
1,153,490.	0.		530,485.		623,005.
Complete only for assets showing gain in column (h) the foundation on 12/31/69			and owned by	(l) Gains gain minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col. col. (j), if any	but not less or Losses (h)	(from col.
					-530,485.
					1,153,490.
0.	0.		0.		623,005.

The Pyramid Peak Foundation Form 990-PF: Return of Private Foundation

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Part VIII: Information about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors	oundation Managers, Hiç	ghly Paid Employees, a		Continuation Statement
Name and address	Title, and average hours per week devoted to position	Compensation	Contributions to employee benefit plans and deferred compensation	Expense account, other allowances
O. Mason Hawkins	Member & Director	0.	0	.0
1350 Concourse Avenue, Ste. 3838	1.00			
Memphis, TN 38104				
Andrew R. McCarroll	Director	0.	.0	0.
6410 Poplar Avenue, Ste 900	2.00			
Memphis, TN 38119				
-				
		0.	.0	.0

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Other Income

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income
Other Portfolio K-1 Income	58,176.	58,176.	
Total	58,176.	58,176.	

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
Federal excise tax	1,850,000.			0.
Payroll taxes	43,466.			0.
Total	1,893,466.			0.

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
Supplies	15,180.			11,657.
Maintenance	15,272.			11,454.
Postage	597.			448.
Other Portfolio Deductions	664,799.	664,799.		0.
Entertainment	11,996.			8,997.
Dues & subscriptions	2,524.			1,680.
Insurance	2,769.			2,077.
Telephone and internet	7,038.			5,278.
Total	720,175.	664,799.		41,591.

Form 990-PF: Return of Private Foundation

Part VII-A, line 12, Distribution to a Donor Advised Fund

Explanation Statement

Donor Advised Fund

All grants are made to a donor-advised fund which makes contributions to various 501(c)3 organizations which have been recommended by the Foundation. Each of these entities has its own exempt function or activity which has been vetted by the IRS in the process of granting exempt status.

Form 990-PF

Part I, Line 6a

Name The Pyramid Peak Foundation	Employer Identification No 45-3444341
Asset Information: Description of Property SAM Asia Pacific Opportunities K-	1
Business Code Exclusion Code 19	
Date Acquired05/31/17 How Acquired Purchased	
Date Sold 12/31/19 Name of Buyer	
Check Box, if Buyer is a Business	
Sales Price Cost or other basis (do not reduce by depreciati	on) <u>53</u> 0,485.
Sales Expense Valuation Method Cost	
Total Gain (Loss) -530, 485. Accumulated Depreciation	
Description of Property Longleaf Partners International Fund Capi	tal Gain Distribution
Business Code Exclusion Code 19	
Date Acquired 04/11/19 How Acquired . Purchased	
Date Sold <u>11/27/19</u> Name of Buyer	
Check Box, if Buyer is a Business	
Sales Price2, 084, 218. Cost or other basis (do not reduce by depreciati	
Sales Expense Valuation Method. Cost	
Total Gain (Loss) 2,084,218. Accumulated Depreciation	
Description of Property Longleaf Global Fund Cap Gain dis	tribution
Business Code Exclusion Code 19	
Date Acquired10/23/13 How Acquired . Purchased	
Date Sold11/27/19 Name of Buyer	
Check Box, if Buyer is a Business .	
Sales Price <u>507, 024</u> . Cost or other basis (do not reduce by depreciati	
Sales Expense Valuation Method . Cost	
Total Gain (Loss) . 507, 024. Accumulated Depreciation	
Description of Property Southeastern Concetrated Value Sh	ares
Business Code Exclusion Code 19	
Date Acquired04/09/15 How Acquired Purchased	
Date Sold 04/10/19 Name of Buyer	
Check Box, if Buyer is a Business	
Sales Price. 418, 551, 817. Cost or other basis (do not reduce by depreciati	on) . 252,000,000.
Sales Expense Valuation Method Cost	
Total Gain (Loss) . 166, 551, 817. Accumulated Depreciation	
Description of Property See Net Gain or Loss from Sale of	Assets
Business Code Exclusion Code	
Date Acquired How Acquired	
Date Sold Name of Buyer	
Check Box, if Buyer is a Business	
Sales Price. Cost or other basis (do not reduce by depreciati	
Sales Expense Valuation Method	
Total Gain (Loss) Accumulated Depreciation	· · ·
Totals:	
Total Gain (Loss) of all assets . <u>187, 165, 632</u> .	
Gross Sales Price of all assets . 467,024,117.	
Unrelated Business Income Business Code	
Excluded by section 512, 513, 514 <u>187, 165, 632</u> . Exclusion Code . <u>19</u>	
Related/Exempt Function Income	
QuickZoom here to Form 990-PF, Page 1	
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Additional information from your Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets Net Gain or Loss from Sale of Assets

Continuation Statement

Description of Property	Bu sin es s Co de	n	e Acq	How Acquired	Dat e Sol d	Name of Buyer	BuyeaBusees	Sale s Pric e	or other	Sale s Exp ense	Valuation Method	Total Gain or Loss	Accu mulat ed Depre ciatio n
Southeastern Concetrated Value Shares		19	04/09/1 5	Purchased	05/14/1 9			44,727,563	27,328,000	_	Cost	17,399,558	
Innova Fund III capital gain distribution		19	08/29/1 4	Purchased	12/31/1 9			1,153,490			Cost	1,153,490	

Name	Employer Identification No
The Pyramid Peak Foundation	45-3444341

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Collen Intellectual Properties	Legal	1,475.			1,475.
Total to Form 990-	PF, Part I, Line 16a	1,475.			1,475.

Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Burleigh Consulting KPMG	Tax preparation-PSP Tax consulting	1,825.			1,369. 7,836.
Total to Form 990-	PF, Part I, Line 16b	12,273.			9,205.

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Davidson Hill Consulting Mim Stokes Brown Tamburrino, Inc Lester Merriweather Valliere Enterprises LLC EdSpace Consulting Grinder, Taber Grinder	Art collection consulting Consulting-Music Program Consulting- Education Consulting- Construction Catering staff	165,000. 110,000. 101,240. 4,162. 76,865. 27,234. 150,000. 422. 200. 200.			165,000. 110,000. 101,240. 3,122. 76,865. 27,234. 150,000. 422. 200. 200.
Total to Form 990-	PF, Part I, Line 16c	635,323.			634,283.

Receivables

me e Pyramid Peak Foundation	Employer Identification No 45-3444341
Lender Information:	
Loan Receivable Type 4	
Borrowers Name Project Grad USA	
Borrower's Title Project Grad USA	
Check Box, if Borrower is a Business .	
	ntee
Repayment Terms 1 year	
Borrower's Security None	
Purpose of Loan Education	
Description of Consideration None	
Original Amount250,000.	
Beginning Year Balance 250,000.	Year End Balance250,000.
FMV at Year End 250,000.	FMV of Consideration0.
Allowance for Doubtful Accounts(other loans only)	0.
Date of Note 09/16/19 Maturity Date	09/16/20 Interest Rate 0.00
Loan Receivable Type 4	
Borrowers Name AI Marina, Inc.	
Borrower's Title AI Marina, Inc.	
Check Box, if Borrower is a Business . X	
Relationship of Borrower (Other loans only) None	2
Repayment Terms Interest only for 3 years	ears
Borrower's Security Marina	
Purpose of Loan Business Development	
Description of Consideration None	
Original Amount 9,000,000.	
Beginning Year Balance 9,000,000.	Year End Balance 9, 500, 000.
FMV at Year End 9,500,000.	FMV of Consideration 0.
Allowance for Doubtful Accounts(other loans only)	0.
Date of Note 08/16/18 Maturity Date	11/01/26 Interest Rate 7.00
Loan Receivable Type	117 017 20 merest (vale 7.00
Borrowers Name	
Borrower's Title	
Check Box, if Borrower is a Business .	
Relationship of Borrower (Other loans only)	
Repayment Terms	
Borrower's Security	
• —	
Purpose of Loan	
Description of Consideration	
Original Amount	Voor End Polones
Beginning Year Balance	Year End Balance
FMV at Year End	FMV of Consideration
Allowance for Doubtful Accounts(other loans only)	
Date of Note Maturity Date	Interest Rate

Name The Pyramid Peak Foundat	tion				rer Identification No
Line 10a - Investments - US and State Government Obligations:	End o State and Local Obligations Book Value	f Year State and Local Obligations FMV	US Governi Obligatio Book Val	ns	f Year US Government Obligations FMV
Tot to Fm 990-PF, Pt II, Ln 10a					
Line 10b - Investme	ents - Corporate	Stock:	Book Value	End of	f Year Fair Market Value
Longleaf Partners Funds Longleaf Partners Inter Longleaf Partners Globa See L-10b Stmt Totals to Form 990-PF, Part II, L	rnational Func al Fund	1	156,880,0 33,969, 34,688, 225,537,9	721.	0. 156,880,023. 33,969,196. 34,688,721. 225,537,940.
Line 10c - Investme	nts - Corporate E	Bonds:	Book Value	End of	Year Fair Market Value
Totals to Form 990-PF, Part II, L	ine 10c				
Line 12 - Investme	ents - Mortgage lo	oans:	Book Value	End of	Year Fair Market Value
Totals to Form 990-PF, Part II, L	.ine 12				
Line 13 - Inve	estments - Other:		Book Value	End of	Year Fair Market Value
Innova Fund III SAM Asıa Pacific Opport Kıtchen Cafe, LLC	unities Fund	LP	6,193,2 11,955,7 2,082,9	29.	6,193,215. 11,955,729. 2,082,942.
Totals to Form 990-PF, Part II, L	ine 13		20,231,8	886.	20,231,886.

Other Assets and Liabilities

2019

Name The Pyramid Peak Foundation		Employe 45-34	er Identification No
Line 15 - Other Assets:	Beginning Year Book Value	End of Book Value	Year Fair Market Value
Art Collection	169,522.	387,429.	387,429.
Totals to Form 990-PF, Part II, line 15	169,522.	387,429.	387,429.
Line 22 - Other Liabilities:		Beginning Year Book Value	Ending Year Book Value

Miscellaneous Statement

2019

Name The Pyramid Peak Foundation	Identification Number
Statement Required By Part VII-A, Line 12:	
All grants are made to a donor-advised fund which makes contributions to various 501(c)(3) organizations which have been recommended by the Foundation. Each of these entitles has its own particular exempt function or activity which has been vetted by the IRS in the process of granting it exempt status.	
Total	

cpcv0801 SCR 04/23/19

Additional information from your 2019 Federal Exempt Tax Return

Form 990-PF Part II Line 10, 12 and 13 Investments

L-10b Stmt

Continuation Statement

Line 10b Description	Line 10b Book	Line 10b FMV
Longleaf Global UCITS Fund	1,385,974.	1,385,974.
Oncternal Therapeutics (Formerly GTX)	2,477,349.	2,477,349.
Longleaf Asıa UCITS	28,695,687.	28,695,687.
Southeastern Concentrated Value- EMEA LTD	1,129,711.	1,129,711.
MIME Holdings, Inc.	1,000,000.	1,000,000.
Total	34,688,721.	34,688,721.