

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation THE LONG LEWIS FOUNDATION		A Employer identification number 46-3747942	
Number and street (or P.O. box number if mail is not delivered to street address) PO BOX 4154		Room/suite	
		B Telephone number (see instructions) (256) 386-7800	
City or town, state or province, country, and ZIP or foreign postal code MUSCLE SHOALS, AL 35662		C If exemption application is pending, check here ☐	
G Check all that apply: ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		D 1. Foreign organizations, check here..... ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ... ☐	
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶\$ 1,706,864	J Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis.)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	499,754			
	2 Check ☐ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	4,250	4,250		
	4 Dividends and interest from securities . . .				
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a _____				
	7 Capital gain net income (from Part IV, line 2) . . .		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	504,004	4,250		
	13 Compensation of officers, directors, trustees, etc.	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)	13,400	4,250		0
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .				
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings	2,271	0		2,271
	22 Printing and publications				
	23 Other expenses (attach schedule)	43,245	0		43,245
	24 Total operating and administrative expenses. Add lines 13 through 23	58,916	4,250		45,516
	25 Contributions, gifts, grants paid	520,031			520,031
	26 Total expenses and disbursements. Add lines 24 and 25	578,947	4,250		565,547
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	-74,943			
	b Net investment income (if negative, enter -0-)		0		
c Adjusted net income (if negative, enter -0-) . . .					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	546,594	80,907	80,907
	2 Savings and temporary cash investments	200,000	200,000	200,000
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)	908,362	1,425,957	1,425,957	
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	1,654,956	1,706,864	1,706,864	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ ☐ and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ ☒ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	0	0	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	1,654,956	1,706,864	
	29 Total net assets or fund balances (see instructions)	1,654,956	1,706,864	
30 Total liabilities and net assets/fund balances (see instructions) .	1,654,956	1,706,864		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	1,654,956
2 Enter amount from Part I, line 27a	2	-74,943
3 Other increases not included in line 2 (itemize) ▶ _____	3	126,851
4 Add lines 1, 2, and 3	4	1,706,864
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	1,706,864

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	445,991	1,299,843	0.343111
2017	253,176	1,265,155	0.200115
2016	255,337	449,769	0.567707
2015	240,068	76,779	3.126740
2014	271,516	8,174	33.217030

2 Total of line 1, column (d)	2	37.454703
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	7.490941
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	1,568,645
5 Multiply line 4 by line 3	5	11,750,627
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	0
7 Add lines 5 and 6	7	11,750,627
8 Enter qualifying distributions from Part XII, line 4	8	565,547

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI 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 here ☐ and enter 1% of Part I, line 27b	1	0
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-)	2	0
3	Add lines 1 and 2.	3	0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	0
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	0
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	0
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached.	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ☐ Refunded ☐	11	

Part 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 participate or intervene in any political campaign?		No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>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.</i>		No
c Did the foundation file Form 1120-POL for this year?		No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ☐ \$ 0 (2) On foundation managers. ☐ \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ☐ \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		No
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? <i>If "Yes," attach a conformed copy of the changes</i>		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	Yes	
b If "Yes," has it filed a tax return on Form 990-T for this year?	Yes	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		No
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?		No
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	Yes	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ AL		
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? <i>If "No," attach explanation.</i>	Yes	
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 taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>		No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>		No

Part VII-A Statements Regarding Activities (continued)

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		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	13	Yes	
14	The books are in care of ▶ <u>LESLIE OUELLETTE</u> Telephone no. ▶ <u>(256) 386-7800</u>			

Located at ▶ PO BOX 4154 MUSCLE SHOALS AL ZIP+4 ▶ 35662

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ ☐			
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

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 ☒ No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) ☐ Yes ☒ No		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions ☐	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c	No
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)):		
a	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? ☐ Yes ☒ No If "Yes," list the years ▶ 20____, 20____, 20____, 20____		
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 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. ▶ 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? ☐ Yes ☒ No		
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 Schedule C, Form 4720, 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	No
b	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	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

		Yes	No
5a	During the year did the foundation pay or incur any amount to:		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No	
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No	
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	☐ Yes ☒ No	
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No	
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		5b
c	Organizations relying on a current notice regarding disaster assistance check here. ☐		
	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes ☐ No	
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b
	<i>If "Yes" to 6b, file Form 8870.</i>		No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?		7b
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	☐ Yes ☒ No	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
TODD OUELLETTE PO BOX 4154 MUSCLE SHOALS, AL 35662	PRESIDENT 1.00	0	0	0
LESLIE OUELETTE PO BOX 4154 MUSCLE SHOALS, AL 35662	VICE PRESIDENT/SECRETARY 1.00	0	0	0
PAT HARDIN PO BOX 4154 MUSCLE SHOALS, AL 35662	TREASURER 1.00	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ►		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

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
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	1,367,884
b	Average of monthly cash balances.	1b	224,649
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,592,533
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	1,592,533
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	23,888
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,568,645
6	Minimum investment return. Enter 5% of line 5.	6	78,432

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	78,432
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	2,964
c	Add lines 2a and 2b.	2c	2,964
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	75,468
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	75,468
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	75,468

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	565,547
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:		
a	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	565,547
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	565,547

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				75,468
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			0	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014. 271,107				
b From 2015. 236,229				
c From 2016. 232,849				
d From 2017. 190,028				
e From 2018. 380,999				
f Total of lines 3a through e.	1,311,212			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ 565,547				
a Applied to 2018, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				75,468
e Remaining amount distributed out of corpus	490,079			
5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,801,291			
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.		0		
d Subtract line 6c from line 6b. Taxable amount—see instructions.		0		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions.			0	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions). . . .	271,107			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.	1,530,184			
10 Analysis of line 9:				
a Excess from 2015. 236,229				
b Excess from 2016. 232,849				
c Excess from 2017. 190,028				
d Excess from 2018. 380,999				
e Excess from 2019. 490,079				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter:					
(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					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

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** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			3a	520,031
b <i>Approved for future payment</i>				
Total			3b	0

Enter gross amounts unless otherwise indicated.

[illegible]

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of:				
(1) Cash.		1a(1)		No
(2) Other assets.		1a(2)		No
b Other transactions:				
(1) Sales of assets to a noncharitable exempt organization.		1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.		1b(2)		No
(3) Rental of facilities, equipment, or other assets.		1b(3)		No
(4) Reimbursement arrangements.		1b(4)		No
(5) Loans or loan guarantees.		1b(5)		No
(6) Performance of services or membership or fundraising solicitations.		1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.		1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.				

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2020-11-13	*****
	_____ Signature of officer or trustee	_____ Date	_____ Title

May the IRS discuss this return with the preparer shown below
 (see instr.) ☒ **Yes** ☐ **No**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ☐	PTIN
	AMY BIBBY		2020-11-12		P00445891
	Firm's name ▶ DIXON HUGHES GOODMAN LLP				Firm's EIN ▶ 56-0747981
	Firm's address ▶ 500 RIDGEFIELD COURT ASHEVILLE, NC 28806				Phone no. (828) 254-2254

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
A NEW BEGINNING122 HELTON COURT FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	7,800
A NEW LIFE FOR WOMEN 102 CENTURION WAY GADSDEN, AL 35904	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,100
ABANKS MORTUARY808 5TH AVE NORTH BIRMINGHAM, AL 35203	NONE	501(C)(3)	OPERATIONAL SUPPORT	200
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ABUNDANT GRACE CHURCH 1109 E 32ND ST SHEFFIELD, AL 35660	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
ADVENTURES IN MISSIONS PO BOX 742570 ATLANTA, GA 30374	NONE	501(C)(3)	OPERATIONAL SUPPORT	600
AGAPE OF CENTRAL ALABAMA PO BOX 23472 MONTGOMERY, AL 36123	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ALABAMA COOPERATIVE EXTENSION SYSTEM 802 VETERANS DRIVE FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	300
ALABAMA POWER1651 E MAIN ST PRATTVILLE, AL 36068	NONE	501(C)(3)	OPERATIONAL SUPPORT	990
ALEX'S WARRIORS 308 W WASHINGTON DRIVE MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	300
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ALL THINGS MINISTRIESPO BOX 285 AUBURN, AL 36831	NONE	501(C)(3)	OPERATIONAL SUPPORT	300
ALPHA PHI ALPHA FRATERNITY INC PO BOX 522 SHEFFIELD, AL 35560	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
ALZHEIMERS ASSOCIATION 2151 HIGHLANDS AVE 210 BIRMINGHAM, AL 35205	NONE	501(C)(3)	OPERATIONAL SUPPORT	800
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN CANCER SOCIETY 2745 BOB WALLACE AVE SW STE A HUNTSVILLE, AL 35805	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,300
AMERICA FOUNDATION FOR SUICIDE PREVENTION PREVENTION 120 WALL STREET 29TH FLOOR NEW YORK, NY 10005	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
AMERICAN HEART ASSOCIATION PO BOX 4002900 DES MOINES, IA 50340	NONE	501(C)(3)	OPERATIONAL SUPPORT	5,350
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ARC OF THE SHOALS SPECIAL OLYMPICS 125 N COURT ST FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,500
AUTAUGA ACADEMY497 GOLSON RD PRATTVILLE, AL 36067	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
AUTAUGA INTERFAITH CARE CENTER PO BOX 680184 163 WEST THIRD ST PRATTVILLE, AL 36067	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BABYWEARERS OF THE SHOALS 7430 CO RD 200 FLORENCE, AL 35633	NONE	501(C)(3)	OPERATIONAL SUPPORT	100
BAKER FAMILY FOUNDATION 118 W TOMBIGBEE ST FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	400
BAPTIST HEALTH CARE FOUNDATION PO BOX 241647 MONTGOMERY, AL 36124	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BETHEL COLBERT MISSIONARY BAPTIST CHURCH 12300 2ND ST LEIGHTON, AL 35646	NONE	501(C)(3)	OPERATIONAL SUPPORT	300
BIG BROTHERS BIG SISTERS OF THE SHOALS 505 N COLUMBIA AVE C SHEFFIELD, AL 35660	NONE	501(C)(3)	OPERATIONAL SUPPORT	10,000
BRIDGEWAY BAPTIST CHURCH 1503 E AVALON AVE MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,600
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BRINK APARTMENT506 N POPLAR ST FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	150
BUILDING BELIEVERS IN CHRIST PO BOX 188 TUSCUMBIA, AL 35674	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,950
CAHABA SHRINERS 16146 EAST GLENN VALLEY DR ATHENS, AL 35611	NONE	501(C)(3)	OPERATIONAL SUPPORT	300
Total ► 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CALVARY BAPTIST CHURCH 111 N MAIN ST TUSCUMBIA, AL 35674	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,500
CAMPUS OUTREACH BIRMINGHAM PO BOX 43737 BIRMINGHAM, AL 35243	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
CAR MART1017 HWY 72 EAST TUSCUMBIA, AL 35674	NONE	501(C)(3)	OPERATIONAL SUPPORT	150
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHILD PROTECT935 S PERRY STREET MONTGOMERY, AL 36104	NONE	501(C)(3)	OPERATIONAL SUPPORT	765
CHILDREN'S HARBOR INC 1 OUR CHILDRENS HIGHWAY ALEXANDER CITY, AL 35010	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
CHRIST CHAPEL 3051 CLOVERDALE ROAD FLORENCE, AL 35633	NONE	501(C)(3)	OPERATIONAL SUPPORT	3,600
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHRIST OUTREACH MINISTRIES 5550 HWY 81 PHIL CAMPBELL, AL 35581	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,000
COC FOOD BANK AND SOUP KITCHEN PO BOX 611 DECATUR, AL 35601	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,500
COLBERT-LAUDERDALE BAPTIST ASSOCIATION 3901 HATCH BLVD SHEFFIELD, AL 35660	NONE	501(C)(3)	OPERATIONAL SUPPORT	4,250
Total ► 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COLBERT COUNTY CHILDREN'S POLICY COUNCIL 102 JACKSON COURT SHEFFIELD, AL 35660	NONE	501(C)(3)	OPERATIONAL SUPPORT	250
COLBERT DOMESTIC VIOLENCE RESP COALITION 200 S CENTRAL AVE MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
COLBERT HEIGHTS BAPTIST CHURCH 6000 WOODMONT DRIVE TUSCUMBIA, AL 35674	NONE	501(C)(3)	OPERATIONAL SUPPORT	545
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COLBERT MEMORIAL FUNERAL HOME 700 US-43 TUSCUMBIA, AL 35674	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
COMMON GROUND SHOALSPO BOX 485 FLORENCE, AL 35631	NONE	501(C)(3)	OPERATIONAL SUPPORT	13,276
COMPASSION INTERNATIONAL 12290 VOYAGER PARKWAY COLORADO SPRINGS, CO 80921	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,740
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COMPREHENSIVE ANESTHESIA SERVICE 2006 FRANKLIN ST SE301 HUNTSVILLE, AL 35801	NONE	501(C)(3)	OPERATIONAL SUPPORT	125
COPIES & INK500 WOODWARD AVE MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	117
COUNTY LINE CHURCHPO BOX 1321 HALEYVILLE, AL 35565	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CRAMER CHILDREN'S CENTER PO BOX 160 FLORENCE, AL 35631	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
CROSS POINT CHURCH OF CHRIST 1350 COX CREEK PKWY FLORENCE, AL 35633	NONE	501(C)(3)	OPERATIONAL SUPPORT	4,300
CROSSROADS COMMUNITY OUTREACH 318 S COURT ST FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	9,301
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CYPRESS LANDING PLACE 101 CYPRESS LANDING FLORENCE, AL 35633	NONE	501(C)(3)	OPERATIONAL SUPPORT	150
CYPRESS POINTE1451 CARVER RD FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	138
DALLAS COUNTY CHILDREN'S POLICY COUNCIL 105 LAUDERDALE ST SELMA, AL 36701	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DESHLER MIDDLE SCHOOL 598 N HIGH ST TUSCUMBIA, AL 35674	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
E3 PARTNERS FUND AT PURE CHARITY PO BOX 1053 SEARCY, AR 72145	NONE	501(C)(3)	OPERATIONAL SUPPORT	300
EASTER SEALS NORTHWEST ALABAMA 1450 AVALON AVE MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,500
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EDMUNDITE MISSIONS1428 BROAD ST SELMA, AL 36701	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
EKKLESIA PRESCHOOL AND CHILD DEV CENTER 3007 HATCH BLVD SHEFFIELD, AL 35660	NONE	501(C)(3)	OPERATIONAL SUPPORT	750
EVERDALE MISSIONARY BAPTIST CHURCH 814 E 16TH ST SHEFFIELD, AL 35660	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FAIRVIEW BAPTIST CHURCH 4825 HUNTSVILLE RD FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	200
FAME GIRLS RANCH 4450 LIGON SPRINGS ROAD RUSSELLVILLE, AL 35654	NONE	501(C)(3)	OPERATIONAL SUPPORT	260
FAMILY SUNSHINE CENTER 858 S COURT ST MONTGOMERY, AL 36104	NONE	501(C)(3)	OPERATIONAL SUPPORT	350
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FAMILY SUPPORT CENTER 1760 WEST 4805 SOUTH TAYLORSVILLE, UT 84129	NONE	501(C)(3)	OPERATIONAL SUPPORT	600
FELLOWSHIP OF CHRISTIAN ATHLETES 8701 LEEDS ROAD KANSAS CITY, MO 64129	NONE	501(C)(3)	OPERATIONAL SUPPORT	29,690
FIRST BAPTIST CHURCH OF PELHAM 2867 PELHAM PKWY PELHAM, AL 35124	NONE	501(C)(3)	OPERATIONAL SUPPORT	150
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FIRST BAPTIST CHURCH OF COLBERT HEIGHTS 6000 WOODMONT DRIVE TUSCUMBIA, AL 35674	NONE	501(C)(3)	OPERATIONAL SUPPORT	750
FIRST PRIORITY OF NORTH ALABAMA 12060 COUNTY LINE RD SUITE J MADISON, AL 35756	NONE	501(C)(3)	OPERATIONAL SUPPORT	5,000
FIRST PRESBYTERIAN CHURCH 103 NORTH BROAD ST TUSCUMBIA, AL 35674	NONE	501(C)(3)	OPERATIONAL SUPPORT	300
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FLORENCE CIVITAN CLUBPO BOX 2211 FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
FLORENCE EXCHANGE CLUB 10 HIGHTOWER DRIVE FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	315
FLORENCE FIREFIGHTERS ASSOCIATION PO BOX 328 FLORENCE, AL 35631	NONE	501(C)(3)	OPERATIONAL SUPPORT	300
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FLORENCE HIGH SCHOOL 1201 BRADSHAW DRIVE FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	200
FLORENCE UTILITIES 110 W COLLEGE ST FLORENCE, AL 35631	NONE	501(C)(3)	OPERATIONAL SUPPORT	10,933
FOOD OUTLET 2413 ALABAMA HIGHWAY 202 W ANNISTON, AL 36201	NONE	501(C)(3)	OPERATIONAL SUPPORT	877
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FOODBANK OF MONMOUTH AND OCEAN COUNTIES 3300 ROUTE 66 NEPTUNE, NJ 07753	NONE	501(C)(3)	OPERATIONAL SUPPORT	250
FOODLAND PLUS3413 WOODWARD AVE MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,676
FORD CREDITPO BOX 790119 ST LOUIS, MO 63179	NONE	501(C)(3)	OPERATIONAL SUPPORT	400
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FRIENDS OF NAZARETH 3482 KEITH BRIDGE RD 215 CUMMING, GA 30041	NONE	501(C)(3)	OPERATIONAL SUPPORT	300
FRIENDSHIP COMMUNITY CHURCH 1205 SW 10TH ST SHEFFIELD, AL 35660	NONE	501(C)(3)	OPERATIONAL SUPPORT	250
GALILEE MB CHURCH23001 CO RD 14 FLORENCE, AL 35633	NONE	501(C)(3)	OPERATIONAL SUPPORT	750
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GLOBAL CHILDRENS AWARENESS INC PO BOX 763 SHEFFIELD, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
GLOBAL HEALTH COLLABORATION 417 HOWELL ST FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	750
GLOBAL MISSIONS OF MERCY PO BOX 2969 MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	5,000
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GOD'S GARAGE MINISTRIES 525 PENNY LAP LANE TUSCUMBIA, AL 35674	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
GRACE HOUSE1946 FLORENCE BLVD FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	5,700
GREATER ST PAUL AFRICAN EQISCOPAL CHURCH 129 CHEROKEE ST FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	100
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GWAM693 BRANDON DR MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
HABITAT FOR HUMANITY OF AUTAUGA & CHILTON 431 W 4TH ST STE A PRATTVILLE, AL 36067	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
HANDS OF HOPE INTERNATIONAL PO BOX 252 KILLEN, AL 35645	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HAZELWOOD BAPTIST CHURCH GENERAL FUND 265 HAZELWOOD AVE WAYNESVILLE, NC 28786	NONE	501(C)(3)	OPERATIONAL SUPPORT	200
HEALING HANDS BIBLE MINISTRIES PO BOX 516 SELMA, AL 36701	NONE	501(C)(3)	OPERATIONAL SUPPORT	250
HERITAGE CHRISTIAN UNIVERSITY 3625 HELTON DRIVE FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
HIGH TIDE ADVENTURES 220 W TENNESSEE ST SUITE 611 FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
HIGHLAND PARK BAPTIST CHURCH 503 S WILSON DAM RD MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	220,100
HIGHLAND PARK CHURCH OF CHRIST 600 GENEVA AVE MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	350
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HIGHLAND PARK ELEMENTARY 714 ELMHURST AVE MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	250
HOMELESS CARE COUNCIL 118 E MOBILE ST STE 309 FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	625
HOMETOWN MARKET 1421 N WOOD AVE 1500 FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	40
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
HOMEVIEW HOLISTIC FAMILY HEALTHCARE CTR 152 MEADOW LN DEATSVILLE, AL 36022	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
HOPE BAPTIST CHURCH2537 HWY 237 PHIL CAMPBELL, AL 35581	NONE	501(C)(3)	OPERATIONAL SUPPORT	400
HUNTSVILLE HOSPITAL 101 SIVLEY RD SW HUNTSVILLE, AL 35801	NONE	501(C)(3)	OPERATIONAL SUPPORT	202
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ICS ROOFING3312 N JACKSON HWY SHEFFIELD, AL 35660	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
ISTC FOUNDATIONPO BOX 220350 DEATSVILLE, AL 36022	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
JACKSON HEIGHTS CHURCH OF CHRIST 1031 HERMITAGE DR FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,000
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JDRF105 WESTPARK DRIVE SUITE 415 BRENTWOOD, TN 37027	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,650
JELANI GIRLS INC 101 STRODES CREEK CIRCLE PRATTVILLE, AL 36066	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
JOSH WILLINGHAM FOUNDATION PO BOX 2194 FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,000
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JR'S USED CARS2555 FLORENCE BLVD FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	250
JUNIOR LEAGUE OF THE SHOALS PO BOX 793 SHEFFIELD, AL 35660	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,240
KINGDOM CONNECTIONS INTERNATIONAL 553 MALONE CIRCLE FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,500
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
KRUZ'N FOR A KUREPO BOX 2752 MUSCLE SHOALS, AL 35561	NONE	501(C)(3)	OPERATIONAL SUPPORT	250
LATIN AMERICAN MISSIONS PO BOX 2330 VALDOSTA, GA 31604	NONE	501(C)(3)	OPERATIONAL SUPPORT	120
LAUDERDALE RADIOLOGY GROUP PO BOX 678063 DALLAS, TX 75267	NONE	501(C)(3)	OPERATIONAL SUPPORT	70
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LEADERSHIP AUTAUGA COUNTY PO BOX 680241 PRATTVILLE, AL 36068	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
LEGACY CHRISTIAN ACADEMY PO BOX 1054 KILLEN, AL 35645	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,500
LIBERTE MINISTRIES6870 CO RD 200 FLORENCE, AL 35633	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LOAVES AND FISHES 25 WOODS LAKE ROAD SUITE 810 GREENVILLE, SC 29607	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,500
LONG LEWIS FORD 2800 WOODWARD AVE MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	233
LINCARE INFUSTION HSVPO BOX 217 WYNNE, AR 72396	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LONE CEDAR CHURCH OF CHRIST 10000 COUNTY ROAD 47 FLORENCE, AL 35634	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,400
LOVE WORKS MINISTRY378 FAITH WAY WAYNESBORO, TN 38485	NONE	501(C)(3)	OPERATIONAL SUPPORT	300
LUPUS FOUND OF AMERICA MID SOUTH CHAPTER 2608 HARRIS ST SELMA, AL 36701	NONE	501(C)(3)	OPERATIONAL SUPPORT	250
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MAKE A WISH FOUNDATION 651 FAIRGROUNDS RD MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
MARBURY CHURCH OF GOD 3055 US HWY 31 N MARBURY, AL 36051	NONE	501(C)(3)	OPERATIONAL SUPPORT	300
MARCH OF DIMES 2751 LEGENDS PKWY STE 315 PRATTVILLE, AL 36066	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,250
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MARLEE SUTTON FOUNDATION 1319 CO RD 46 MT HOPE, AL 35651	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
MAX4KIDS FOUNDATION PO BOX 244040 MONTGOMERY, AL 36124	NONE	501(C)(3)	OPERATIONAL SUPPORT	550
MEN'S ALLIANCE OF NORTH ALABAMA PO BOX 672 FLORENCE, AL 35631	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MIKE MITCHELL MEMORIAL SCHOLARSHIP FUND 6150 WOODMONT DRIVE TUSCUMBIA, AL 35674	NONE	501(C)(3)	OPERATIONAL SUPPORT	250
MORRISON FUNERAL HOME 825 N MAIN ST TUSCUMBIA, AL 35674	NONE	501(C)(3)	OPERATIONAL SUPPORT	4,305
MT MOAB MISSIONARY BAPTIST CHURCH 1724 WEST OLD HAYNEVILLE RD MONTGOMERY, AL 36105	NONE	501(C)(3)	OPERATIONAL SUPPORT	750
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MT PLEASANT MISSIONARY BAPTIST CHURCH PO BOX 454 LEIGHTON, AL 35646	NONE	501(C)(3)	OPERATIONAL SUPPORT	300
MULDER CHURCH3454 FIRETOWER RD WETUMPKA, AL 36093	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
MUSCLE SHOALS ELECTRIC BOARD 1015 AVALON AVE MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	494
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MUSCLE SHOALS PARK & REC 1000 GATTMAN PARK DR MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	510
NEW FUTURES INCPO BOX 11907 HUNTSVILLE, AL 35814	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,500
NEW REMNANT WORSHIP CENTER 1107 FLORENCE BLVD FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,200
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NEW LIFE MEDICAL GROUP 15 STONEBRIDGE BLVD JACKSON, TN 38305	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,200
NFT ALABAMA TRANSPLANT FUND 5350 POPLAR AVE SUITE 850 MEMPHIS, TN 38119	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
NORTH ALABAMA MEDICAL CENTER PO BOX 10005 FLORENCE, AL 35631	NONE	501(C)(3)	OPERATIONAL SUPPORT	27
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NORTH HIGHLAND BAPTIST CHURCH 4680 HICKORY LANE TUSCUMBIA, AL 35674	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
NORTHWEST ALABAMA EMERGENCY MEDIC 21909W PO BOX 14000 BELFAST, ME 049154033	NONE	501(C)(3)	OPERATIONAL SUPPORT	40
QUAD CITY TAXI122 N ROYAL AVE FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	252
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SALVATION ARMY WOMENS AUXILIARY 501 ARCHDALE DRIVE CHARLOTTE, NC 28217	NONE	501(C)(3)	OPERATIONAL SUPPORT	495
SOUTHERN LEASE MANAGEMENT GROUP PO BOX 539 MEMPHIS, TN 38101	NONE	501(C)(3)	OPERATIONAL SUPPORT	150
SPARKS CUSTOM FABRICATION PO BOX 847 ADAMSVILLE, TN 38310	NONE	501(C)(3)	OPERATIONAL SUPPORT	400
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ST JUDE'S CHILDREN HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105	NONE	501(C)(3)	OPERATIONAL SUPPORT	400
STATELINE CHURCH3855 CHISHOLM RD IRON CITY, TN 38643	NONE	501(C)(3)	OPERATIONAL SUPPORT	750
THE ARTSY PLACE710 E 6TH ST MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	144
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE RESCUE ME PROJECT 1300 SUITE E JOHN R STREET MUSCLE SHOALS, AL 35661	NONE	501(C)(3)	OPERATIONAL SUPPORT	12,000
THE YORK HOUSE 211 HUCKLEBERRY LANE LEXINGTON, SC 29072	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,450
THOMPSON AND SON FUNERAL HOMES INC PO BOX 867 TUSCUMBIA, AL 35674	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,410
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TIM RHODES PROPERTIES 707 N BROADWAY ST FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	125
TUSCUMBIA CITY SCHOOLS 598 NORTH HIGH STREET TUSCUMBIA, AL 35674	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
UNA CHRISTIAN STUDENT CENTER PO BOX 103 FLORENCE, AL 35631	NONE	501(C)(3)	OPERATIONAL SUPPORT	800
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
VFW POST 8640431 N LOCUST ST 13 FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
VICTORY CHRISTIAN ACADEMY 5481 MAIN ST MILLBROOK, AL 36054	NONE	501(C)(3)	OPERATIONAL SUPPORT	100
WELCOME INCPO BOX 54 MILLBROOK, AL 36054	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,500
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WALDROP FREEWILL BAPTIST CHURCH 1500 28TH ST HALEYVILLE, AL 35565	NONE	501(C)(3)	OPERATIONAL SUPPORT	250
WELLS OF HOPE MINISTRIES INC 1600 FIRST STREET PO BOX 932 LEIGHTON, AL 35646	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
WEST LAUDERDALE WATER 3353 CO RD 200 FLORENCE, AL 35633	NONE	501(C)(3)	OPERATIONAL SUPPORT	150
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WESTSIDE BAPTIST CHURCH - TUSCUMBIA 411 W 11TH ST TUSCUMBIA, AL 35674	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
WOODMENLIFE2114 HELTON DR FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	475
WOODMONT BAPTIST CHURCH 2001 DARBY DRIVE FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,900
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WOUNDED WARRIOR PROJECT PO BOX 758516 TOPEKA, KS 66675	NONE	501(C)(3)	OPERATIONAL SUPPORT	200
YMCA OF THE SHOALS 2121 HELTON DRIVE FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,500
NORTHWEST ALABAMA HOUSING SERVICE PO BOX 429 SHEFFIELD, AL 35660	NONE	501(C)(3)	OPERATIONAL SUPPORT	3,000
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
NORTHWEST ALABAMA READING AIDES PO BOX 391 FLORENCE, AL 35631	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
ONCOLOGY SPECIALTIES PC PO BOX 13428 HUNTSVILLE, AL 35804	NONE	501(C)(3)	OPERATIONAL SUPPORT	40
ONE PLACE OF THE SHOALS 200 W TENNESSEE ST FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,500
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
OUTREACH OUTDOORS 2635 COUNTY ROAD 200 FLORENCE, AL 35633	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
PRATTVILLE YMCA 972 MCQUEEN SMITH RD S PRATTVILLE, AL 36066	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,835
PRIDE SENIOR CARE 1102 BRADSHAW DR FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RED BAY FREE WILL BAPTIST CHURCH 1303 HWY 24 RED BAY, AL 35585	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
RENEWED SPIRITS1954 JACKSON RD FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
RESTORATION CHURCHPO BOX 2881 AUBURN, AL 36832	NONE	501(C)(3)	OPERATIONAL SUPPORT	300
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RESTORATION RANCHPO BOX 767 TUSCUMBIA, AL 35674	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
REV DR AW WATKINS SCHOLARSHIP FDN PO BOX 8045 MONTGOMERY, AL 36109	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
RITINIGHT OF HARMONYPO BOX 596 FLORENCE, AL 35631	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,500
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
RUSSELLVILLE DREAM CENTER 206 COFFEE AVE RUSSELLVILLE, AL 35653	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,500
RUSSELLVILLE DRUGS 14001 HIGHWAY 43 SUITE 13 RUSSELLVILLE, AL 35653	NONE	501(C)(3)	OPERATIONAL SUPPORT	50
RUSSELLVILLE UTILITIES PO BOX 1148 721 S JACKSON AVE RUSSELLVILLE, AL 35653	NONE	501(C)(3)	OPERATIONAL SUPPORT	75
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SADDLE UP FOR ST JUDE 8215 6TH STREET LEIGHTON, AL 35646	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
SALVATION ARMYPO BOX 728 FLORENCE, AL 35631	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,682
SECOND MARIETTA BAPTIST CHURCH PO BOX 14 CASTLEBERRY, AL 36432	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SELMA CHURCH OF GOD 2004 WEST HIGHLAN AVE SELMA SELMA, AL 36701	NONE	501(C)(3)	OPERATIONAL SUPPORT	750
SENDME REFUGEPO BOX 604 VINEMONT, AL 35179	NONE	501(C)(3)	OPERATIONAL SUPPORT	800
SHEFFIELD FIRST UNITED METHODIST CHURCH 701 N MONTGOMERY AVE SHEFFIELD, AL 35660	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,465
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SHEFFIELD FUMC 701 N MONTGOMERY AVE SHEFFIELD, AL 35660	NONE	501(C)(3)	OPERATIONAL SUPPORT	300
SHEFFIELD UTILITIESPO BOX 580 SHEFFIELD, AL 35660	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,700
SHERROD AVE CHURCH OF CHRIST 1207 SHERROD AVE FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,200
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SHOALS AREA ASSOCIATION OF REALTORS 30 HIGHTOWER PLACE FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	750
SHOALS AREA COARMM INC 500 S MONTGOMERY AVE STE 138 SHEFFIELD, AL 35660	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
SHOALS CASA102 JACKSON CT SHEFFIELD, AL 35660	NONE	501(C)(3)	OPERATIONAL SUPPORT	450
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SHOALS CHAMBER FOUNDATION - TINSEL TRAIL 200 JIM SPAIN DR FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	250
SHOALS CIVIC LEAGUEPO BOX 2823 MUSCLE SHOALS, AL 35662	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,179
SHOALS DREAM CENTER 2950 CLOVERDALE RD FLORENCE, AL 35633	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SHOALS EMMAUS CLUSTER 146 STONEY CREEK DR FLORENCE, AL 35633	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
SHOALS HABITAT FOR HUMANITY 1120 N ROYAL AVE FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,500
SHOALS PRAISE CHOIRPO BOX 1734 FLORENCE, AL 35631	NONE	501(C)(3)	OPERATIONAL SUPPORT	500
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SHOALS SAV-A-LIFE2201 CLOYD BLVD FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	4,500
SIDNEYS SAFE FOUNDATION 1713 JACKSON ROAD FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	200
SMILE-A-MILE127 BLACKBERRY TRAIL FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,000
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SOUTHERN OAKS APARTMENTS 1301 HERMITAGE DRIVE FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	300
SPIRITHORSE TRC AT THE MERCY SEAT 1962 SUNCREST DRIVE FLORENCE, AL 36067	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,000
ST JOSEPH CATHOLIC SCHOOL 115 PLUM STREET FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	2,500
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
STONY POINT CHURCH OF CHRIST 1755 COUNTY RD 24 FLORENCE, AL 35633	NONE	501(C)(3)	OPERATIONAL SUPPORT	7,500
TEE IT UP FOR A CURE 708 WILSON DAM CIRCLE SHEFFIELD, AL 35660	NONE	501(C)(3)	OPERATIONAL SUPPORT	200
THE DWELLING PLACE 919 WEST COLLEGE ST FLORENCE, AL 35630	NONE	501(C)(3)	OPERATIONAL SUPPORT	1,750
Total ▶ 3a				520,031

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THE PLACE OF GRACE INCPO BOX 421 RUSSELLVILLE, AL 35653	NONE	501(C)(3)	OPERATIONAL SUPPORT	250
Total ► 3a				520,031

TY 2019 Other Assets Schedule**Name:** THE LONG LEWIS FOUNDATION**EIN:** 46-3747942**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
VOYA	300,000	300,000	300,000
STONEHILL STRATEGIC	608,362	1,125,957	1,125,957

TY 2019 Other Expenses Schedule**Name:** THE LONG LEWIS FOUNDATION**EIN:** 46-3747942**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	25	0		25
POSTAGE	64	0		64
CHARITABLE DONATIONS FOR INDIVIDUALS	42,520	0		42,520
BUSINESS EXPENSES	118	0		118
IT AND WEB EXPENSES	490	0		490
SUPPLIES	28	0		28

TY 2019 Other Increases Schedule

Name: THE LONG LEWIS FOUNDATION
EIN: 46-3747942

Description	Amount
ACCRUAL ADJUSTMENT	126,851

TY 2019 Other Professional Fees Schedule**Name:** THE LONG LEWIS FOUNDATION**EIN:** 46-3747942

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MANAGEMENT FEES	11,400	2,750		0
PROFESSIONAL FEES	2,000	1,500		0

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491318024440	
Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information.			OMB No. 1545-0047 2019
Name of the organization THE LONG LEWIS FOUNDATION				Employer identification number 46-3747942	

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 other 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) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

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

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

Name of organization
THE LONG LEWIS FOUNDATIONEmployer identification number
46-3747942**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	LONG LEWIS FORD OF SHOALS 2800 WOODWARD AVE MUSCLE SHOALS, AL 35661	\$ 460,062	☒ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
		\$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Name of organization THE LONG LEWIS FOUNDATION	Employer identification number 46-3747942
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given (see instructions). Use duplicate copies of Part II if additional space is needed.	(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
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	

Name of organization THE LONG LEWIS FOUNDATION	Employer identification number 46-3747942
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Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	