Return of Private Foundation

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

OMB No. 1545-0047

Department of the Treasury

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

		Go to www.irs.gov/Form990PF to				on. · · · · · · · · · · · · · · · · · · ·	
	calen	dar year 2019 or tax year beginning	, 20	19, and e		r identification numbe	, 20
							:
		Douglas and Victoria Kay Ivester Fou street (or P.O. box number if mail is not delivered to street address)		C. m/suite		004727 e number (see instructi	one)
			noo	iii/Suite	•	•	0113)
41	1 Pe	achtree Battle Ave., NW state or province, country, and ZIP or foreign postal code				310-7000	
					C If exempt	ion application is pend	ing, check here ▶
		A GA 30305-4032		ر دانس داد د			
G	Check	all that apply: Initial return Initial return Amended r	of a former publi	C Charity	D 1. Foreigi	n organizations, check	here ▶ 🗌
		☐ Address change ☐ Name char				organizations meeting	
	Chook	type of organization: Section 501(c)(3) exempt pa		All		here and attach compu foundation status was	
		n 4947(a)(1) nonexempt charitable trust 🔲 Other tax		9 1		07(b)(1)(A), check here	
		narket value of all assets at J Accounting method					
		f year (from Part II, col. (c),	. E. Ouon 🗀 ,	100,441		ndation is in a 60-mont ction 507(b)(1)(B), checl	
	line 16		e on cash basis.)				_
_	art I	Analysis of Revenue and Expenses (The total of		T			(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment come	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions).)	books	"			(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	1,300,000	. [
	2	Check ► ☐ if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	741.		1,378.		
	4	Dividends and interest from securities	1,231,886.	1,2	31,678.	_, <u>, , , , , , , , , , , , , , , , , , </u>	
	5a	Gross rents					
	b	Net rental income or (loss)					
e	6a	Net gain or (loss) from sale of assets not on line 10	2,638,306.	•			
2021 Revenue	b	Gross sales price for all assets on line 6a 10,718,992.					
≨ ⊽	7	Capital gain net income (from Part IV, line 2)		2,6	38,306.		
7 <u>1</u>	8	Net short-term capital gain				2,638,306.	
x	9	Income modifications		 			
27	10a	Gross sales less returns and allowances					
<u>~</u>	b	Less: Cost of goods sold					
AP	11	Other income (attach schedule) See. Stmt	-2,139	-	-2,139.		
Ω	12	Total. Add lines 1 through 11	5,168,794		69,223.	2,638,306.	
ANNED	13	Compensation of officers, directors, trustees, etc.	170,425		41,106.		129,319.
	14	Other employee salaries and wages		1		RECEN	/ED
₹ä	15	Pension plans, employee benefits				0	LU
Ç	16a	Legal fees (attach schedule)			13	0CT 20	2020 9
CM.	b	Accounting fees (attach schedule)				0CT 20	020 후
Operating and Administrative Exp	С	Other professional fees (attach schedule) L-16c Stmt	73,896		73,896.		RS
Ţ	17	Interest	3.			OGDEN	HIT
Jis	18	Taxes (attach schedule) (see instructions) See. Stmt	38,000	· 			
Ē	19	Depreciation (attach schedule) and depletion		-			
ğ	20	Occupancy					070
ğ	21	Travel, conferences, and meetings	272	•			272.
ā	22	Printing and publications		+			
gu	23 24	Other expenses (attach schedule)		+			
ati	24	Add lines 13 through 23	202 506	,	15,002.		129,591.
De.	25	Contributions, gifts, grants paid	282,596 1,105,000		13,002.		1,105,000.
ō	26	Total expenses and disbursements. Add lines 24 and 25	1,387,596	1	15,002.		1,234,591.
	27	Subtract line 26 from line 12:	2,307,330	- 			1
	a a	Excess of revenue over expenses and disbursements	3,781,198	.			
	Ь	Net investment income (if negative, enter -0-) .			54,221.		
	C	Adjusted net income (if negative, enter -0-)		1		2,638,306.	

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2019)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End o	f year
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Valu	1e	(c) Fair Market Value
	1	Cash-non-interest-bearing				
	2	Savings and temporary cash investments	89,333.	2,102,2	04.	2,102,204.
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				j
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				<u> </u>
	7	Other notes and loans receivable (attach schedule) ▶				
		Less: allowance for doubtful accounts ▶				
ets	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
Ä	10a	Investments—U.S. and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule) L-10b Stmt	30,768,797.	32,582,8	01.	33,617,023.
	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	59,103.	13,4	26.	64,169.
	14	Land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe ▶)				
	16	Total assets (to be completed by all filers—see the			2.	05 700 006
	479	instructions. Also, see page 1, item l)	30,917,233.	34,698,4	31.	35,783,396.
	17	Accounts payable and accrued expenses				
S	18	Grants payable		<u>.</u>		
Liabilities	19	Deferred revenue				
ğ	20	Loans from officers, directors, trustees, and other disqualified persons				
<u>"</u>	21	Mortgages and other notes payable (attach schedule)				
	22 23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)	J - 1,1-2,1-1	·		
	23					
alances		Foundations that follow FASB ASC 958, check here ► □ and complete lines 24, 25, 29, and 30.			!	
ă	24	Net assets without donor restrictions				1
	25	Net assets with donor restrictions				
P	25	Foundations that do not follow FASB ASC 958, check here ▶ 🗵				
5		and complete lines 26 through 30.				
L.	26	Capital stock, trust principal, or current funds	30,917,233.	34,698,4	31.	
0	27	Paid-in or capital surplus, or land, bldg., and equipment fund	00/32//2007	<u> </u>		
ë	28	Retained earnings, accumulated income, endowment, or other funds				
SS	29	Total net assets or fund balances (see instructions)	30,917,233.	34,698,4	31.	
Net Assets or Fund B	30	Total liabilities and net assets/fund balances (see		. , , -		
Š		instructions)	30,917,233.	34,698,4	31.	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances		, , -		<u> </u>
		al net assets or fund balances at beginning of year-Part II, colu	mn (a), line 29 (mus	t agree with		
•		of-year figure reported on prior year's return)			1	30,917,233.
2		er amount from Part I, line 27a			2	3,781,198.
3		er ıncreases not included in line 2 (itemıze) ▶			3	
4		lines 1, 2, and 3			4	34,698,431.
5					5	
6	Tota	reases not included in line 2 (itemize) ► If net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), li	ne 29	6	34,698,431.

Part	V Capital Gains and I	osses for Tax on Investmen	t Income	Taxu	γ	
		s) of property sold (for example, real estate, or common stock, 200 shs. MLC Co.)), 	(b) How acquired P—Purchase D—Donation	(c) Date acc (mo., day,	
1a	UBS Publicly Held Se	ecurities		P	Various	Various
b	Morgan Stanley Manac	ged Account		P	Various	Various
c				 		
<u>d</u>						
ее		40.5	(=) (0==)		 	(h) Com or (loca)
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		(h) Gain or (loss) ((e) plus (f) minus (g))
a	9,828,265.			7,483,609.		2,344,656.
þ	890,727.			597,077.		293,650.
<u> </u>						
<u>d</u>				····		
е	Complete only for assets show	ing gain in column (h) and owned by t	he foundation	on 12/31/69.	m.c	ains (Col. (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	ss of col (i) l. (j), if any	col. (k	iains (Coi. (n) gain minus), but not less than -0-) or Losses (from col. (h))
а	0.	0.		0.		2,344,656.
<u>_</u>	0.	0.		0.		293,650.
С						
d						
е						
2	Capital gain net income or (net capital iossi	o enter in Pa	•	_	
		(if (loss), en	ter -0- in Pa		2	2,638,306.
3	If gain, also enter in Part I,	or (loss) as defined in sections 12 line 8, column (c). See instruction	ons. If (loss)), enter -0- ın }		2 630 306
Part	Part I, line 8	r Section 4940(e) for Reduce	d Toy on A	let Investment	Income	2,638,306.
Was t		this part blank. ection 4942 tax on the distributab alify under section 4940(e). Do no			base period	i? ☐ Yes ⊠ No
1	Enter the appropriate amou	nt in each column for each year;	see the instri	uctions before m	aking any e	
Cale	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) of noncharitable-use a	ssets	(d) Distribution ratio (col. (b) divided by col. (c))
	2018	903,255		25,081,3	304.	0.036013
	2017	693,626		18,716,6		0.037059
	2016	519,738		13,353,5		0.038921
	2015	382,315		10,546,9		0.036249
	2014	240,039	•	7,723,0	113.	0.031081
2	Total of line 1, column (d)				. 2	0.179323
3		or the 5-year base period—divide		line 2 by 50 o		0.175525
3		ndation has been in existence if k			. 3	0.035865
4	Enter the net value of nonch	naritable-use assets for 2019 from	n Part X, line	5	. 4	31,507,040.
5	Multiply line 4 by line 3 .				. 5	1,130,000.
6	Enter 1% of net investment	income (1% of Part I, line 27b)			. 6	37,542.
7	Add lines 5 and 6				. 7	1,167,542.
8	Enter qualifying distributions	s from Part XII, line 4			. 8	1,234,591.
	If line 8 is equal to or greate Part VI instructions.	er than line 7, check the box in Pa	art VI, line 1t	b, and complete	that part us	ing a 1% tax rate. See the

Part '	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instru	ctior	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶□ and enter "N/A" on line 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		37 <u>,5</u>	42.
	here ► 🗵 and enter 1% of Part I, line 27b			l
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-)			0.
3	Add lines 1 and 2	3	37,5	42.
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	3	37 <u>,5</u>	42.
6	Credits/Payments:			1
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 40,166.	-		1
b	Exempt foreign organizations—tax withheld at source	[
C	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
_d	Backup withholding erroneously withheld		- 1	
7	Total credits and payments. Add lines 6a through 6d		0,1	66.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	· · · · · · · · · · · · · · · · · · ·	2 6	24
10			2,0	24.
11 Part	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 2,624. Refunded ▶ 11 VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	\top	Yes	No
1a	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.			
c	Did the foundation file Form 1120-POL for this year?	1c		×
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$.		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
•	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.			$\hat{}$
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.			
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	×	
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. ▶			
	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 <i>General Instruction G?</i> If "No," attach explanation	8b	×	
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			×
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		×
RAA	REV 06/02/20 PRO	Form 99 ()-PF	(2019)

Part	VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		×
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	d 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 ▶ Swinton Griffith, CPA Telephone no. ▶ (404	310-	7000)
	Located at ▶ 3978 Sweet Bottom Drive Duluth GA ZIP+4 ▶ 3009	6-315	8	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here		•	▶ ∟
40	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authoritover a bank, securities, or other financial account in a foreign country?	16	1.00	×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶	of		
Part	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.		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 N(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	•		
	disqualified person?	o		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes N	0		
	(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)?	_	1	
	· · · · · — — —	0		
	(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.)	0		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described	n		
	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, the	~ 1		
	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)):	e		
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?	0		
	If "Yes," list the years ▶ 20, 20, 20, 20	İ		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(1	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) all years listed, answer "No" and attach statement—see instructions.)		·	
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b	 	
С	▶ 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?	0		
ь	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation of	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			ļ
	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		 	×
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize is charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019	_	-	

Part	t VII-B Statements Regarding Ac	tivities	IOL AA	mich Form	4/20	May De I	equire	a (com	lueu)			
5a	During the year, did the foundation pay or	r incur a	any amo	ount to:	•						Yes	No
	(1) Carry on propaganda, or otherwise at		_		on (sect	tion 4945(e	1)?	☐ Yes	⊠ No	,		
	(2) Influence the outcome of any specific											
	directly or indirectly, any voter registra							☐ Yes	X No			
	·								=	l l		
	(3) Provide a grant to an individual for tra								× No	·		
	(4) Provide a grant to an organization oth											
	section 4945(d)(4)(A)? See instructions							Yes	X No	,		
	(5) Provide for any purpose other than re	eligious,	charita	able, scientifi	c, litera	ary, or educ	ational					
	purposes, or for the prevention of crue	elty to c	children	or animals?				☐Yes	⊠ No	,		
b	If any answer is "Yes" to 5a(1)-(5), did at	nv of th	e trans	actions fail to	o qualit	fv under th	e excer	otions des	scribed			
	in Regulations section 53.4945 or in a cur									5b		
	Organizations relying on a current notice		-	_					▶ □			
_	If the answer is "Yes" to question 5a(4),									'		
С	• • • • • • • • • • • • • • • • • • • •					-			□ ••-			
	because it maintained expenditure respon						• •	☐ Yes	∐ No	' <u> </u>		
	If "Yes," attach the statement required by									1		i
6a	Did the foundation, during the year, recei	-		-								
	•							☐ Yes	X No	· [
b	Did the foundation, during the year, pay p	oremium	ns, dire	ctly or indired	ctly, on	a personal	benefit	contract	? .	6Ь		×
	If "Yes" to 6b, file Form 8870.											
7a		undation	a partv	to a prohibite	ed tax s	helter trans	action?	☐ Yes	⊠ No	,		
b	If "Yes," did the foundation receive any pr									7b		
8	Is the foundation subject to the section 4									1		-
0	remuneration or excess parachute payme			• , ,					₩ No			
Dor	t VIII Information About Officers,											
rar.		, Direct	tors, i	rustees, re	buriua	WOII WIAII	agers,	riigiliy r	aiu E	проу	ees,	
4	and Contractors List all officers, directors, trustees, and	d 60d	ation s		al thair		ation (Saa instru	iotions			
1	List all onicers, directors, trustees, and	a rouna			,					·		
			/IN Title	and averege	1 (a) Ca	mpaneation	1.40.4	^antahidian				
	(a) Name and address		hou	e, and average rs per week	(If s	mpensation not paid,	emplo	Contribution yee benefit	plans	(e) Expe		
	(a) Name and address		hou		(If s		emplo		plans		nse acc allowan	
	Douglas Ivester		hou	rs per week ed to position	(If r	not paid, nter -0-)	emplo	yee benefit	plans			ces
			hour devote	rs per week ed to position	(If r	not paid,	emplo	yee benefit	plans			
411	Douglas Ivester	30305	devote Direc	rs per week ed to position ctor	(If r	not paid, nter -0-)	emplo	yee benefit	plans ensation			ces
411 Lyn	Douglas Ivester Peachtree Battle Ave.,NW Atlanta GA n J. Darby	30305	devote Direc	rs per week ed to position ctor 12.00	(If r	not paid, nter -0-)	emplo	yee benefit	plans ensation			ces
411 Lyni 9 C	Douglas Ivester Peachtree Battle Ave.,NW Atlanta GA n J. Darby orte Del Mar Palm Coast FL 32	30305	Directo	rs per week ed to position etor 12.00 er, President 15.00	(If r	not paid, hter -0-) 53, 475.	emplo	yee benefit	plans ensation			0.
411 Lyn 9 Co Swi	Douglas Ivester Peachtree Battle Ave.,NW Atlanta GA n J. Darby orte Del Mar Palm Coast FL 32 nton A. Griffith III	30305	Directo	sper week d to position tor 12.00 or, President 15.00 eccretary & Treasurer	(If r	53, 475.	emplo	yee benefit	plans ensation 0.			0. 0.
411 Lynn 9 Co Swii 3978	Douglas Ivester Peachtree Battle Ave.,NW Atlanta GA n J. Darby orte Del Mar Palm Coast FL 32 nton A. Griffith III 8 Sweet Bottom Drive Duluth GA	30305 2137 30096	Directo	rs per week ed to position etor 12.00 er, President 15.00	(If r	not paid, hter -0-) 53, 475.	emplo	yee benefit	plans ensation			0.
411 Lynn 9 Co Swii 3978	Douglas Ivester Peachtree Battle Ave.,NW Atlanta GA n J. Darby orte Del Mar Palm Coast FL 32 nton A. Griffith III	30305 2137 30096	Directo	rs per week ed to position tor 12.00 or, President 15.00 ecretary & Treasurer 12.00	(Iff r	53, 475. 54, 475.	emplo	yee benefit	o.			0. 0.
411 Lyni 9 Co Swii 3978 See	Douglas Ivester Peachtree Battle Ave.,NW Atlanta GA n J. Darby orte Del Mar Palm Coast FL 32 nton A. Griffith III 8 Sweet Bottom Drive Duluth GA	30305	Director, S	rs per week ed to position tor 12.00 or, President 15.00 ecretary & Treasurer 12.00 5.50	(Iff r	53,475. 54,475. 53,475.	emplo and def	yee benefit	O. O.	other :	allowan	0. 0.
411 Lynn 9 Co Swii 3978	Douglas Ivester Peachtree Battle Ave., NW Atlanta GA n J. Darby orte Del Mar Palm Coast FL 32 nton A. Griffith III 8 Sweet Bottom Drive Duluth GA Statement Compensation of five highest-paid en	30305	Director, S	rs per week ed to position tor 12.00 or, President 15.00 ecretary & Treasurer 12.00 5.50	(Iff r	53,475. 54,475. 53,475.	emplo and def	yee benefit	O. O.	other :	allowan	0. 0.
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411 Lyni 9 Co Swii 3978 See	Douglas Ivester Peachtree Battle Ave., NW Atlanta GA n J. Darby orte Del Mar Palm Coast FL 32 nton A. Griffith III 8 Sweet Bottom Drive Duluth GA 3 Statement Compensation of five highest-paid en "NONE."	30305 2137 30096 mployee	Director, S	rs per week ed to position tor 12.00 or, President 15.00 ecretary & Freasurer 12.00 5.50 er than thos	se inclusiverage	53, 475. 54, 475. 53, 475. 9,000. uded on li	emplo and defi	see instr	0. 0. 0. utions to benefit	s). If no	one,	0. 0. 0. enter
411 Lyni 9 Co Swii 3978 See	Douglas Ivester Peachtree Battle Ave., NW Atlanta GA n J. Darby orte Del Mar Palm Coast FL 32 nton A. Griffith III 8 Sweet Bottom Drive Duluth GA Statement Compensation of five highest-paid en	30305 2137 30096 mployee	Director, S	rs per week ed to position tor 12.00 or, President 15.00 ecretary & Treasurer 12.00 5.50 er than thos	se inclusiverage	53,475. 54,475. 53,475.	emplo and defi	see instr (d) Contribute employee plans and of	0. 0. 0. uction:	s). If no	one,	0. 0. 0. enter
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411 Lyni 9 Co Swii 3978 See	Douglas Ivester Peachtree Battle Ave., NW Atlanta GA n J. Darby orte Del Mar Palm Coast FL 32 nton A. Griffith III 8 Sweet Bottom Drive Duluth GA 3 Statement Compensation of five highest-paid en "NONE."	30305 2137 30096 mployee	Director, \$ Director, \$	sper week ed to position tor 12.00 or, President 15.00 eccretary & freasurer 12.00 5.50 er than those (b) Title, and a hours per w	se inclusiverage	53, 475. 54, 475. 53, 475. 9,000. uded on li	emplo and defi	see instr (d) Contribute employee plans and of	0. 0. 0. uction:	s). If no	one,	0. 0. 0. enter
411 Lyn 9 Co Swi 3978 See	Douglas Ivester Peachtree Battle Ave., NW Atlanta GA n J. Darby orte Del Mar Palm Coast FL 32 nton A. Griffith III 8 Sweet Bottom Drive Duluth GA 3 Statement Compensation of five highest-paid en "NONE."	30305 2137 30096 mployee	Director, \$ Director, \$	sper week ed to position tor 12.00 or, President 15.00 eccretary & freasurer 12.00 5.50 er than those (b) Title, and a hours per w	se inclusiverage	53, 475. 54, 475. 53, 475. 9,000. uded on li	emplo and defi	see instr (d) Contribute employee plans and of	0. 0. 0. uction:	s). If no	one,	0. 0. 0. enter
411 Lyn 9 Co Swi 3978 See	Douglas Ivester Peachtree Battle Ave., NW Atlanta GA n J. Darby orte Del Mar Palm Coast FL 32 nton A. Griffith III 8 Sweet Bottom Drive Duluth GA 3 Statement Compensation of five highest-paid en "NONE."	30305 2137 30096 mployee	Director, \$ Director, \$	sper week ed to position tor 12.00 or, President 15.00 eccretary & freasurer 12.00 5.50 er than those (b) Title, and a hours per w	se inclusiverage	53, 475. 54, 475. 53, 475. 9,000. uded on li	emplo and defi	see instr (d) Contribute employee plans and of	0. 0. 0. uction:	s). If no	one,	0. 0. 0. enter
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(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation None Compensation Compens		and Contractors (continued)	C 7
None Total number of others receiving over \$50,000 for professional services	3 Five h		
Total number of others receiving over \$50,000 for professional services Described	None	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
Let the foundation's four largest direct charitable Activities Let the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 None 2	None		
Let the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 None 2			
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianses served, conferences convened, research papers produced, etc. 1 None 2			
Let the foundation's four largest direct chantable activities (undicativities) Let the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 None 2			
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List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 None 2			10
1 None 2	List the foun	dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	Expenses
2			
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount None All other program-related investments. See instructions None Total. Add lines 1 through 3			
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount None All other program-related investments. See instructions None Total. Add lines 1 through 3			0.
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All other program-related investments. See instructions None Total. Add lines 1 through 3	Describe the	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
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All other program-related investments. See instructions None Total. Add lines 1 through 3			0.
All other program-related investments. See instructions 3 None Total. Add lines 1 through 3	2		· · · · · · · · · · · · · · · · · · ·
3 None Total. Add lines 1 through 3			
3 None Total. Add lines 1 through 3			
Total. Add lines 1 through 3	All other pro	gram-related investments. See instructions	
Total. Add lines 1 through 3	3 None		
Total. Add lines 1 through 3			
TOTAL TITLE OF THE PARTY OF THE	Takal Add B	and 1 Abrah and 2	0.
	i otal. Add III	les i tirrough 5	Form 990-PF (2019

Part	Minimum investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn to	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		21 600 460
a	Average monthly fair market value of securities	1a	31,688,469.
b	Average of monthly cash balances	1b	298,374.
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	31,986,843.
е	Reduction claimed for blockage or other factors reported on lines 1a and	- [
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	31,986,843.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	479,803.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	31,507,040.
6	Minimum investment return. Enter 5% of line 5	6	1,575,352.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ▶ ☐ and do not complete this part.)	ounda	ations
1	Minimum investment return from Part X, line 6	1	1,575,352.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	37,542.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,537,810.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,537,810.
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,		
	Ine 1	7	1,537,810.
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	1,234,591.
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	
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	1,234,591.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	37,542.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,197,049.
	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

-art	Undistributed income (see instruction	(a)	(b)	(c)	(d)
		Corpus	Years prior to 2018	2018	2019
1	Distributable amount for 2019 from Part XI, line 7				1,537,810.
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only			1,100,372.	
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2019:				į
а	From 2014				ļ
b	From 2015				
C	From 2016 0.			5	
d	From 2017				
е	From 2018				
f	Total of lines 3a through e	0.			
4	Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ 1,234,591.			1 100 270	
а	Applied to 2018, but not more than line 2a .			1,100,372.	
b	Applied to undistributed income of prior years (Election required—see instructions)	3			e
С	Treated as distributions out of corpus (Election required—see instructions)			•	
d	Applied to 2019 distributable amount			-	134,219.
e	Remaining amount distributed out of corpus	0.			<u> </u>
5	Excess distributions carryover applied to 2019				
	(If an amount appears in column (d), the same amount must be shown in column (a).)		r		
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions		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				1,403,591.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)		•		
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	0.			
9	Excess distributions carryover to 2020.				
-	Subtract lines 7 and 8 from line 6a	0.			
10	Analysis of line 9:	-			
а	Excess from 2015	1			Ì
b	Excess from 2016 0 .				
C	Excess from 2017 0 .		,		
d	Excess from 2018		:		1
е	Excess from 2019 0.				

	30-PF (2019)			141 4 11 6		Page 10
Part					9)	N/A
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective for				L	N
b	Check box to indicate whether the fou		operating founda		ection 4942(j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
	each year listed			<u> </u>		· · · · · · · · · · · · · · · · · · ·
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4, for each year listed					
đ	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:					
	(1) Value of all assets				<u> </u>	
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3					
	of minimum investment return shown in					
	Part X, line 6, for each year listed					
C	"Support" alternative test-enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income	<u> </u>		<u></u>		
Part				the foundation h	nad \$5,000 or mo	re in assets at
	any time during the year-	-see instructio	ns.)			
1	Information Regarding Foundation					at the later
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but		ontributed more t	nan \$5,000). (See s	section 507(a)(2).)	
	M. Douglas & V. Kay Iveste	r		al. af a annamatia	- /au an anuallu lan	no nomina of the
b	List any managers of the foundation ownership of a partnership or other e	who own 10% ontity) of which the	r more of the sto foundation has a	10% or greater int	erest.	ge portion of the
	None					
2	Information Regarding Contribution Check here ► ☒ If the foundation unsolicited requests for funds. If the complete items 2a, b, c, and d. See it	only makes cont foundation makes	ributions to pres	elected charitable		
а	The name, address, and telephone no	umber or email ad	dress of the person	on to whom applica	ations should be ad	dressed:
b	The form in which applications should	d be submitted an	d information and	I materials they sho	ould include:	
	Any submission deadlines:	····································	· · · · · · · · · · · · · · · · · · ·			
	Any restrictions or limitations on a	warde euch ac h	v geographical	areas charitable f	ields kinds of inet	itutions or other
d	factors:	warus, such as t	y geographical (arcas, criantable l	icido, milido Of Illot	itations, or other

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During t		ed for Fu	ture Payment	
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		
Name and address (nome or business) a Paid dunng the year Northeast GA History Center 322 Academy Street Gainesville GA 30501 Brenau University 500 Washington Street SE Gainesville GA 30501 The University of Georgia Foundation 286 Oconee Stree Athens GA 30602 Hall County School District 711 Green Street Gainesville GA 30501 Atlanta Botanical Garden 1345 Piedmont Ave. NE Atlanta GA 30309		PC PC PC	Carry on Charitable Organization Activities Strengthen University's Health Sciences programs Need Based Scholarships The Georgia Commitment Scholarship Program Early College Vineyard and Orchard Parking	10,000. 275,000. 200,000. 320,000.
b Approved for future payment	 		► 3a	1,105,000.
Hall County School District 711 Green Street Gainesville GA 30501 Atlanta Botanical Garden 1345 Piedmnont Ave. NE Atlanta GA 30309		PC PC	Early College Vineyard and Orchard Parking	2,080,000.
Total			▶ 3b	4,280,000.

Ente	r gross 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 exemp function income (See instructions.)
1	Program service revenue:			 		
	a					
	b		·-····································	ļ		·
	<u> </u>			<u> </u>		
	d		 	ļ		
	e					
	<u> </u>					
_	g Fees and contracts from government agencies					
2	Membership dues and assessments	ļ		1.4	741	
3	Interest on savings and temporary cash investments	<u></u>	···	14	741.	
4	Dividends and interest from securities	ļ		-14	1,231,886.	
5	Net rental income or (loss) from real estate:			-		
	a Debt-financed property		· · · · · · · · · · · · · · · · · · ·			
6	b Not debt-financed property			-		
6	Net rental income or (loss) from personal property Other investment income					
7	Gain or (loss) from sales of assets other than inventory		· · · · · · · · · · · · · · · · · · ·	10	2,638,306.	
8 9	Net income or (loss) from special events			10	2,030,300.	
	Gross profit or (loss) from sales of inventory			<u> </u>		
10 11	, , ,			 		
	Other revenue: ab					
						
				- 		
	d			 		
						1
12				†	3 870 933	
12 13					3,870,933.	•
12 13 (See	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)				3,870,933. 13	
See	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	າຣ.)		· · · · · · · · · · · · · · · · · · ·	3,870,933. 13	3,870,933.
See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pai Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pai Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pai Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.
See Pal Lin	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	ns.) Accomplishm	ent of Exem	pt Purposes		3,870,933.

Part	· · · ·	·	n Regarding Tr	ansfers t	o and Tra	nsactio	ns and F	Relationship	os With N	lonchari	itable		mpt
		Organizatio	•										
1			directly or indirect									Yes	No
			ther than section	n 501(c)(3) organiza	tions) of	in secti	ion 527, rel	ating to p	political			
_		izations?			واطمة اسما			a.f.					
а			porting foundation								1a(1)		
		ther assets .									1a(1)		
ь	• •	transactions:								• •	ra(z)		$\hat{}$
-			a noncharitable e	exempt org	anization						1b(1)		
			ets from a noncha								1b(2)		×
			, equipment, or of		-						1b(3)		×
	• •		rrangements							1	1b(4)		×
			rantees								1b(5)		×
		-	ervices or membe								1b(6)		×
C	Sharır	ng of facilities, e	quipment, mailing	lists, othe	r assets, or	paid em	ployees				1c		×
d	If the	answer to any	of the above is "	Yes," com	olete the fo	llowing s	chedule.	Column (b)	should alw	ays show	the t	faır m	ıarket
			ther assets, or se										
			on or sharing arra										
(a) Line	no. (I	Amount involved	(c) Name of no	ncharitable ex	cempt organiz	ation	(d) Desc	ription of transfe	rs, transaction	ns, and shar	ng arra	angeme	ents
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				•,		·							
2a			ectly or indirectly					nore tax-exer	npt organ	izations			
			501(c) (other than		1(c)(3)) or i	n section	527? .			• •	☐ Ye	s 🗵	No
b	If "Ye		following schedu	ule.									
		(a) Name of organ	ization		(b) Type of	organization			(c) Descriptio	n of relation	ship		
													
							· · · · · · · · · · · · · · · · · · ·	· · ·				-	
	Unde	r penalties of penury 1	declare that I have exar	nined this retur	n. including ac	companying	schedules an	d statements, and	to the best of	my knowled	ge and I	belief, it	is true.
Sign	correc	ct, and complete. Decl	aration of preparer (other	r than taxpayer) is based on a	li information	of which pre	parer has any kno	wledge	May the IR			
Here			1-	_	Ohale	D)	esiden	+		with the pr	eparer s	hown b	elow?
11616	Signi	atula of cer of tru	stee		Date	Tritle				See instruc	tions	∐ Yes∣	□No
Delet	اتّ	Print/Type preparer		Prepare	r's signature	6	15	Date		F اور الإلاا يا	NIT		
Paid		Swinton Gr	riffith		nton Gri	ffith	/~\	9-28-2	OVO self-e	k 🔀 if	0139	5047	4
Prepa		Firm's name	Swinton Gr:		011				Firm's EIN				
Use (Cilly	Firm's address ▶	3978 Sweet		Drive	······	· · · · · · · · · · · · · · · · · · ·			(404)3			
BAA			Duluth			G.F	3009	5-3158			rm 99		(2019)

Melvin Douglas and Victoria Kay Ivester Foundation, Inc.

Form 990-PF: Return of Private Foundation

Part VIII: Information about Officers, Directors, Trustees,	Foundation Managers, Highly Paid Employees, and Contractors	hly Paid Employees, a		Continuation Statement
	Title, and average hours per week devoted to position	Compensation	Contributions to employee benefit plans and deferred compensation	Expense account, other allowances
	Director	.000,6	0	0
	5.00			
i	VP and Asst. Secretary	0.	0	0
	0.50			
		000	C	c
		. 222, 4	-	

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
Income from Riverview SOF I	-2,155.	-2,155.	
Income from Riverview SOF I AIV	16.	16.	
Total	-2,139.	-2,139.	

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
Excise Tax on Investment Income	38,000.			
Tota	38.000.			

Legal and Professional Fees

Name				-				Employer Identification No
Melvin	Douglas	and	Victoria	Kay	Ivester	Foundation,	Inc.	45-4004727

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
					-
tal to Form 990)-PF, Part I, Line 16a				

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
otal to Form 990	-PF, Part I, Line 16b				

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
UBS Financial Services, Inc. Morgan Stanley	Investment Advisory Investment Advisory	41,808.	41,808.		
Total to Form 990-	PF, Part I, Line 16c	73,896.	73,896.		

Name Melvin Douglas and Victoria Kay Ive	ester Foundation, In	nc.	ı ,	yer 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	End of US Government Obligations Book Value	of Year US Government Obligations FMV
Tot to Fm 990-PF, Pt II, Ln 10a				
Line 10b - Investm	ents - Corporate	Stock:	End o Book Value	of Year Fair Market Value
UBS Financial Services Morgan Stanley Smith Ba			29,343,605. 3,239,196.	28,875,540. 4,741,483.
Totals to Form 990-PF, Part II, I	Line 10b		32,582,801.	33,617,023.
Line 10c - Investme	ents - Corporate I	Bonds:	End o Book Value	of Year Fair Market Value
Totals to Form 990-PF, Part II, I	Line 10c			
Line 12 - Investme	ents - Mortgage I	oans:	End o Book Value	of Year Fair Market Value
Totals to Form 990-PF, Part II, I	Line 12			
			End) of Year
Line 13 - Inve	estments - Other	:	Book Value	Fair Market Value
Riverview Strategic Opp	portunities Fu	und	13,426.	64,169.
Totals to Form 990-PF, Part II, I	Line 13		13,426.	64,169.

Additional information from your 2019 Federal Exempt Tax Return

Form 990-PF: Return of Private Foundation

Line 1(a)

Itemization Statement

Description	Amount
Cash Contributions	1, 300, 000
Total	1,300,000.

Form 990-PF: Return of Private Foundation

Line 3(b)

Itemization Statement

Description	Amount
UBS Financial Services Inc.	1,222.
Morgan Stanley Managed Account	156.
Total	1,378.

Form 990-PF: Return of Private Foundation

Line 4(b)

Itemization Statement

Description	Amount
UBS Financial Services Inc.	1,117,407.
Morgan Stanley Managed Account	114,271.
7	Total 1,231,678

Form 990-PF: Return of Private Foundation

Line 3 Column (d)

Itemization Statement

Description		Amount
UBS Financial Services Inc		585.
Morgan Stanley Managed Account		156.
	Total	741.

Form 990-PF: Return of Private Foundation

Line 4 Column (d)

Itemization Statement

Description	Amount
UBS Financial Services Inc.	1, 117, 615
Morgan Stanley Managed Account	114,271.
Total	1,231,886.

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

Melvin Douglas and Victoria Kay Ivester Foundation, Inc. 45-4004727 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** 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 331/3% 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) filling 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) filling 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).

Name of organization

Melvin Douglas and Victoria Kay Ivester Foundation, Inc.

Employer identification number
45-4004727

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	M. Douglas Ivester 411 Peachtree Battle Avenue NW Atlanta GA 303054032	\$\$	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	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person	

Name of organization

Melvin Douglas and Victoria Kay Ivester Foundation, Inc.

Employer identification number
45-4004727

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	
		\$		
(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	
		•		

Name of o	rganization			Employer identification number	
	Douglas and Victoria Kay Ive			45-4004727	
Part III	Exclusively religious, charitable, et (10) that total more than \$1,000 for the following line entry. For organizat contributions of \$1,000 or less for the Use duplicate copies of Part III if add	the year from any one colons completing Part III, ere year. (Enter this informate	ontributor. Complet nter the total of <i>exclu</i>	e columns (a) through (e) and usively religious, charitable, etc.,	
(a) No.				· ,	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) D	Description of how gift is held	
	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) D	Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) D	Description of how gift is held	
	(e) Transfer of gift				
ļ	Transferee's name, address, an	d ZIP + 4	Relationship of t	ransferor to transferee	