Form 990-PF

EXTENDED TO NOVEMBER 16, 2 Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public ▶ Go to www irs gov/Form990PF for instructions and the latest information

Department of the Treasury Internal Revenue Service For calendar year 2019 or tax year beginning , and ending A Employer identification number Name of foundation THE JOSEPH TREADWELL CHARITABLE FDN. 57-0880131 C/O TRUSTMARK NATIONAL BANK Number and street (or P O box number if mail is not delivered to street address) B Telephone number P. O. BOX 3067 (251)431-7<u>800</u> City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 36652 MOBILE, AL Initial return Initial return of a former public charity D 1 Foreign organizations, check here G Check all that apply Final return Amended return Foreign organizations meeting the 85% check here and attach computation Address change Name change Check type of organization: X Section 501(c)(3) exempt private foundation 04 E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust ____ Other taxable private foundation under section 507(b)(1)(A), check here Fair market value of all assets at end of year | J | Accounting method. | X | Cash If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col. (c), line 16) 10,614,773. (Part I, column (d), must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) expenses per books income income Contributions, gifts, grants, etc., received Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 19,959 19,959 STATEMENT 162,407 162,407 STATEMENT Dividends and interest from securities 387,450 387,450 STATEMENT 5a Gross rents STATEMENT 350,314. b Net rental income or (loss) 157,822 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Š 2,475,754. 157,8227 Capital gain net income (from Part IV, line 2) JUL I 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 177 177 0.STATEMENT 11 Other income 727,815 12 Total Add lines 1 through 11 727,815 0 119,589 0 0. 119,589 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 0. 7,999 7,999 0. STMT 6 16a Legal fees 9,170 0 0. 9,170 STMT b Accounting fees c Other professional fees 17 Interest 21,294 21,294 0 Ο. STMT 8 18 Taxes 30,581 0 30,581 Depreciation and depletion Occupancy 21 Travel, conferences, and meetings SCANNED NOV 0 3 2020 22 Printing and publications Other expenses S'

Total operating and administrative expenses. Add lines 13 through 23

Contributions of the state of the STMT 9 8,032 8,032 0 0. 196,665 196,665 566,888. 566,888. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 196,665 566,888. <u>763,553</u> Add lines 24 and 25 27 Subtract line 26 from line 12: -35,738 8 Excess of revenue over expenses and disbursements 531,150 b Net investment income (if negative, enter -Q-) 0 C Adjusted net income (if negative enter -0-) Form 990-PF (2019)

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions

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	7,614,813.
2	Enter amount from Part I, line 27a	2	-35,738.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	7,579,075.
6	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	7,579,075.

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566,888.

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.

8 Enter qualifying distributions from Part XII, line 4

THE JOSEPH TREADWELL CHARITABLE FDN. 57-0880131 Form 990-PF (2019) C/O TRUSTMARK NATIONAL BANK Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here
and enter "N/A" on line 1 (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: b Domestic foundations that meet the section 4940(e) requirements in Part V, check here | Land and enter 1% 10,623. of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 4 5 5 Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-6 Credits/Payments: 18,660 a 2019 estimated tax payments and 2018 overpayment credited to 2019 0. b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 0. 6c 0. d Backup withholding erroneously withheld 18,660. 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached R 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed 9 8,037. 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 037. Refunded 11 Enter the amount of line 10 to be Credited to 2020 estimated tax Part VII-A | Statements Regarding Activities Yes No 1a During the lax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition Х 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. Х c Did the foundation file Form 1120-POL for this year? 10 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (2) On foundation managers. ► \$ (1) On the foundation. > \$ e 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? Х 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, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4h X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law X remain in the governing instrument? X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 8a Enter the states to which the foundation reports or with which it is registered. See instructions. AL

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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)

10 Did any persons become substantial contributors during the lax year? If Yes," attach a schedule tisting their names and addresses

year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV

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

of each state as required by General Instruction G? If "No," attach explanation

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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?

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Part VII-B Statements Regarding Activities for Which I	Form 4720 Way be r	required (contin	uea)		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)	n /Q/5/p\\2		es 🗶 No			
(2) Influence the outcome of any specific public election (see section 4955); o		·				ĺ
any voter registration drive?	in to builty only and only at man	Y	s X No			İ
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		s X No			ļ
(4) Provide a grant to an organization other than a charitable, etc., organization						[
4945(d)(4)(A)? See instructions			s X No			ĺ
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t	for	i			ĺ
the prevention of cruelty to children or animals?			es X No		İ	ĺ
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	in Regulations				ĺ
section 53 4945 or in a current notice regarding disaster assistance? See instri	uctions		N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check t	here					ĺ
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi						
expenditure responsibility for the grant?	N	I/A	es L No			ĺ
If "Yes," attach the statement required by Regulations section 53.4945-5(d)						ł
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	٠	F==1			İ
a personal benefit contract?		Ye	es X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b		Х
If "Yes" to 6b, file Form 8870.	.b		es 🗓 No			
7a At any time during the tax year, was the foundation a party to a prohibited tax s		16	N/A	7b		<u> </u>
 b If "Yes," did the foundation receive any proceeds or have any net income attributed. 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$ 			IV/A	70		
excess parachule payment(s) during the year?	1,000,000 in remuneration o	'	s X No			İ
Part VIII Information About Officers, Directors, Trust	ees. Foundation Ma					
Paid Employees, and Contractors	,					
1 List all officers, directors, trustees, and foundation managers and t						
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plan and deferred	s a	(e) Exp ccount,	ense , other
	to position	enter -0-)	compensation	_	allowa	nces
TRUSTMARK NATIONAL BANK	TRUSTEE					
P.O. BOX 3067, MOBILE, AL 36652	0.00	FO E00	,			0
OVARIOMER IZ CARRY	0.00 _	59,589.	0	+		0.
	FDN. MGR.			:		
5004 DAUPHIN IS. PKWY, MOBILE, AL	0.00	20,000.	0			0.
JOHN H. WILSON	FDN. MGR.	20,000.		1		
P.O. BOX 185, MOBILE, AL 36601	PDIV. MGR.					
1.0. DON 105, MODILLE, AL 30001	0.00	20,000.	0			0.
VINCENT F. KILBORN	FDN. MGR.					
P.O. BOX 1904, MOBILE, AL 36633						
	0.00	20,000.	0	<u>. </u>		0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(/ d) 0 - d - b - b - b - b - b			
(a) Name and address of each employee paid more than \$50,000	(b) Tille, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plan and deferred	s a	(e) Exp ccount,	other
	devoted to position	(0)	compensation	_	allowa	ices
NONE						
		 	_ 	-		
	-					
		 		+		
	1					
	1 .					

Total number of other employees paid over \$50,000

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	3	(c) Compensation
NONE		
	ŀ	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	•	0
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 N/A		
·		
2		
	_	
•		
3	_	
4		
Doubly Die		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the lax year on lines 1 and 2		Amount
1 N/A		Amount
1	-	
2		
All other program-related investments. See instructions.		•
3	\dashv	
		-
		
Total. Add lines 1 through 3	<u> </u>	0.
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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, 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	6,676,595.
b	Average of monthly cash balances	1b	193,288.
C	Fair market value of all other assets	1c	3,345,413.
q	Total (add lines 1a, b, and c)	1d	10,215,296.
۵	Reduction claimed for blockage or other factors reported on lines 1a and		
٠	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	10,215,296.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	153,229.
5	Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here and on Part V, line 4	5	10,062,067.
6	Minimum investment return Enter 5% of line 5	6	503,103.
	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an		
ت	foreign organizations, check here and do not complete this part)	a oortan	'
1	Minimum investment return from Part X, line 6	1	503,103.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
c	Add lines 2a and 2b	2c	10,623.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	492,480.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	492,480.
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	492,480.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		566 000
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	566,888.
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:	1	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach lhe 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	566,888 .
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	<u>566,888.</u>
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies f	for the section
	4940(e) reduction of lax in those years.		

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Page 9 Part XIII Undistributed Income (see instructions) (d) (b) (c) 2019 Years prior to 2018 2018 Corpus 1 Distributable amount for 2019 from Part XI. 492,480. line 7 2 Undistributed income, if any, as of the end of 2019 0 a Enter amount for 2018 only b Total for prior years' 0. 3 Excess distributions carryover, if any, to 2019 342,813 a From 2014 370,671. **b** From 2015 308,949. c From 2016 d From 2017 195,671, 52,329 e From 2018 1,270,433 f Total of lines 3a through e 4 Qualifying distributions for 2019 from 566,888. Part XII, line 4: ► \$ a Applied to 2018, but not more than line 2a 0 b Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 492,480. d Applied to 2019 distributable amount 74,408 e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount 0 0. must be shown in column (a)) 6 Enter the net total of each column as indicated below. 1,344,841 a Corpus Add lines 3f, 4c, and 4e. Subfract line 5 b Prior years' undistributed income. Subtract 0. line 4b from line 2b 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 0 assessed d Subtract line 6c from line 6b. Taxable 0 amount - see instructions e Undistributed income for 2018 Subtract line 0 4a from line 2a. Taxable amount - see instr f Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election 0 may be required - see instructions) 8 Excess distributions carryover from 2014 342,813 not applied on line 5 or line 7 Excess distributions carryover to 2020 1,002,028 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9. 370,671 a Excess from 2015 308,949. b Excess from 2016 195,671 c Excess from 2017

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d Excess from 2018

e Excess from 2019

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52,329

74,408

THE JOSEPH TREADWELL CHARITABLE FDN. 57-0880131 Form 990-PF (2019) C/O TRUSTMARK NATIONAL BANK Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII A, question 9) N/A 1 a 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 on the ruling b Check box to indicate whether the foundation is a private operatination described in section 4942(j)(3) or 4942(1)(5) Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (c) 2017 (e) Total (a) 2019 **(b)** 2018 (d) 2016income from Part I or the minimum investment return from Part X for each year listed **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 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 e "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.) 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)) NONE 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. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here \(\times \) 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 a The name, address, and telephone number or email address of the person to whom applications should be addressed N/A 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

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N/A

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3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment	<u></u>	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				•
ARC BALDWIN COUNTY	N/A	N/A	UNRESTRICTED CONTRIBUTION	
LOXLEY, AL				5,00
BALDWIN COUNTY CHILD ADVOCACY CENTER DAPHNE, AL	N/A	N/A	UNRESTRICTED CONTRIBUTION	12,5(
one mue, no				10,0
BIG BROTHERS BIG SISTERS MOBILE, AL	N/A	N/A	UNRESTRICTED CONTRIBUTION	25.0
	,			· -
BISHOP STATE COMMUNITY COLLEGE	N/A	N/A	UNRESTRICTED CONTRIBUTION	-
MOBILE, AL		<u>'</u>		4,6
CAMP RAP-A-HOE	N/A	N/A	UNRESTRICTED CONTRIBUTION	7.0
MOBILE, AL Total SEE COI	TINUATION SHEE	፲ ፻ፒ(ያ)	▶ 3a	7,06 566,88
b Approved for future payment	VIIION SHEL	1	7 30	300_00
NONE	· .			
,				
Total .			> 3b	

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C/O TRUSTMARK NATIONAL BANK 57-0880131 Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient show any relationship to Foundation Purpose of grant or Amount contribution any foundation manager status of Name and address (home or business) or substantial contributor recipient COASTAL ALABAMA COMMUNITY COLLEGE N/A N/A UNRESTRICTED CONTRIBUTION 3,482. BAY MINETTE, AL DRUG EDUCATION COUNCIL OF MOBILE N/A N/A UNRESTRICTED CONTRIBUTION 25,000. MOBILE, AL HOME OF GRACE N/A N/A UNRESTRICTED CONTRIBUTION 20,000. MOBILE, AL LITTLE SISTERS OF THE POOR N/A UNRESTRICTED N/A CONTRIBUTION 20,000. MOBILE, AL MULHERIN HOME N/A N/A UNRESTRICTED CONTRIBUTION 20,000, MOBILE, AL N/A UNRESTRICTED SALVATION ARMY N/A CONTRIBUTION 65,000. MOBILE, AL N/A UNRESTRICTED ST. MARGARET OF SCOTLAND N/A CONTRIBUTION 5,000, FOLEY AL N/A UNRESTRICTED THE ALANO ASSOCIATION N/A CONTRIBUTION 4,663. MOBILE AL UNRESTRICTED THE LEARNING TREE N/A N/A CONTRIBUTION 15,000. MOBILE AL

MOBILE, AL

N/A

N/A

Total from continuation sheets

UNIVERSITY OF MOBILE

UNRESTRICTED

CONTRIBUTION

34,373,

512,763,

C/O TRUSTMARK NATIONAL BANK

Part XV | Supplementary Information

3 Grants and Contributions Paid During the		Т		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome of business)	or substantial contributor	recipient		
•				
NIVERSITY OF SOUTH ALABAMA	N/A	N/A	UNRESTRICTED CONTRIBUTION	
OBILE AL				232,90
EASTERN SHORE REPERTORY THEATRE	N/A	N/A	UNRESTRICTED CONTRIBUTION	
DAPHNE AL			COMINIBOLION	7,00
PRICHARD PREPARATORY SCHOOL	N/A	N/A	UNRESTRICTED	
OBILE, AL			CONTRIBUTION	34,33
HOPE GROWS HERE	N/A	N/A	UNRESTRICTED	
ADTIC N			CONTRIBUTION	3,8
MOBILE, AL				
PRODISEE PANTRY	N/A	N/A	UNRESTRICTED	
			CONTRIBUTION	5,00
SPANISH FORT, AL .				3,00
THE SHOULDER	N/A	N/A	UNRESTRICTED	
			CONTRIBUTION	15.00
SPANISH FORT, AL		<u> </u>		15,00
PHE LIGHTHOUSE	N/A	N/A	UNRESTRICTED	
			CONTRIBUTION	
OBILE, AL				1,00
TOUR POINT TOU TWO	N/A	N/A	UNRESTRICTED	
STRAY LOVE FOUNDATION, INC	NA	7.6	CONTRIBUTION	
MAGNOLIA SPRINGS, AL				1,20

Part XVI-A Analysis of Income-Prod	lucing Activitie	es			
nter gross amounts unless otherwise indicated.		ousiness income		y section 512 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
Program service revenue:	code	Amount	code	Amount	Tunction income
a	_				
b	_	·			
C					
d			 		
e					
g Fees and contracts from government agencies	_		-		
Membership dues and assessments			- - - 		
Interest on savings and temporary cash					
investments			03	19,959.	
Dividends and interest from securities		<u>-</u>	03	162,407.	
Net rental income or (loss) from real estate.					
a Debt-financed property					
b Not debt-financed property			0.3	350,314.	
Net rental income or (loss) from personal					
property					
Other investment income			03	177.	
Gain or (loss) from sales of assels other		-			
than inventory		- <u></u> ,	03	157,822.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory		•			
Other revenue:					
a	_				
b	_		\perp		
С	_				
d	_				
e	_		- 	600 670	
Subtotal. Add columns (b), (d), and (e)),	690,679.	
Total. Add line 12, columns (b), (d), and (e)				13	690,67
e worksheet in line 13 instructions to verify calculations.)				
Relationship of Activities ne No Explain below how each activity for which in					olishment of
the foundation's exempt purposes (other th					
	·				
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	=-=				
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Ра	rt XVII	Information Re Exempt Organ	•	sfers to a	nd Transactions a	ind Relations	nips With Noncha	ritable	•	
	0.415			-6 th- 6-ll-	a with now other property	on described in cost	han 501(a)	T' -	Yes	No
1					g with any other organizations?		1011 50 1(6)		103	110
	*	,	· ·		g to political organizations?	•				
а		from the reporting found	ation to a nonchanta	idie exempt of	gamzation of.			10/11		х
	(1) Cash		•					1a(1) 1a(2)		X
	(2) Other				•			14(2)	 	^
D	Other tran		ble everet erecens	lian				15/33		Х
		of assets to a noncharita						1b(1) 1b(2)		X
	` '	nases of assets from a no	•	organizanon				1b(3)		X
	` -	al of facilities, equipment,						1b(4)		X
		bursement arrangements s or loan guarantees						1b(5)		X
	٠,	s of loan guarantees irmance of services or me	mbarahin ar fundrai	ioiga colioitatic				1b(6)		X
	• •	f facilities, equipment, ma	· ·	=				10(0)		X
	-		-		dule. Column (b) should al	lwave show the fair i	 market value of the noods		L	
u		•		-	ed less than fair market val				3010,	
		i) the value of the goods,			ou lood man lan manor la		r or onarmy amangamam,			
(a) Li	 -	(b) Amount involved			e exempt organization	(d) Description	n of transfers, transactions, and	sharing a	rangeme	nts
(-/		(-/	(0)	N/A		 ` 				
				21,7 22						
		•								
			<u> </u>							
2a		•	•		or more tax-exempt organ	izations described	-			٦.
		501(c) (other than sectio		ection 527?			Ĺ	Yes	LX	No
<u>b</u>	If "Yes," co	omplete the following sch			th Turn of a convenien	T	(a) Departure of relations	hin		
		(a) Name of org	janization		(b) Type of organization	<u> </u>	(c) Description of relations	snip		
		N/A		 						
						·				
										
	Under	penalties of perjury 1 declare	that I have examined the	s return, includin	g accompanying schedules and	I statements, and to the	best of my knowledge			
Sig	1	elief it is true, correct, and cor	mplete, Declaration of pr	eparer (other tha	n taxpayer) is based on all inform	mation of which prepare	r has any knowledge ref	y the IRS urn with th	e brebare	er
He		and ?	Kahn		1 07/08/202	20 TRUSTI		wn below X Yes]้ No
	Sign	nature of officer or trustee	· · · · · · · · · · · · · · · · · · ·		Date	Title				
		Print/Type preparer's na	ame	Preparer's s	gnature	Date	Check if PTIN			
				tou	5/MSunce	.	self- employed			
Pa	id	LOUIS G. R	USSELL	LOUIS	G. RUSSELL	06/25/20	P0	0474	<u>055</u>	
	eparer	Firm's name ► RUS		IPSON B	UTLER & HOUS	TON, LLP	Firm's EIN ▶ 63-0			
Us	e Only									
		Firm's address ▶ P .								_
		MO_	BILE, AL	36670	 		Phone no. (251)			
							£	orm 990)-PF (20191

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	EST ON SAVING	S AND TE	MPORAR	Y CASH	IN	VESTMENTS	STATEMEN	T 1
SOURCE		REV	(A) VENUE BOOKS	NET	IN	(B) VESTMENT COME	(C) ADJUST NET INC	
TRUSTMARK			19,959	,		19,959.	19	,959.
TOTAL TO PART I, L	INE 3		19,959			19,959.	19	,959.
FORM 990-PF	DIVIDENDS	AND INTE	EREST F	ROM SE	CUR	ITIES	STATEMEN	T 2
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN	3	(A) REVENU ER BOO		(B) NET INVES MENT INCO		STED
TRUSTMARK	162,671.		264.	162,4	07.	162,40	162	,407.
TO PART I, LINE 4	162,671.	2	264.	162,4	07.	162,40	162	,407.
FORM 990-PF		RENTAL I	INCOME				STATEMEN	T 3
KIND AND LOCATION O	OF PROPERTY					ACTIVITY NUMBER	GROS RENTAL I	
RENTAL PROPERTY, 90)1 SOUTH BELT	LINE HIG	}HWAY,			1	387	
MUBILE, AL 36606						-	• • • • • • • • • • • • • • • • • • • •	,450.
MOBILE, AL 36606 TOTAL TO FORM 990-E	PF, PART I, L	INE 5A				-		,450. ,450.
		INE 5A ENTAL EX	(PENSES			_		,450.
TOTAL TO FORM 990-F			(PENSES ACTIVI NUMBE	TY	Al	TUUOM	387	,450.
TOTAL TO FORM 990-PF FORM 990-PF DESCRIPTION DEPRECIATION INSURANCE MISC			ACTIVI	TY	Al	MOUNT 30,581. 6,555. 0.	387	,450.
TOTAL TO FORM 990-E	R		ACTIVI	TY PR —	- Al	MOUNT 30,581. 6,555.	387 STATEMEN	,450.
TOTAL TO FORM 990-PF FORM 990-PF DESCRIPTION DEPRECIATION INSURANCE MISC	R - SUB	ENTAL EX	ACTIVI NUMBE	TY PR —	Al	MOUNT 30,581. 6,555. 0.	387 STATEMEN TOTAL	, 450.

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FORM 990-PF	OTHER	INCOME	S	TATEMENT 5
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
NET PROCEEDS UNOCAL DOMESTIC OPERSTIONS	_	177.	177.	0.
TOTAL TO FORM 990-PF, PART I	LINE 11 =	177.	177.	0.
FORM 990-PF	LEGA	L FEES	S	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL	7,999	7,999	. 0.	0.
TO FM 990-PF, PG 1, LN 16A	7,999	7,999	0.	0.
FORM 990-PF	ACCOUNT	ING FEES	S	TATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	9,170	9,170	. 0.	0.
TO FORM 990-PF, PG 1, LN 16B	9,170	9,170	0.	0.
FORM 990-PF	TA	XES	S	TATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAXES PAID	21,294	. 21,294	. 0.	0.
TO FORM 990-PF, PG 1, LN 18	21,294	21,294	. 0.	0.
=			-	

FORM 990-PF	OTHER E	XPENSES		STATEMENT 9
DESCRIPTION	(A) (B) (C) EXPENSES NET INVEST- ADJUSTE CRIPTION PER BOOKS MENT INCOME NET INCO			
MISCELLANEOUS INSURANCE MISC REPAIRS	1,477. 6,555. 0.		477. 555. 0. 0.	0. 0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	8,032.	8,0	032.	0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 10
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCKS		_	4,962,203	6,362,290.
TOTAL TO FORM 990-PF, PART II	, LINE 10B	=	4,962,203	6,362,290.
FORM 990-PF	CORPORAT	E BONDS		STATEMENT 11
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
CORPORATE BONDS		_	695,504.	706,748.
TOTAL TO FORM 990-PF, PART II	, LINE 10C	=	695,504	706,748.
FORM 990-PF DEPRECIATION OF	F ASSETS HE	LD FOR IN	/ESTMENT	STATEMENT 12
DESCRIPTION		ST OR R BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LAND BUILDING		,207,345. ,192,655.	779,816	1,207,345. 3. 412,839.
				

FORM 990-PF	MOR	rgage loans			STATEMENT	13
DESCRIPTION			воок	VALUE	FAIR MARKE · VALUE	T
MORTGAGE LOANS		-		95,412.	95,4	12.
TOTAL TO FORM 990-PF, PART II,	LINE 3	12		95,412.	95,4	12.
			· · · · · · · · · · · · · · · · · · ·		`	
FORM 990-PF	OTHER	INVESTMENTS			STATEMENT	14
DESCRIPTION		VALUATION METHOD	воок	VALUE	FAIR MARKE VALUE	T
MINERAL INTERESTS/FINE ARTS		COST		5,450.		1.
		-		5,450.		1.