## **Return of Private Foundation**

Department of the Treasury

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

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

	10,,,,	Go to www.irs.gov/Form990PF to	or instructions and	tne late:	st informati	on.	to Public Inspection		
F	or cal	endar year 2019 or tax year beginning	, 201	9, and	ending		, 20		
N	ame of f	oundation			A Employe	er identification number	er		
9	EORG	E SHINN FOUNDATION, INC.			56-1083525				
		nd street (or P O box number if mail is not delivered to street address)	Roor	n/suite	<b>B</b> Telephor	ne number (see instruct	ions)		
-	725 C	cool Springs Blvd.	600	)	(615) 732-6076				
		wn, state or province, country, and ZIP or foreign postal code			· · · · · · · · · · · · · · · · · · ·	tion application is pend	ing check here		
I	rank	lin TN 37067			o woxomp	active application to post	g, check holes		
			n of a former public	charity	D 1. Foreig	n organizations, check	here ► 🗍		
ĺ		☐ Final return ☐ Amended			_	•	<del>.</del>		
		Address change Name cha	nge	v		n organizations meeting here and attach compu			
Н	Che	ck type of organization: X Section 501(c)(3) exempt p	private foundation	CIA	1	foundation status was			
		tion 4947(a)(1) nonexempt charitable trust   Other tax		dation		607(b)(1)(A), check here	. ▶□		
ī		market value of all assets at   J Accounting method			F If the fou	adation is in a 60 mont	, h. taumanataa		
	end	of year (from Part II, col. (c),				ndation is in a 60-mont ction 507(b)(1)(B), chec			
	line	16) ► \$ 3, 463. (Part I, column (d), must b	e on cash basis)				•		
	Part I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements		
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per		investment icome	(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)	152,000.	Bank R	是"化活"作	别都认为"国际"。公文式	MARTETA NUM		
	2	Check ► ☐ if the foundation is not required to attach Sch. B	WITH A METERS	<b>*******</b>	では、	是是小域和政府基础	PART WAS CAME.		
	3	Interest on savings and temporary cash investments					(本)與治性漢語的		
	4	Dividends and interest from securities					用的批談和政治		
	5	a Gross rents					CALL STATE OF THE		
	l t	Net rental income or (loss)	ATTLE WEST	10. XT. W.	"四部",是	MICHAEL MICHELLE	<b>这种是基础的</b>		
9	ยุ 6	Net gain or (loss) from sale of assets not on line 10			经运货证据	発展されている。			
į	ਨੂੰ   <b>।</b>	Gross sales price for all assets on line 6a	ははない。最初はは死。当	TOPPE		いいないでもある。	SELECT TO SELECT		
į	enue 6	Capital gain net income (from Part IV, line 2)	PARTY NEWS			14.24亿,国内的代表	<b>MALPHATERS</b>		
C	r   8	Net short-term capital gain	in the second of the		<b>有和此</b> 几点	,	PERMIT		
	9	Income modifications	PARTY TOTAL		是组织的		THE WHEN THE		
	103		ACCOUNT PARTY VIEW		和知识	<b>州和部位城区以</b> 以	THE WATER		
		Less: Cost of goods sold	STREET AND			即以此時代的日本	以而自由的政治		
				155.01 IX	<b>阿里斯</b>		NEEDER PROPERTY		
	. 11	Other income (attach schedule)	<u></u>				<b>这位,是是不是一个</b>		
_	12	Total. Add lines 1 through 11	152,000.				HEREN TALE		
	13	Compensation of officers, directors, trustees, etc.							
- 3	14 15 15	Other employee salaries and wages		ļ			<del></del>		
	15	Pension plans, employee benefits		-		,			
, -, ∐	16a L			-	•				
		Accounting less (attach schedule)	695.				695.		
٠ ;	17 18 19 20 21	Accounting rees (attach schedule)  Other professional fees (attach schedule)  Interest 0 CT 2 2 2020  Taxes (attach schedule) (see lest ructions)		ļ	<del></del> -				
	2   17	Tiperes (attach achadula) (acad trustians)	· · · · · · · · · · · · · · · · · · ·	<del> </del>	<del></del>				
	2   18 =   19	Depress of Catality and depletion	}	-		;	EXLICTIVERAN		
3	E   19 20	Deprec <b>創西 (陳朝</b> selfedule) and depletion Occupancy					CORPY IN THE PROPERTY AND AND ADDRESS OF THE PERSON OF THE		
~	21	Travel, conferences, and meetings							
: 3	21 22	Printing and publications							
		<b>5</b> ,							
וֹ כ	24	Total operating and administrative expenses.	<del></del>						
3	ਤੁ   <b>ੱ</b> ੱ	Add lines 13 through 23	695.				695		
<u></u>	23 24 25 25	Contributions, gifts, grants paid	150,000.	SP UNIVERSE	and the state of t	ENERGY WAS	150,000.		
. (	26	Total expenses and disbursements. Add lines 24 and 25	150,695.	23 AUTEU	H PARCHAT IN TH	A TOTAL TOTAL STATE OF STATE O	150,695.		
-	27	Subtract line 26 from line 12:	100,000.	The Bear	BREDDEED!	THE DIETERS OF THE	WE WENT THE REAL PROPERTY.		
	a		1,305.	劉炎	雅州縣	<b>新京美麗新</b>	は多数機器		
		Net investment income (if negative, enter -0-)	PAGE STATE OF STATE	J 318-471	- President	BURNES RIM	RECTEDANCE CO.		
	- 1	Adjusted net income (if negative, enter -0-)	The Land and	STATE OF	KHININ'	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MENTAL SERVE		

Fe	u u u	Balance Sneets Attached schedules and amounts in the description column	Beginning of year		End of	year
		should be for end-of-year amounts only. (See instructions )	(a) Book Value	(b) Book Val	ue	(c) Fair Market Value
	1	Cash—non-interest-bearing	2,158.	3,4	63.	3,463.
	2	Savings and temporary cash investments				
	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 ▶				
ß	8	Inventories for sale or use			-	
Assets	9	Prepaid expenses and deferred charges				
As	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) ▶		· <del>-</del>		
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)			-	
	11	Land building a subject to the Control of the Contr		·		
	• •	Land, buildings, and equipment, basis   Less accumulated depreciation (attach schedule)		· <del>                                     </del>		سرنا فالمراك المسافرة المراسدي والمراود والمواود
	15	Other assets (describe ► )				
	16	Other assets (describe >)  Total assets (to be completed by all filers—see the				
	.0	instructions. Also, see page 1, item I)	2,158.	2 4	63.	3,463.
	17	Accounts payable and accrued expenses	2,130.		03.	
	18	Grants payable				
es	19	Deferred revenue	-			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ab	21	Mortgages and other notes payable (attach schedule)				
<b>=</b>	22					·
	23	Other liabilities (describe ►) <b>Total liabilities</b> (add lines 17 through 22)				
-s		Foundations that follow FASB ASC 958, check here				
Balances		and complete lines 24, 25, 29, and 30.				
an	24	Net assets without donor restrictions			ŀ	
3al	25	Net assets with donor restrictions			+	
_		Foundations that do not follow FASB ASC 958, check here ► 🗵				
E		and complete lines 26 through 30.				i
Net Assets or Fund	26	Capital stock, trust principal, or current funds	2,158.	3,4	63	ľ
Ō	27	Paid-in or capital surplus, or land, bldg., and equipment fund	2,130.	3,4	63.	
ets	28	•			-	
SS	29			2 4	<u> </u>	
t A	30	Total liabilities and net assets/fund balances (see	2,158.	3,4	63.	
Ne	30	instructions)	2 150	3,4	63	
	rt III	Analysis of Changes in Net Assets or Fund Balances	2,158.	3,4	63.]	
_		al net assets or fund balances at beginning of year—Part II, colu	mn (a) line 00 (	aaraath	j	·····
t		il net assets or fund balances at beginning of year—Part II, colul -of-year figure reported on prior year's return)			1	2 150
2		er amount from Part I, line 27a			2	2,158.
_		an an annual and a share and a share a contract of the same at the			3	1,305.
3					4	2 462
		lines 1, 2, and 3			5	3,463.
5		reases not included in line 2 (itemize) ► al net assets or fund balances at end of year (line 4 minus line 5)—I			6	2.462
Ð	iota	inet assets of fund balances at end of year (line 4 minus line 5)—I	-arrii, column (D), IIN6	543	ן סן	3,463.

Part	V Capital Gains an	d Losses for Tax on Investm	nent Income			
		ind(s) of property sold (for example, real eause, 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						
b	···					
c				<u> </u>		<u> </u>
d			<del></del>			<del> </del>
<u> </u>				İ		<u> </u>
	(e) Gross sales price  (f) Depreciation allowed (or allowable)  (g) Cost or other basis plus expense of sale					iin or (loss) (f) minus (g))
<u>a</u>	······································			<u> </u>		
<u>b</u>						
<u>c</u>						
<u>d</u>						
<u> </u>	Complete only for assets sh	L	by the foundation	on 12/21/60		
	Complete only for assets sh	owing gain in column (h) and owned				ol (h) gain minus ot less than -0-) <b>or</b>
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		(from col (h))
а				<u> </u>		
<u>a</u>						
				·		
d						
e						
2	Capital gain net income of	orinei caniialinssi /	also enter in Pa , enter -0- in Pai		2	
3	Not short-term capital ga	in or (loss) as defined in sections			_	
3		t I, line 8, column (c). See instru				
					3	
Part		der Section 4940(e) for Redu			Income	
(For o	ptional use by domestic pr	ivate foundations subject to the	section 4940(a)	tax on net invest	ment income.)	
-	-	·	``		•	
If sect	ion 4940(d)(2) applies, leav	e this part blank.				
Was t	he foundation liable for the	section 4942 tax on the distribu	table amount of	any year in the l	pase period?	🗌 Yes 🔲 No
If "Ye	s," the foundation doesn't	qualify under section 4940(e). Do	not complete ti	his part.		
1	Enter the appropriate am	ount in each column for each yea	ar, see the instru	ictions before m	aking any entries.	
	(a) Base period years	(b)		(c)	Dis	(d) stribution ratio
Cale	endar year (or tax yéar beginning ir			f noncharitable-use a		divided by col (c))
	2018	49,9		2,3	65.	21.130233
	2017	183,9	<del></del>	3,4		53.820070
	2016	387,7			60.	93.216587
	2015	635,5			08.	166.909664
	2014	61,5	00.	19,2	39.	3.196632
2	Total of line 1, column (d	)			. 2	338.273186
3		for the 5-year base period—div				
	the number of years the f	oundation has been in existence	if less than 5 ye	ears	. 3	67.654637
4	Enter the net value of nor	ncharitable-use assets for 2019 fi	rom Part X, line	5	. 4	2,674.
5	5 Multiply line 4 by line 3			. 5	180,908.	
<b> 6</b> ,	Enter 1% of net investme	ent income (1% of Part I, line 27b	)		. 6	
7	Add lines 5 and 6				. 7	180,908.
8		ons from Part XII, line 4			. 8	150,695.
	If line 8 is equal to or gre Part VI instructions.	ater than line 7, check the box in	n Part VI, line 1b	, and complete	that part using a	1% tax rate. See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—se	e instr	uctio	ns)		
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		,	•		
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of	- <del></del>	<u> </u>			
2	Part I, line 12, col. (b)					
2 3	Add lines 1 and 2	+				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	+	<u>.</u>	0.		
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	+		0.		
6	Credits/Payments:	+				
а	2019 estimated tax payments and 2018 overpayment credited to 2019	1				
b	Exempt foreign organizations—tax withheld at source 6b	];		.		
C	Tax paid with application for extension of time to file (Form 8868) 6c 0 .	1 .				
d	Backup withholding erroneously withheld			l		
7	Total credits and payments. Add lines 6a through 6d	-		0.		
8	Enter any penalty for underpayment of estimated tax. Check here _ if Form 2220 is attached _ 8	<del> </del>		<del>- •</del>		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0.		
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax   Refunded   11	+				
	VII-A Statements Regarding Activities		•			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	,	Yes	No		
14	participate or intervene in any political campaign?	" <u>1a</u>	1.00	×		
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the		1			
	instructions for the definition	1b	ļ	×		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material	s i	, ,	,		
	published or distributed by the foundation in connection with the activities.			النــــ		
С	Did the foundation file Form 1120-POL for this year?	1c		×		
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	r 😽		.		
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$	_	١,	1		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$	-				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2				
	If "Yes," attach a detailed description of the activities.	, ,				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article	s				
-	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	1	×		
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.	•		ĺ		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.					
	By language in the governing instrument, or	ı,	<u> </u>	1		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	ıt				
	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 X	V 7	×			
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			1		
	NC			,		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	il	7,			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	×			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of	r				
-	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIVIf "Yes,					
	complete Part XIV	9		×		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the	ır				
	names and addresses	40	v			

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 t meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions			×
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualific person had advisory privileges? If "Yes," attach statement. See instructions	ed 12		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applicatio	n? <b>13</b>		×
	Website address ► N/A			
14	The books are in care of ► Annette Wesolowski Telephone no. ► (61	5)732-	6280	)
	Located at ▶ 725 Cool Springs Blvd, Suite 600 Franklin TN ZIP+4 ▶ 370	67		<u></u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here and enter the amount of tax-exempt interest received or accrued during the year		•	▶ □
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other author		Yes	No
	over a bank, securities, or other financial account in a foreign country?	}	<u>l</u>	×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name the foreign country ▶	of .		
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			1
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u></u>	Yes	No
1a	During the year, did the foundation (either directly or indirectly):	.   -		'.
	<ul><li>(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes </li><li>(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a</li></ul>	10   ·		
	disqualified person?	ما		1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1	İ	1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	į.	-	
	(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)?	lo		• •
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		·	
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described			<b> </b> _
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	_   1b		<u> </u>
•	Organizations relying on a current notice regarding disaster assistance, check here	_		
С	were not corrected before the first day of the tax year beginning in 2019?	1c	<b>├</b> ──	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a prival operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		7	
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?	lo		
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	ľ		[. ]
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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	<u> </u>	
	all years listed, answer "No" and attach statement—see instructions.)	2b		×
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	ĺ	,	
0-	▶ 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?	٠.		
	<u> </u>	1.		
þ	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation	1		li
	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			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes			- X -
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize	ts		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019			×

Par	Statements Regarding Activities	s for W	/hich Form	4720	мау ве н	require	e <b>a</b> (contil	nuea)			
5a	During the year, did the foundation pay or incur	any am	ount to:							Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? .   Yes  No								•	ı	
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,										
	directly or indirectly, any voter registration drive?									٠,	•
	(3) Provide a grant to an individual for travel, stu						Yes	⊠ No	1		
		•	-	•			_	<u> </u>			
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions								^		- 1
							_ ∐ Yes	X No			ᅥ
	(5) Provide for any purpose other than religious							_			
	purposes, or for the prevention of cruelty to							⊠ No		T.	1
b				•	-			scribed		i	
	in Regulations section 53.4945 or in a current no	tice reg	garding disas	ter ass	stance? S	ee instr	uctions		5b		
	Organizations relying on a current notice regardi	ng disa	ster assistan	ce, che	ck here			▶□		- :	1
C	If the answer is "Yes" to question 5a(4), does t	he four	ndation claim	exem	otion from	the tax					
	because it maintained expenditure responsibility	for the	grant?				☐Yes	□No			
	If "Yes," attach the statement required by Regula										` ]
6a	Did the foundation, during the year, receive any					emiums	1		7.	-	
-	on a personal benefit contract?		-	-			∏Yes	X No			
L	Did the foundation, during the year, pay premium					   hamaf:	_	_		<u> </u>	×
b		ris, dire	city of indired	ouy, on	a persona	Denen	Contract	. r	6b		
_	If "Yes" to 6b, file Form 8870.						r	(C)			1
7a	At any time during the tax year, was the foundation		•							<u></u> -	
b	If "Yes," did the foundation receive any proceed		•					n? .	7b		
8	Is the foundation subject to the section 4960 ta							_		ا ، د ،	1
	remuneration or excess parachute payment(s) de									ù,	1
Par	t VIII Information About Officers, Direc	tors, T	rustees, F	ounda	tion Man	agers,	Highly I	Paid E	mploy	ees,	
	and Contractors										
1	List all officers, directors, trustees, and found										
	(a) Name and address		e, and average rs per week		mpensation ot paid,		Contribution byee benefit		(e) Expe		
	(-)		ed to position		ter -0-)		erred comp		other	allowar	ices
Geo	rge Shinn	Presi	ident								
	Cool Springs Blvd, Suite 600 Franklin TN 37067				0.			0.			0.
	is Shinn	Vice	President								
	Cool Springs Blvd, Suite 600 Franklin TN 37067				0.			0.			Ο.
	ncer Stolpen	Secre	etary								
	Bronze Leaf Drive Indian Land SC 29707		July 1		0.			0.			Ο.
203.	BIONZE LEAT DITVE INGTAIN LANG SC 29707				<u> </u>			<u> </u>			<del>.</del>
2	Compensation of five highest-paid employed	e (oth	or than thos	e incl	ıdad on li	no 1_	ego inetr	uction	c) If n	one	ontor
-	"NONE."	o tour	uii 110		aaca UII II	1—		300011	-j. 11 tl	J. 10,	
							(d) Contrib				
	(a) Name and address of each employee paid more than \$50,00	10	(b) Title, and a hours per v		(c) Compe	neation	(d) Contrib employee	benefit	(e) Expe		
	(a) Marie and address of each employee paid more than 400,00	,0	devoted to p		(c) compo	ilisation	plans and compen		other	allowar	ices
NON	<u>'</u>										
								~,,,,,,			
Total	number of other employees paid over \$50,000 .							. ▶	0		

Par	VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	ployees,
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	33
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON		
<del></del>	050 000 for any formation and	
	<u>, , , , , , , , , , , , , , , , , , , </u>	0
	IX-A Summary of Direct Charitable Activities	<del></del>
Lis	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
2		
_		
3		
_		
4		
Par	IX-B Summary of Program-Related Investments (see instructions)	
	circle 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		
Tota	. Add lines 1 through 3	
	F	orm <b>990-PF</b> (2019)

Part	winimum investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign fou	ndations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	2,715.
c	Fair market value of all other assets (see instructions)	1c	2,715.
d	<b>Total</b> (add lines 1a, b, and c)	1d	2,715.
е	Reduction claimed for blockage or other factors reported on lines 1a and		2,715.
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	2,715.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	41.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,674.
6	Minimum investment return. Enter 5% of line 5	6	134.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	oundat	rions
1	Minimum investment return from Part X, line 6		124
' 2а	- I I I	1	134.
b	Income tax for 2019. (This does not include the tax from Part VI.)	-	
C	Add lines 2a and 2b	20	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	2c 3	0. 134.
4	Recoveries of amounts treated as qualifying distributions	4	134.
5	Add lines 3 and 4	5	134.
6	Deduction from distributable amount (see instructions)	6	134.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		<del></del>
-	line 1	7	134.
Part	XII Qualifying Distributions (see instructions)		134.
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	150,695.
b	Program-related investments—total from Part IX-B	1b	20070501
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:		<del></del>
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	150,695.
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	150,695.
	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 wheth	er the foundation

art	Undistributed Income (see instruction	ons)	<del></del> -		<del> </del>
		(a) Corpus	(b) Years prior to 2018	<b>(c)</b> 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7	-			134.
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only	•			
b	Total for prior years. 20, 20, 20				
3	Excess distributions carryover, if any, to 2019:				_
а	From 2014 61,500.				
b	From 2015 634,630.				
С	From 2016 387,591.				
d	From 2017				
e	From 2018	- 1 015 151			
f	Total of lines 3a through e	1,317,154.			
4	Qualifying distributions for 2019 from Part XII, line 4:  \$150,695.				
а	Applied to 2018, but not more than line 2a .				
	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2019 distributable amount				134.
е	Remaining amount distributed out of corpus	150,561.			1
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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,467,715.			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				,
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0.		
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)				
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	61,500.			
9	Excess distributions carryover to 2020.				
	Subtract lines 7 and 8 from line 6a	1,406,215.		<u>'</u>	
10	Analysis of line 9:				
а	Excess from 2015 634, 630.				
b	Excess from 2016		u .		
C	Excess from 2017 <u>183,749</u> .				
d	Excess from 2018				
е	Excess from 2019 150, 561.	I			1

Part	XIV Private Operating Founda	tions (see instri	ictions and Part	VII-A guestion	9)	N/A
					<del></del>	IV/A
Ia	If the foundation has received a ruling foundation, and the ruling is effective fo					
<b>L</b>			-		action D 4042(4)	(2) 07 (7 4040()/5)
	Check box to indicate whether the four		operating lounus	Prior 3 years	ection 4942(j)	(3) or 4942(j)(5)
Za	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(1) 0040	<del></del>	(4) 0016	(e) Total
	investment return from Part X for	(a) 2019	(b) 2018	(c) 2017	(d) 2016	/
	each year listed			<del> </del> -		<del> </del>
	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4, for each year listed		-	ļ	/	
d	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					
	(2) Value of assets qualifying under		1			
	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					
С	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on					
	securities loans (section	l				
	512(a)(5)), or royalties)			ļ <u> </u>		
	(2) Support from general public and 5 of more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization	<del></del>	<del> </del>	<del>                                       </del>	<del></del>	<u> </u>
Part	(4) Gross investment income  XV Supplementary Information	n (Complete th	ois part only if t	the foundation k	ad \$5 000 or m	oro in assets at
Part	any time during the year-			me foundation r	iad \$5,000 or ni	ore in assets at
	Information Regarding Foundation		115.)	<del>-</del>		
1 a	List any managers of the foundation		uted more than 29	% of the total cont	ributions received	by the foundation
•	before the close of any tax year (but of					by the loundation
	bololo illo ologo ol ally tax your (but o	my in they have e		40,000,. (000 (	30011011001(0)(2).)	
	List any managers of the foundation	who own 10% o	r more of the sto	ock of a corporation	n (or an equally la	rge portion of the
_	ownership of a partnership or other er					ago portion or and
	·	•		J		
2	Information Regarding Contribution	n. Grant. Gift. Loa	an. Scholarship.	etc Programs:		
	Check here ▶ ☐ if the foundation				organizations and	I does not accept
	unsolicited requests for funds. If the f					
	complete items 2a, b, c, and d. See in	structions.				
а	The name, address, and telephone nu	imber or email ad	dress of the perso	on to whom applica	ations should be a	ddressed:
	·					
	See Supplementary Informat					
b	The form in which applications should	l be submitted an	d information and	I materials they sho	ould include.	
						·
С	Any submission deadlines:					
d	Any restrictions or limitations on av	vards such as h	v geographical a	areas charitable fi	ields, kinds of ins	titutions or other
J	factors:	ruido, suoit as D	, goograpinoal c	arous, chantable li		
	·					

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

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	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	recipient		-		
a Paid during the year						
Deer Run Retreat			_			
3845 Perkins Rd			To support the Capital			
Thompson's Station TN 37179	None	N/A	Fund: The Refuge	10,000.		
Tennessee Baptist Children's Homes						
1310 Franklin Rd			To support the	100 000		
Brentwood TN 37027	None	N/A	Foster Care Program	100,000.		
The Bridge Ministry						
P.O. Box 463	.,	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	To support the	10 000		
Goodlettsville TN 37070	None	N/A	ongoing mission	10,000.		
Tennessee Baptist Children's Homes			To support "Hope Hines Fore Kids			
1310 Franklin Rd	N	N7 / 70	Golf Classic" to benefit children	10 000		
Brentwood TN 37027	None	N/A	at the Brentwood Campus	10,000.		
Heartlight Ministries			Ma aumant the			
P.O. Box 480	N	N / 7	To support the ongoing mission	10,000.		
Hallsville TX 75650	None	N/A	ongoing mission	10,000.		
Hebron Colony Ministries, Inc.						
356 Old Turnpike Rd Boone NC 28607	None	N/A	Ministry gift	10,000.		
Bootie NC 20007	Mone	IN/A	Ministry girt	10,000.		
Total			<b>▶</b> 3a	150,000.		
<b>b</b> Approved for future payment						
None						
and a state of the						
Total			▶ 3b	0.		
		· · ·		990-PE (2010)		

Pa	rt X	VI-A Analysis of Income-Producing Ad	ctivities				
Ente	er gr	oss amounts unless otherwise indicated.	Unrelated bu	usiness income	Excluded by sect	ion 512, 513, or 514	(e)
1	Pro	ogram service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	Related or exemple function income (See instructions.)
•	а	9,4111 0011100 10101100.					
	b			-			<del></del>
	c						
	d				<del> </del>		<del></del>
	e		<del>-</del>				
	f						
		Fees and contracts from government agencies			<del>                                     </del>		
2		mbership dues and assessments					
3		erest on savings and temporary cash investments	_		_		
4		idends and interest from securities					
5		t rental income or (loss) from real estate:					
·		Debt-financed property			<u> </u>		<u> </u>
		Not debt-financed property					
6		t rental income or (loss) from personal property					
7		ner investment income					
8		n or (loss) from sales of assets other than inventory					
9		t income or (loss) from special events	-		-	<u> </u>	
10		oss profit or (loss) from sales of inventory			-		
11		ner revenue: a					
	b						
	С						
	d						
	e				·		
		ototal. Add columns (b), (d), and (e)					
13	To	tal. Add line 12, columns (b), (d), and (e)				13	
		ksheet in line 13 instructions to verify calculation	<u> </u>				
		VI-B Relationship of Activities to the A	<u>.</u>		<del></del>		
Lin	e No ▼	Explain below how each activity for which accomplishment of the foundation's exempt pur	income is repo	orted in column	(e) of Part XVI	-A contributed in	mportantly to the
	•	досолирия по подпадного охотири ра					
			<del>-</del>				
				<del></del>	<u></u>		
			· · · · · · · · · · · · · · · · · · ·		· -		<del></del>
							<del></del>
				-			
				<del></del>			
			<del></del>	<del></del>			
					-		· · ·
			<del>-</del> ·		<del>-</del>		
				<del></del>			<del></del>
		<del>-</del>	<del></del> -		<del></del>		
						·-	
							<del>.</del>
					v = v.		- · · -
					•	<del></del>	
					_		
	-						
					<u> </u>		

Form **990-PF** (2019)

		Organizati	ons											
1 a	ın se orgar	ection 501(c) (onizations?	directly or indirectly other than section porting foundation to	501(c)(3)	organizatio	ns) or	in secti	on 527					Yes	No
	(1) C	ash										1a(1)		×
	(2) 0	ther assets .										1a(2)		×
b	Other	r transactions:												
	(1) S	ales of assets to	a noncharitable exe	empt orga	nization .							1b(1)		×
	(2) P	urchases of asse	ets from a noncharit	able exem	ıpt organizat	ion .						1b(2)		×
	(3) R	ental of facilities	, equipment, or othe	er assets								1b(3)		×
	(4) R	eimbursement a	rrangements									1b(4)		×
		oans or loan gua										1b(5)		×
	(6) P	erformance of se	ervices or membersh									1b(6)		×
С	Shari	ng of facilities, e	quipment, mailing li	sts, other	assets, or pa	aid emp	loyees					1c		×
		-	of the above is "Ye			-	-					how the	fair m	arket
	value	of the goods, o	ther assets, or servi	ces given	by the repo	rting for	undation	. If the f	oundati	on rec	eived l	ess than	fair m	arket
	value	in any transacti	on or sharing arrang	ement, sh	iow in colum	ın <b>(d)</b> th	e value c	of the go	ods, ot	her ass	sets, or	services	recei	ved.
(a) Line	no (	b) Amount involved	(c) Name of nonc	haritable exe	mpt organizatio	n	(d) Desci	ription of t	ransfers, 1	transacti	ons, and	sharing an	angeme	ents
								•						
														•
														_
		-												
					<u></u>									
							_							
									_					
2a			ectly or indirectly a											
			501(c) (other than se		(c)(3)) or in se	ection 5	27? .					□ Y	es 🗵	No
b	If "Ye	s," complete the	following schedule											
		(a) Name of organ	ization		(b) Type of orga	inization			(c)	Descript	on of rela	ationship		
	T :													
>:			declare that I have examine aration of preparer (other the								of my kno	wledge and	belief, it	ıs true,
Sign		M	11		101. 1		<b>~</b> .	1 .	-	-3*		he IRS disci		
Here		Hora	el el. F	mi	112/20	<b>/</b>	<b>PRASI</b>	den+	•			ne preparer : structions		
	Sign	ature of officer or tru			Date	Title	l	72.						
Paid		Print/Type preparer	's name	1 1/	signature	/h/L.	//	Date		Che				
rep	arer	HAROLD J.	BOUILLION	<del></del>	ulk	ZZZU	ulko	× 10	<del></del>		-employe	11011		2
Jse (		Firm's name ▶	BOUILLION &	ASSOCI <i>I</i>	ATES, LAZO	<u>:</u>						223405		
	•	Firm's address ▶	2117 VETERAN	CV.TR 2	#354				Ph	one no	(504	1400 - 5	863	

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

LA 70002

METAIRIE

BAA

## 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

Employer identification number

GEOR	GE SHINN FOUN	DATION, INC.	56-1083525
Organiz	tation type (check	one):	
Filers o	f:	Section:	
Form 99	90 or 990-EZ	☐ 501(c)( ) (enter number) organization	
		4947(a)(1) nonexempt charitable trust <b>not</b> treated a	as a private foundation
		527 political organization	
Form 99	0-PF	▼ 501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a	private foundation
		501(c)(3) taxable private foundation	
Note: O	only a section 501(c)	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the	General Rule and a Special Rule. See
Genera	l Rule		
X		n filing Form 990, 990-EZ, or 990-PF that received, during or property) from any one contributor. Complete Parts I a contributions.	
Special	Rules		
	regulations under 13, 16a, or 16b, ar	n described in section 501(c)(3) filing Form 990 or 990-EZ sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Sched d that received from any one contributor, during the year, of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form	fule A (Form 990 or 990-EZ), Part II, line , total contributions of the greater of (1)
	contributor, during	n described in section 501(c)(7), (8), or (10) filing Form 990 the year, total contributions of more than \$1,000 exclusive anal purposes, or for the prevention of cruelty to children	vely for religious, charitable, scientific,
	contributor, during contributions total during the year for <b>General Rule</b> app	n described in section 501(c)(7), (8), or (10) filing Form 990 the year, contributions exclusively for religious, charitable ed more than \$1,000. If this box is checked, enter here the an exclusively religious, charitable, etc., purpose. Don't clies to this organization because it received nonexclusively more during the year	e, etc., purposes, but no such e total contributions that were received complete any of the parts unless the y 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).

Cat No 30613X

Name of organization

**Employer identification number** 

<u>GEO</u> RGE	SHINN FOUNDATION, INC.	56	5-1083525
Part I	Contributors (see instructions). Use duplicate cop	oies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	George Shinn 725 Cool Springs Blvd, Suite 600 Franklin TN 37067	\$ 152,000.	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occupation Payroll Payroll Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

noncash contributions.)

Name of organization
GEORGE SHINN FOUNDATION, INC.

Employer identification number

56-1083525

Part II	Noncash Property (see i	nstructions). Use duplicate copi	es of Part II if additional space is needed.
---------	-------------------------	----------------------------------	--

raitii	14011043111 Toperty (See instructions). Ose duplicate co	pies er rare ir ir additional spac	oo io riceded.
(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
		\$	
	DEV 06/02/20 DB		

Part III

**Employer identification number** 

56-1083525

GEORGE	SHINN	FOUNDATION,	INC.

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 add	litional 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				
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee			
(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, ar	nd 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, ar	nd ZIP + 4	Relationship of transferor to transferee			
(a) Na			1			
(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, ar	nd ZIP + 4	Relationship of transferor to transferee			

GEORGE SHINN FOUNDATION, INC.

Form 990-PF: Return of Private Foundation

Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc.

Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc.	Contribution, Grant, Gift, Loan, Scholar		Continuation Statement
Name and Address Information	Form Information	Submission Information	Restrictions
GEORGE SHINN 725 Cool Springs Blvd, Suite 600 Franklin, TN 37067	IN LETTER FORM OUTLINING AMOUNT AND BASIS OF REQUEST.	NONE	NONE
615-732-6076			

Name GEORGE SHINN FOUNDATION, INC.	Identification Number 56-1083525
Part VII-A; ln 10	
George Shinn 725 Cool Springs Blvd., Suite 600	
Franklin, TN 37067	

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