Form 990-PF

Return of Private Foundation

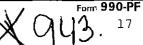
or Section 4947(a)(1) Trust Treated as Private Foundation

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

▶ Go to www irs gov/Form990PFfor instructions and the latest information Department of the Treasury Internal Revenue Service

Open to Public Inspection

Fo	r cal	endar year 2019 or tax year beginning		, 2019, and endir		, 20
Na	me of	foundation			A Employer identification n	umber
,	JAC	K TARVER FON IRRV TR			45-3629	804
Νū	mber	and street (or P.O. box number if mail is not delivered to	street address)	Room/suite	B Telephone number (see in:	structions)
	י הם	BOX 1908			404-41	9-3245
_	_	own, state or province country and ZIP or foreign posta	code			
					C If exemption application is	▶ [] {
1	ORT.	ANDO, FL 32802-1908			pending check here	
_		ck all that apply Initial return	Initial return	of a former public chari		
٠	OHO	Final return	Amended re	= = = = = = = = = = = = = = = = = = =	D 1 Foreign organizations, check 2 Foreign organizations meeti	
		Address change	Name chang		85% test check here and at	
П	Cho		c)(3) exempt private f		computation	
ï		ection 4947(a)(1) nonexempt charitable trust		ivate foundation	E If private foundation status wa	▶ 1
<u>.</u>			Inting method X C		under section 507(b)(1)(A) che	
•		I —	her (specify)	asii Accidai	F If the foundation is in a 60-mo under section 507(b)(1)(B) che	
			olunn (d), must be on c	anh hanna l	under section 307(b)(1)(b) the	ck riele
		► \$ 20,117,741 (Part I, or Analysis of Revenue and Expenses (The		asii basis į		Disbursements
i	CHG	total of amounts in columns (b) (c), and (d)	(a) Revenue and expenses per	(b) Net investment	(c) Adjusted net fo	r charitable
		may not necessarily equal the amounts in	expenses per books	ıncome	income (car	purposes sh basis only)
\neg		column (a) (see instructions))	26 400			odola omy/
	1	Contributions gifts grants etc received (attach schedule) Check if the foundation is not required to	26,400			
	2	attach Sch 8				
	3	Interest on savings and temporary cash invastments	460 750	465 240		ODMO 1
	4	Dividends and interest from securities.	468,757	467,340		STMT 1
	5a	Gross rents .		_		
		Net rental income or (loss)				
цe	6a	Net gain or (loss) from sale of assets not on line 10	651,041			
Revenue	Ь	Gross sales orice for all assets on line 6a 7,701,158.			RECEIVE	D
é	7	Capital gain net income (from Part IV, line 2)		651,041		<u> </u>
œ	8	Net short term capital gain			OCT 2 6 202	n 8
	9	Income modifications			B 001 2 02	J.J.
	10a	Gross sales less returns and allowances				- 8
	b	Less Cost of goods sold			OGDEN, U	T
	c	Gross profit or (loss) (attach schedule)	<u> </u>			
	11	Other income (attach schedule)	113,501	113,408		STMT 2
	12	Total Add lines 1 through 11	1,259,699	1,231,789		
	13	Compensation of officers directors trustees etc	<u>96,330</u>	48,165		48,165
ses	14	Other employee salaries and wages	<u> </u>	NONE	<u>NONE</u>	
ᇤ	15	Pension plans, employee benefits		NONE	NONE	
ă	16a	Legal fees (attach schedule)				<u></u>
Щ	b	Accounting fees (attach schedule)				
Ž	C	Other professional fees (attach scheduler 3	80,614	80,614		
rai	17	Interest				
IST	18	Taxes (attach schedule) (see instructions) 4	15,162	2,105		
틢	19	Depreciation (attach schedule) and depletion				
힏	20	Оссиралсу				
7 0	16a b c 17 18 19 20 21	Travel, conferences, and meetings		NONE	<u>NO</u> NE	
ā	22	Printing and publications		NONE	NONE	
Ē	23	Other expenses (attach schedule) STMT. 5	22, 899	22,899		
¥11	23 24 25	Total operating and administrative expenses				
erê		Add lines 13 through 23	215,005	15 <u>3,</u> 783	NONE	48,1 <u>65</u>
Q	25	Contributions, gifts, grants paid	895,500			895,500
	26	Total expenses and disbursements Add lines 24 and 25	1,110,505	153,783	NONE	943,665
	27	Subtract line 26 from line 12				
		Excess of revenue over expenses and disbursements	14 9,194	1	}	
		Net investment income (if negative, enter -0)		1,078,006.		
į		Adjusted net income (if negative, enter -0-)				
E		erwork Reduction Act Notice see instructions		· · · · · · · · · · · · · · · · · · ·		990-PF (2019)



	Page 2
End o	f year
lue	(c) Fair Market Value

45-3629804

ľ	art II	Balance Sheets	description solumn should be for and of year	Beginning of year	End -	of year
			description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
٦	1	Cash - non-interest-bearii	ng			
			cash investments		2,111,327	. 2,111,327
		Accounts receivable				
-			otful accounts -			
		Less allowance for doub	otful accounts >			
			officers, directors, trustees, and other			,
			ach schedule) (see instructions)			
			eceivable (attach schedule)			
			otful accounts NONE			
2			e			
Assets			eferred charges			
A			government obligations (attach schedule)			
			stock (attach schedule)			
ŀ		•	bonds (attach schedule)			
	11	Investments - land, building: and equipment basis	s, >			
		Less accumulated deprecia			and the second s	
	12	(attach schedule)	loans			
1	13	Investments - other (attai	loans	17,537,138.	16,695,035	. 18,006,414.
ŀ	14	Land, buildings, and	>			
١		Less accumulated deprecia (attach schedule)	tion	N. T. CONTROL OF MAIN TO SERVICE MANAGEMENT TO MINISTER PROPERTY.		2 375
ı		Other assets (describe >				
			completed by all filers - see the	·		
		•	age 1, item I)		18,806,362	. 20,117,741.
コ	17	Accounts payable and a	ccrued expenses	-		
es						
Liabilities			rs, trustees, and other disqualified persons			
إي			tes payable (attach schedule)			MW. 14.2.1.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2
ڐ			· >)			
			,			
	23	Total liabilities (add line	s 17 through 22)		NON	
s		Foundations that follow	FASB ASC 958, check here			
Balances		and complete lines 24,	25, 29, and 30.			
lat	24	Net assets without dono	r restrictions			
	25	Net assets with donor re	strictions · · · · · · · · · · · · · · · · · · ·			
힏	26	Foundations that do not fo	ollow FASB ASC 958, check here			
곲		and complete lines 26 thro	ough 30			
ō	26	Capital stock, trust princi	ipal, or current funds	18,049,852.	18,806,362	
ts		Paid-in or capital surplus, or	land, bldg, and equipment fund			
Net Assets	28	Retained earnings, accumula	ated income, endowment, or other funds			
Ä	29	Total net assets or fund	I balances (see instructions)	18,049,852.	18,806,362	
let	30	Total liabilities and	net assets/fund balances (see			
		instructions)	<u> </u>	18,049,852.	<u> 18,806,362</u>	
			iges in Net Assets or Fund Bala		-	
1	Tota	I net assets or fund b	palances at beginning of year - Part	II, column (a), line 29 (must agree with	
			d on prior year's return)			18,049,852.
2	Ente	r amount from Part I,	line 27a		2	149,194.
3	Othe	r increases not includ	led in line 2 (itemize) > SEE STA	TEMENT 7	3_	698,330.
					4	18,897,376.
			line 2 (itemize) ► SEE STA		_ 5	91,014.
6	Tota	I net assets or fund ba	alances at end of year (line 4 minus l	ine 5) - Part II, column (t	o), line 29 6	18,806,362.
			-			Form 990-PF (2019)

. (a) List and desc	and Losses for Tax on Investigate the kind(s) of property sold (for each warehouse, or common stock, 200	xample, real estate,	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a PUBLICLY TRADED S	SECURITIES				
<u>b</u>					
С					
<u>d</u>					
_e				<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) mini	
a 7,725,728.		7,071,983.			653,745.
c					
d					-
e					
	wing gain in column (h) and owned by	y the foundation on 12/31/69	/n	Gains (Col (h) ga	un minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		(k), but not less t Losses (from co	han -0-) or
			 	-	653,745.
_a b			 		<u> </u>
C			 		
d					
е					····
	(If na	ain, also enter in Part I, line 7	-		
art V Qualification Un or optional use by domestic section 4940(d)(2) applies, h	private foundations subject to the eave this part blank	section 4940(a) tax on net investre	nent inco		Yes X N
	equalify under section 4940(e) Do	• •	ase herro	u :	_ 162 _ A N
Enter the appropriate am	ount in each column for each year	r; see the instructions before making	ng any en	tries.	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution ra (col. (b) divided by	
2018	930,338.	18,211,556.	 	15/ 0.11000 59	0.05108
2017	461,016.	19,310,086.			0.023874
2016	980,559.	18,753,017.			0.052288
2015	1,460,935.	20,303,572.			0.07195
2014	849,939.	20,911,007.	-		0.04064
Total of line 1, column (d	1)		2		0.239848
	for the 5-year base period - divid				
_	foundation has been in existence i		3		0.04797
Enter the net value of no	ncharitable-use assets for 2019 fro	om Part X, line 5	4	19,	401,560
Multiply line 4 by line 3.			5	· · · · · · · · · · · · · · · · · · ·	930,693
Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		10,780
7 Add lines 5 and 6			7		941,473
	ons from Part XII, line 4		8	40/ 40	943,665.

Part VI instructions.

Form !	990-PF (2019) 45-3629804	Page 4
Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instructions)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 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	10,780.
	here $\blacktriangleright X$ and enter 1% of Part I, line 27b	
c	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-)	NONE
3	Add lines 1 and 2	10,780.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	NONE
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	10,780.
6	Credits/Payments	
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 10,732.	
b	Exempt foreign organizations - tax withheld at source	
c	Tax paid with application for extension of time to file (Form 8868) 6c 9,814.	
ď	Backup withholding erroneously withheld	20.546
7	Total credits and payments Add lines 6a through 6d	20,546.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	30.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	0.726
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	9,736.
	VII-A Statements Regarding Activities	Yes No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	7,7
	participate or intervene in any political campaign?	1a X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	16 X
	Instructions for the definition	ID A
	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 X
	Did the foundation file Form 1120-POL for this year?	
a	(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	
-	on foundation managers \$	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 X
_	If "Yes," attach a detailed description of the activities	332 822 229
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 X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5 X
	If "Yes," attach the statement required by General Instruction T	
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	
	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 X
	GA	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	
	(or designate) of each state as required by General Instruction G ² 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 X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	
	Tames and addresses	1 10 X

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Par	t VII-A Statements Regarding Activities (continued)			
		8.33	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	1		
	person had advisory privileges? If "Yes," attach statement See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ SEE STATEMENT 9 Telephone no ▶			
	Located at ▶ ZIP+4 ▶			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		•	\Box
	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		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	微纖	Yes	No
1a	During the year, did the foundation (either directly or indirectly)		***	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		\$	202
	(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? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	800		
	(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)			
Ь	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	1b		X
	Organizations relying on a current notice regarding disaster assistance, check here	50.XX	£ 3.3	Pg (2)
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			% A
	were not corrected before the first day of the tax year beginning in 2019?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		33.3	
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			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		1.00	1
	all years listed, answer "No" and attach statement - see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
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			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X
		_	A DE	/2010

Part	VII-B Statements Regarding Activities f	or Which Form 4	720 May Be Rec	uired (con	tinued)	
5a	During the year, did the foundation pay or incur any amo					Yes No
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (sectio	n 4945(e))?	. Yes	X No	845 60 86 3
	(2) Influence the outcome of any specific public ele	ection (see section	4955), or to carry or	n,		
	directly or indirectly, any voter registration drive?			. Yes	X No	
	(3) Provide a grant to an individual for travel, study, or o				X No	
	(4) Provide a grant to an organization other than a	charitable, etc., org	anization described i	n	_	
	section 4945(d)(4)(A)? See instructions			. Yes	X No	
	(5) Provide for any purpose other than religious, ch			al		
	purposes, or for the prevention of cruelty to children	or animals?		. Yes	X No	
Ь	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions de	scribed in	
	Regulations section 53 4945 or in a current notice regar	ding disaster assistan	ce? See instructions.			5b
	Organizations relying on a current notice regarding disas	ter assistance, check	here		▶	
C	If the answer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the t	ах		
	because it maintained expenditure responsibility for the	grant ⁷		. Yes	No	
	If "Yes," attach the statement required by Regulations se	ction 53 4945-5(d)				
6a	Did the foundation, during the year, receive any fur	nds, directly or indir	ectly, to pay premiui	ms		
	on a personal benefit contract?			. Yes	X No	
b	Did the foundation, during the year, pay premiums, direc	tly or indirectly, on a	personal benefit contra	ıct ⁷		6b X
	If "Yes" to 6b, file Form 8870					
7a	At any time during the tax year, was the foundation a pa				X No	
Ь	If "Yes," did the foundation receive any proceeds or have	any net income attrib	outable to the transact	on ⁷	• • • • •	7b
8	Is the foundation subject to the section 4960 tax on pay					
	remuneration or excess parachute payment(s) during the VIII Information About Officers, Director	year?	ndein Managa	. Yes	X No	\$350 PT (\$150 PT) KI
Part	Information About Officers, Director and Contractors	rs, Trustees, Fou	muation Manager	s, nignly F	aiu Emp	
1	List all officers, directors, trustees, and foundation	n managers and to (b) Title, and average	(c) Compensation	See instruct		
	(-) 1/					(e) Expense account,
	(a) Name and address	hours per week	(if not paid,	employee bene		other allowances
TRUIS'		devoted to position	enter -0-)	and deferred con		
	I BANK		enter -0-)			
		devoted to position TRUSTEE			npensation	other allowances
	I BANK	devoted to position TRUSTEE	enter -0-)		npensation	other allowances
	I BANK	devoted to position TRUSTEE	enter -0-)		npensation	other allowances
	I BANK	devoted to position TRUSTEE	enter -0-)		npensation	other allowances
	I BANK	devoted to position TRUSTEE	enter -0-)		npensation	other allowances
P.O.	Г BANK BOX 1908, ORLANDO, FL 32802-1908	TRUSTEE 1	96,330.	and deferred con	- () -	other allowances
2	F BANK BOX 1908, ORLANDO, FL 32802-1908 Compensation of five highest-paid employees	TRUSTEE 1	96,330.	and deferred con	- () -	other allowances
2	Г BANK BOX 1908, ORLANDO, FL 32802-1908	TRUSTEE 1 (other than those	96,330.	and deferred con	-0-	-0-
P.O. 1	F BANK BOX 1908, ORLANDO, FL 32802-1908 Compensation of five highest-paid employees	devoted to position TRUSTEE 1 (other than those the control of t	96,330.	e 1 - see i	-0- instructio	other allowances
P.O. 1	F BANK BOX 1908, ORLANDO, FL 32802-1908 Compensation of five highest-paid employees "NONE."	TRUSTEE 1 (other than those)	96,330. e included on line	e 1 - see i	nstructio	other allowances -()- ons). If none, enter (e) Expense account,
2 (a)	Compensation of five highest-paid employees "NONE."	devoted to position TRUSTEE 1 (other than those the control of t	enter -0-) 96,330. e included on line (c) Compensation	e 1 - see i (d) Contribu employee t plans and d compens	nstructio	other allowances - 0 - Ins). If none, enter (e) Expense account, other allowances
2 (a)	Compensation of five highest-paid employees "NONE."	devoted to position TRUSTEE 1 (other than those the control of t	96,330. e included on line	e 1 - see i (d) Contribu employee t plans and d	nstructio	other allowances -()- ons). If none, enter (e) Expense account,
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2 (a)	Compensation of five highest-paid employees "NONE."	devoted to position TRUSTEE 1 (other than those the control of t	enter -0-) 96,330. e included on line (c) Compensation	e 1 - see i (d) Contribu employee t plans and d compens	nstructio	other allowances - 0 - Ins). If none, enter (e) Expense account, other allowances
2 (a)	Compensation of five highest-paid employees "NONE."	devoted to position TRUSTEE 1 (other than those the control of t	enter -0-) 96,330. e included on line (c) Compensation	e 1 - see i (d) Contribu employee t plans and d compens	nstructio	other allowances - 0 - Ins). If none, enter (e) Expense account, other allowances
2 (a)	Compensation of five highest-paid employees "NONE."	devoted to position TRUSTEE 1 (other than those the control of t	enter -0-) 96,330. e included on line (c) Compensation	e 1 - see i (d) Contribu employee t plans and d compens	nstructio	other allowances - 0 - Ins). If none, enter (e) Expense account, other allowances
2 (a)	Compensation of five highest-paid employees "NONE."	devoted to position TRUSTEE 1 (other than those the control of t	enter -0-) 96,330. e included on line (c) Compensation	e 1 - see i (d) Contribu employee t plans and d compens	nstructio	other allowances - () - Ins). If none, enter (e) Expense account, other allowances
2 (a)	Compensation of five highest-paid employees "NONE."	devoted to position TRUSTEE 1 (other than those than those the position of t	enter -0-) 96,330. e included on line (c) Compensation	e 1 - see i (d) Contribu employee t plans and d compens	instructio tionsto tenefit eferred ation	other allowances - () - Ins). If none, enter (e) Expense account, other allowances

	ghest-paid independent contractors for professional services. See instructions.		
		Type of service	(c) Compensation
ENSPRING INV	VESTMENT MANAGMENT	T MANAGEMEN	00 614
	TINA FIZ TWEN	I MANAGEMEN	80,614.
		 	
			
	r of others receiving over \$50,000 for professional services	<u></u>	NONE NONE
art IX-A	Summary of Direct Charitable Activities		
	dation's four largest direct charitable activities during the tax year. Include relevant statistical information and other beneficiaries served, conferences convened, research papers produced, etc	such as the number of	Expenses
1 NONE			
2			
		 [
4			
art IX-B	Summary of Program-Related Investments (see instructions)		
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 <u>NONE</u>			
			
			
2			
2			
All other prog	ram-related investments. See instructions		
	ram-related investments. See instructions		
All other prog	gram-related investments. See instructions		

Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see.instructions.)	ign found	lations,
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	17,333,688.
	Average of monthly cash balances	1b	2,363,327.
	Fair market value of all other assets (see instructions)	1c	NONE
		1d	19,697,015.
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	NONE
3	Subtract line 2 from line 1d	3	19,697,015.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	295,455.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V. line 4	5	19,401,560.
6	Minimum investment return. Enter 5% of line 5	6	970,078.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here and do not complete this part.)	dations	
1	Minimum investment return from Part X, line 6	1	970,078.
2 a	Tax on investment income for 2019 from Part VI, line 5 2a 10,780.		
ь	Income tax for 2019. (This does not include the tax from Part VI.) 2b	1	
c	Add lines 2a and 2b	2c	10,780.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	959,298.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	959,298.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1	7	959,298.
Par	Qualifying Distributions (see instructions)	<u> </u>	
_	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.	 	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		943,665.
b		1a	
_	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1b	
2		1 _ 1	NONE
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the.		MONT
a	Suitability test (prior IRS approval required)	3a	NONE
ь		3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	943,665.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	40 500
_	Enter 1% of Part I, line 27b. See instructions		10,780.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		932,885.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		whether the foundation

Form **990-PF** (2019)

Pa	t XIII . Undistributed Income (see insti	ructions)			
_		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI,	COIPES	700/0 PHO 10 20 10	2010	
	line 7	2847 200 (200 (200 (200 (200 (200 (200 (200		<u> </u>	959,298.
	Undistributed income, if any, as of the end of 2019			878,948.	
	Enter amount for 2018 only	**************************************	NONE	070,740.	
	Excess distributions carryover, if any, to 2019		NONE		**************************************
	From 2014 NONE				
	From 2015 NONE				
_	From 2016 NONE				
	From 2017 NONE				
	From 2018 NONE				
_	Total of lines 3a through e	NONE			
4	Qualifying distributions for 2019 from Part XII,				
	line 4 ▶ \$943,665.				
a	Applied to 2018, but not more than line 2a			878,948.	
b	Applied to undistributed income of prior years				
	(Election required - see instructions)		NONE		
С	Treated as distributions out of corpus (Election				
	required - see instructions)	NONE	C NORTH AND ADDRESS OF THE PARTY OF THE PART		
	Applied to 2019 distributable amount				64,717.
	Remaining amount distributed out of corpus	NONE			
Ş	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	NONE			NONE
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	NONE			
	Prior years' undistributed income Subtract				
	line 4b from line 2b		NONE		
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		NONE		
d	Subtract line 6c from line 6b Taxable		270275		
_	amount - see instructions		NONE		
E	4a from line 2a Taxable amount - see				le de
	instructions				A 5 \ C00080994600000 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
f	Undistributed income for 2019 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2020				894,581.
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	٠,	Security 1	bir sangidiyinda ironi i in anagan	terminate and conjugate and a second
	required - see instructions)	NONE			
8	Excess distributions carryover from 2014 not				
	applied on line 5 or line 7 (see instructions)	NONE			
9	Excess distributions carryover to 2020.				
	Subtract lines 7 and 8 from line 6a	NONE		######################################	
	Analysis of line 9				
	Excess from 2015 NONE				
	Excess from 2016 NONE				
	Excess from 2017 NONE				
	Excess from 2018 NONE				
_ <u>e</u>	Excess from 2019 · · · NONE		W. 1997 S.	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	CONTRACTOR STATE OF THE PARTY O

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines.

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

Part XV Supplementary Information (3 Grants and Contributions Paid During	continued)_	round for	Futura Dayment	
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	If recipient is an individual,	Foundation	uture Fayment	
Necipient // Accordance // Acc	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				
SEE STATEMENT 25				895,500.
				005 500
Total	<u> </u>	<u> </u>		895,500.
b Approved for future payment				
			ĺ	
			}	1
			[ĺ
		}		
		1		
			1	1
	L			
Total			▶ 3b	

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated 1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	/ section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See instructions)
a					(OSO MORAGERONS /
b		<u> </u>			
	<u> </u>	-			
	<u> </u>				
			 		
e					·
·					
g Fees and contracts from government agencies		<u> </u>	 		
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments.		·-	14	160 757	
4 Dividends and interest from securities			14	468,757.	
5 Net rental income or (loss) from real estate	· · · · · ·				-
a Debt-financed property					
b Not debt-financed property			 		
6 Net rental income or (loss) from personal property		<u> </u>			
7 Other investment income			10	CE 7 044	
8 Gain or (loss) from sales of assets other than inventory	 		18	651,041.	·
9 Net income or (loss) from special events $\cdot\cdot\cdot$	<u> </u>		 		
10 Gross profit or (loss) from sales of inventory			 		 _
11 Other revenue a	ļ				
b PARTNERSHIP INCOME		<u> </u>	1	113,501.	
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)				1,233,299.	
13 Total. Add line 12, columns (b), (d), and (e)				13	1,233,299.
(See worksheet in line 13 instructions to verify calci					
Part XVI-B Relationship of Activities	to the A	complishment of E	xempt Pur	ooses	
Explain below how each activit accomplishment of the foundation					
					
					
					
					
					
					-
		NOT APPLICABI			
		NOT APPLICABL			
·					
			_		
					·
					
					
					

		Organizations									
1	Did the	organization direct	ly or indirectly	engage in any of t	he following	with any	y other organiza	tion described		Yes	No
		tion 501(c) (other			-		-				
		rations?					, , , , , , , , , , , , , , , , , , , ,	J 10 P1			
а	•	ers from the reporting	a foundation to	a noncharitable evi	emnt organiz	zation of					İ
u		•	•								
		sh							1a(1)		X
_	• •	er assets							1a(2)		<u> X</u>
þ		ransactions.									
	(1) Sal	es of assets to a non	icharitable exen	npt organization					1b(1)		<u>X</u>
	(2) Pur	chases of assets fro	m a noncharital	ole exempt organiza	ition				1b(2)		_X_
	(3) Rer	ntal of facilities, equi	pment, or other	assets					1b(3)		_X
	(4) Rei	mbursement arrange	ements						1b(4)		X
		ins or loan guarantee							16(5)		X
		formance of services								_	X
											X
		g of facilities, equipm	-							¢_ ;	
a		answer to any of th									
		of the goods, other									
	value i	n any transaction of	r sharing arrang	gement, show in co	olumn (d) th						
(a) Li	ne no	(b) Amount involved	(c) Name of	noncharitable exempt org	anization	(d) Desc	ription of transfers, ti	ansactions, and shar	ing arra	ngeme	nts
					-						
			f	 -			·			_	
	 -		 							_	
											
			 								
			ļ								
		<u> </u>					· _				
2a	Is the	foundation directly	or indirectly af	filiated with, or rela	ated to, one	or more	e tax-exempt or	ganızations _			_
	describ	ed in section 501(c)	(other than se	ction 501(c)(3)) or i	n section 52	77			Ye	es }	No
ь		" complete the follow						_			
		(a) Name of organizatio		(b) Type of o	organization		(c) De	escription of relations	hip		
		 _									
											
				<u> </u>							
							<u></u>				
							_				
	Under	penalties of perjury, I decia	are that I have evam	and this seture including	accompanying ech	adules and a	statements and to the	hest of my knowledge	e and h	oliof it	is true
		t, and complete Declaration o									
Sigr		110011	2011	1				May the IRS	discus	s this	return
Here		were of	sezec .	10/21/2	020	TRUST	:EE	with the pre	parer_s	hown _	below?
iei t	Sign	ature of officer or trustee	_	Date		Title		See instruction	s X	Yes	No
	TR	UIST BANK FKA	SUNTRUST								
1-11		Print/Type preparer's na		Preparer's sugnatur	DIK)	Date		TIN		
Paid		SHAWN P. HAN	ILON			/ n 4	10/21/202	0 self-employed	P009	6592	23
Prep	arer			OUSECOOPERS			•	n's EIN ► 13-	1008	_	
	Only		0 GRANT ST					.02.10			
	~y		TTSBURGH,		152	19	, or -	ne no _412-3	55-6	በበበ	
		I PI	TISBUKGH,	PA	132	17					(2019)
								For	ın JJ(7-F	(40 (9)

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury

Internal Revenue Service
Name of the organization

► Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ► Go to www.irs.gov/Form990for the latest information.

Schedule of Contributors

OMB No 1545-0047

2019

Employer identification number

JACK TARVER FDN IRRV TR 45-3629804 Organization type (check one). Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 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).

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

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

JSA

9E1251 1 000

Name of organization

JACK TARVER FDN IRRV TR

Employer identification number 45-3629804

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JACKSON W TARVER JR ESTATE C/O TRUIST BANK ORALNDO, FL 32802	\$26,400.	Person X Payroll X Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

JACK TARVER FDN IRRV TR

45-3629804

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1_	TREESDALE FIXED INCOME FUND LP		
!		\$4,559.	06/21/2019
(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
		\$	

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	50,434. 16,579. 58,204. 33,673. 4,377. 2,991. 20,463. -3,359. -3,359.	467,340.
REVENUE AND EXPENSES PER BOOKS	50,434. 16,579. 1,054. 58,204. 33,673. 4,377. 2,251. 20,463. -3,359. -140. -3,59. -3,59.	468,757.
DESCRIPTION	USGI REPORTED AS NONQUALIFIED DIVIDENDS FOREIGN DIVIDENDS NONDIVIDEND DISTRIBUTIONS DOMESTIC DIVIDENDS OTHER INTEREST CORPORATE INTEREST FOREIGN INTEREST EXEMPT INTEREST EXEMPT INTEREST O.S. GOVERNMENT INTEREST (FEDERAL TAXABLE FEDERALLY TAXABLE MUNICIPAL INTEREST BOND PREMIUM AMORTIZATION-OTHER INTEREST BOND PREMIUM AMORTIZATION - FOREIGN INTER NONQUALIFIED DOMESTIC DIVIDENDS	TOTAL

Н

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21/2020
17W 10/2
517 V

INCOME	
- OTHER	
PART I	
FORM 990PF,	
FORM	

NET INVESTMENT INCOME	1 1 1 1	113,408.	113,408.
REVENUE AND EXPENSES PER BOOKS	; 1 1 1 1 1 1 1	113,501.	113,501.
			TOTALS
DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	FROM PARTNERSHIP/S-CORP	

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FORM 990PF, PART I - OTHER PROFESSIONAL FEES

NET INVESTMENT INCOME	80,614.
REVENUE AND EXPENSES PER BOOKS	80,614.
	TOTALS
	FEES
NOI	INT MGI
DESCRIPTION	INVESTMENT MGT FEES

TAXES	
1	ii
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Ä	ii
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~	II
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NET INVESTMENT INCOME	1 1 1 1 1 1	2,105.	2,105.
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1 1 1 1 1 1 1 1	2,105. 2,325. 10,732.	15,162.
DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	FOREIGN TAXES FEDERAL TAX PAYMENT - PRIOR YE FEDERAL ESTIMATES - PRINCIPAL	TOTALS

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EXPENSES	
- OTHER	
	H
PART I	
990PF,	II II
FORM	

NET INVESTMENT INCOME	754. 22,145.	22,899.
REVENUE AND EXPENSES PER BOOKS	754. 22,145.	22,899.
		TOTALS
DESCRIPTION	INVESTMENT EXPENSES PARTNERSHIP EXPENSE	

FORM 990PF, PART II - OTHER INVESTMENTS

======================================	=== COST/ FMV C OR F	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING . FMV
PRIOR YEAR BAL DOUBLELINE FDS TR TTL RTN BD I VANGUARD FIXED INCOME ST FED F VANGUARD SHORT TERM INVESTMENT WS INTERMEDIATE TAXABLE FIXED AMA US EQUITY OPPORTUNITY FUND EATON VANCE GROWTH TR ATL SMID RIVER ROAD FOCUSED ABSOLUTE VA SARATOGARIM LARGE CAP QUALITY SPDR S&P 500 ETF JOHCM INTL SLCT FD CL I INVESCO OPPENHEIMER DEVELP MRK MULTI-STRATEGY SPECIAL LIQUIDA TREESDALE FIXED INCOME FUND LP AQR FUNDS LNG EQTY	,	7,537,138	1,100,000 2,000,000 3,000,000 3,976,74 250,00 1,468,55 1,052,20 1,052,20 250,00 -8,80 -8,80 -8,80	1,090,76 2,043,800 3,055,360 6,048,466 1,743,883 1,502,111 550,70 619,64 619,64 322,82
	TOTALS	17,537,138.	16,695,035. ====================================	18,006,414.

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FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION	AMOUNT
MUTUAL FUND TIMING DIFFERENCE ARCHSTONE COST BASIS ADJ PARTNERSHIP INCOME/BASIS ADJ PURCHASE OF ACCRUED INTEREST ADDITION BOND ACCRETION COST BASIS ADJ	12,290. 225,757. 451,047. 206. 4,377. 4,653.
TOTAL	698,330.

FORM 990PF,	PART III -	OTHER	DECREASES	IN NE	WORTH	OR	FUND BALANCES	

DESCRIPTION	AMOUNT
CY PENDING SALES ADJ PURCHASE OF ACCRUED INTEREST C/O AMORTIZATION EXCESS OF FMV OVER ASSETS REC'D	81,454. 4,091. 4,294. 1,175.
TC	TAL 91,014.

FORM 990PF, PART VII-A, LINE 14 - BOOKS ARE IN THE CARE OF _____

NAME: TRUIST BANK

TRUIST BANK

ADDRESS: P.O. BOX 1908

ORLANDO, FL 32802-1908

TELEPHONE NUMBER: (404)419-3245

JACK TARVER FDN IRRV TR 45-3629804 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: ONE FOR HEALTH FOUNDATION ADDRESS: 877 JEFFERSON AVE MEMPHIS, TN 38103 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: FOUNDATION FOR METROWEST ADDRESS: 3 ELLIOT ST NATICK, MA 01760 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: ATHENS AREA COMMUNITY FOUNDATION ADDRESS: PO BOX 1543 ATHENS, GA 30603 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT:

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PC

JACK TARVER FDN IRRV TR 45-3629804 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: Waypoint Adventure ADDRESS: 453 CONCORD AVENUE Concord, MA 02421 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 25,000. RECIPIENT NAME: MANNA FOOD BANK ADDRESS: 627 SWANNANOA RIVER RD ASHEVILLE, NC 28805 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: 20,000. AMOUNT OF GRANT PAID RECIPIENT NAME: WINSHIP CANCER INSTITUTE OF EMORY UNIVER ADDRESS: 1365 CLIFTON NE ATLANTA, GA 30322 RELATIONSHIP: NONE PURPOSE OF GRANT:

47

50,000.

PC

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

JACK TARVER FDN IRRV TR 45-3629804 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: MOUNTAIN AIR COMMUNITY ADDRESS: 65 MOUNTAIN AIR DRIVE BURNSVILLE, NC 28714 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: RAZIAS RAY OF HOPE FOUNDATION ADDRESS: PO BOX 81052 WELLESLEY, MA 02481 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: TANZANIAN CHILDREN'S FUND ADDRESS: 2 GARDEN STREET CAMBRIDGE, MA 02138 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING

AMOUNT OF GRANT PAID

PC

5,000.

FOUNDATION STATUS OF RECIPIENT:

JACK TARVER FDN IRRV TR 45-3629804 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: Memories Live Foundation ADDRESS: 55 UNION PLACE BOX 164 Summit, NJ 07901 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: Shultz's Guest House ADDRESS: 7 BURGESS LN DEDHAM, MA 02026 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC 25,000. AMOUNT OF GRANT PAID RECIPIENT NAME: WELLESLY FRIENDS OF METCO ADDRESS: P.O. BOX 81163 WELLESLEY, MA 02481 RELATIONSHIP: NONE

AMOUNT OF GRANT PAID

PURPOSE OF GRANT: GENERAL OPERATING

PC

FOUNDATION STATUS OF RECIPIENT:

10,000.

JACK TARVER FDN IRRV TR 45-3629804 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: ANIMAL RESCUE LEAGUE OF BOSTON ADDRESS: 10 CHANDLER ST BOSTON, MA 02116 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: WELLESLEY SCHOLARSHIP FOUNDATION ADDRESS: PO BOX 81207 WELLESLEY, MA 02481 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: 20,000. AMOUNT OF GRANT PAID RECIPIENT NAME: Camp Casco ADDRESS: PO BOX 330 Sudbury, MA 01776 **RELATIONSHIP:** NONE PURPOSE OF GRANT:

AMOUNT OF GRANT PAID

PC

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

10,000.

NONE
PURPOSE OF GRANT:
GENERAL OPERATING
FOUNDATION STATUS OF RECIPIENT:
PC

RECIPIENT NAME:
ATHENS AREA HUMANE SOCIETY
ADDRESS:
1781 MARS HILL RD
WATKINSVILLE, GA 30677
RELATIONSHIP:
NONE
PURPOSE OF GRANT:

RECIPIENT NAME:
HABITAT FOR HUMANITY
ADDRESS:
271 CHESTER AVENUE
ATLANTA, GA 30316
RELATIONSHIP:
NONE

GENERAL OPERATING

NONE
PURPOSE OF GRANT:
GENERAL OPERATING
FOUNDATION STATUS OF RECIPIENT:

JACK TARVER FDN IRRV TR 45-3629804 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _____ RECIPIENT NAME: CYCLE TO SURVIVAL ADDRESS: 885 SECOND AVENUE 7TH FLOOR NEW YORK, NY 10017 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: RECIPIENT NAME: ONE-REVOLUTION FOUNDATION ADDRESS: PO BOX 681026 Park City, UT 84068 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: CAMP JULIETTE LOW INC ADDRESS: PO BOX 5113 MARIETTA, GA 30061 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC

JACK TARVER FDN IRRV TR 45-3629804 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: MAGICAL MOON FOUNDATION, LLC ADDRESS: PO BOX 83 MARSHFIELD HILLS, MA 02051 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: SUSTAINABLE WELLESLEY ADDRESS: 75 EMERSON ROAD WELLESLEY, MA 02482 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: MARSHFIELD FOOD PANTRY ADDRESS: 1981 OCEAN STREET MARSHFIELD, MA 02050 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID

10,000.

JACK TARVER FDN IRRV TR 45-3629804 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID

29 LOWELL STREET
LEWISTON, ME 04240
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL OPERATING
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID

7601 E TREASURE DR
NORTH BAY VILLAGE, FL 33141
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT: PC

 JACK TARVER FDN IRRV TR 45-3629804 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: SHEPARDS COUNSELING SERVICES ADDRESS: 2601 BROADWAY E SEATTLE, WA 98102 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: READ BOSTON ADDRESS: 43 HAWKINS STREET BOSTON, MA 02114 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: SALVATION ARMY ADDRESS: 204 HAYWOOD STREET ASHEVILLE, NC 28806 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

PC

50,000.

JACK TARVER FDN IRRV TR 45-3629804 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: PLANNED PARENTHOOD LEAGUE OF MASS ADDRESS: 1055 COMMONWEALTH AVENUE Boston, MA 02215-1001 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: CONGREGATIONAL CHURCH OF SOUTH DARTMOUTH ADDRESS: 17 MIDDLE STREET DARTMOUTH, MA 02748 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 15,000. RECIPIENT NAME: ICE ADAPTIVE SPORTS INC. ADDRESS: 150 MALONE RIDGE ROAD WASHINGTON, PA 15301 RELATIONSHIP:

AMOUNT OF GRANT PAID

20,000.

NONE

PC

PURPOSE OF GRANT: GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

JACK TARVER FDN IRRV TR 45-3629804 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID .

RECIPIENT NAME:

UNITARIAN UNIVERSALIST WELLESLEY HILL CH

ADDRESS:

309 WASHINGTON ST WELLESLEY, MA 02481

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

WOKRING WHEELS

ADDRESS:

76 WEAVERVILLE ROAD ASHEVILLE, NC 28804

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID 20,000.

RECIPIENT NAME:

WELLESLEY FREE LIBRARY FOUNDATION

ADDRESS:

530 WASHINGTON ST WELLESLEY, MA 02482

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL OPERATING

FOUNDATION STATUS OF RECIPIENT:

PC

JACK TARVER FDN IRRV TR 45-3629804 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: Wellesley Friendly Aid ADDRESS: 219 WASHINGTON ST WELLESLEY, MA 02481 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: RECIPIENT NAME: WELLESLEY A BETTER CHANCE ADDRESS: 396 WASHINGTON ST., BOX 221 WELLESLEY, MA 02481 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: 10,000. AMOUNT OF GRANT PAID RECIPIENT NAME: IMPACT MELANOMA ADDRESS: ONE CONCORD FARM 490 VIRGINIA ROAD CONCORD, MA 01742 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID

5,000.

JACK TARVER FDN IRRV TR 45-3629804 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: THE HUMAN RELATIONS SERVICE ADDRESS: 11 CHAPEL PLACE WELLESLEY HILLS, MA 02481 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: SANDY SPRINGS UNITED METHODIST CHURCH ADDRESS: 86 MOUNT VERNON HWY ATLANTA, GA 30328 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: 12,000. AMOUNT OF GRANT PAID RECIPIENT NAME: BOSTON RESCUE MISSION ADDRESS: PO BOX 120069 BOSTON, MA 02112 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

PC

10,000.

JACK TARVER FDN IRRV TR 45-3629804 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _____ RECIPIENT NAME: Marshfield Boys & Girls Club ADDRESS: 37 PROPRIETORS DR Marshfield, MA 02050 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: RECIPIENT NAME: WELLESLEY FOOD PANTRY INC ADDRESS: 207 WASHINGTON ST WELLESLEY, MA 02481 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: CROSSROADS ADDRESS: 1700 E THOMAS ROAD PHOENIX, AZ 85016 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING

AMOUNT OF GRANT PAID

PC

10,000.

FOUNDATION STATUS OF RECIPIENT:

JACK TARVER FDN IRRV TR 45-3629804 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: CARE 2 COMMUNITIES ADDRESS: 24 SCHOOL STREET BOSTON, MA 02108 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: RECIPIENT NAME: HOPE LODGE ADDRESS: 125 SOUTH HUNTINGTON AVENUE BOSTON, MA 02130 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

TOTAL GRANTS PAID:

895,500.

50,000.

FEDERAL FOOTNOTES

PART VIII, LINE 1: OFFICERS, DIRECTORS, TRUSTEES, FOUNDATION MANAGERS, HIGHEST COMPENSATED EMPLOYEES AND CONTRACTORS: THE COMPENSATION REPORTED IN COLUMN (C) IS CALCULATED BASED ON PERIODIC MARKET VALUES AND/OR THE APPLICABLE FEE AGREEMENT. IT IS NOT DETERMINED ON AN HOURLY BASIS AND THE REFERENCE TO ONE HOUR PER WEEK IS AN ESTIMATE ONLY. CORPORATE TRUSTEE SERVICES INCLUDE, BUT ARE NOT LIMITED TO, ADMINISTRATIVE SERVICES SUCH AS FIDUCIARY ACCOUNTING, CUSTODY OF ASSETS, COMPLYING WITH TAX FILING REQUIREMENTS, COMPLYING WITH DISTRIBUTION PROVISIONS, AND COMPLYING WITH FEDERAL AND STATE LAWS APPLICABLE TO PRIVATE FOUNDATIONS, PLUS ASSET MANAGEMENT SERVICES SUCH AS CREATING ASSET ALLOCATION STRATEGIES, INVESTMENTS REPORTING AND REALLOCATING AND REBALANCING OF PORTFOLIOS AS NECESSARY.