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2019

Return of Private Foundation

Form 990-PF Department of the Treasury

Internal Revenue Service

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

		ndar year 2019, or tax yea	r beginning 01-01-20)19 , ar	nd ei	nding 12-31-		
		Indation Memory Center and Health Education	Founda			' '	entification number	•
						58-2580582		
		I street (or P.O. box number if mail is r ling Bend Ct	not delivered to street address)	Room/suite		B Telephone nu	mber (see instruction	s)
		, state or province, country, and ZIP o GA 319041971	r foreign postal code	1		C If exemption	application is pending	ı, check here ▶ □
G Ch	neck al	I that apply: 🔲 Initial return	☐ Initial return of a	former public charity		D 1. Foreign org	janizations, check he	re
		☐ Final return	Amended return				ganizations meeting	
		Address char	nge 🔲 Name change				k here and attach cor	· • —
	,		501(c)(3) exempt private				ndation status was to n 507(b)(1)(A), checl	
		1 4947(a)(1) nonexempt charitabl		e private foundation				
of '	year (f	xet value of all assets at end rom Part II, col. (c), ▶\$ 1,949,775	J Accounting method: ☐ Other (specify) (Part I, column (d) must	☑ Cash ☐ Accru	al		tion is in a 60-month n 507(b)(1)(B), check	
Pa	rt I	Analysis of Revenue and	Expenses (The total	(a) Revenue and	<u></u>			(d) Disbursements
		of amounts in columns (b), (c), and equal the amounts in column (a) (se		expenses per books	(Б)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc. schedule)	, received (attach					
	2	Check ► ✓ if the foundation is						
	3	Sch. B		104		104	104	
	4	Dividends and interest from sec	•	32,378		32,378	32,378	
	5a	Gross rents						
	b	Net rental income or (loss)						
<u>e</u>	6a	Net gain or (loss) from sale of a	ssets not on line 10					
Revenue	b	Gross sales price for all assets o	n line 6a					
Re	7	Capital gain net income (from Pa	art IV, line 2)					
	8	Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and allo	wances					
	b	Less: Cost of goods sold	• •					
	C	Gross profit or (loss) (attach sch	nedule)	65.1 4.070.000				
	11	Other income (attach schedule)		1,879,033			22.425	
	12	Total. Add lines 1 through 11 Compensation of officers, directors		1,911,515		32,482	32,482	712 500
	13 14	Other employee salaries and wa	,	750,000 237,485	 			712,500
رم م	15	Pension plans, employee benefit	-	156,197	<u> </u>			147,697
Se	16a	Legal fees (attach schedule)		11,762	-			5,881
Expenses	b	Accounting fees (attach schedule		15,035				·
	С	Other professional fees (attach s		<u> </u>				
Administrative	17	Interest						
trai	18	Taxes (attach schedule) (see ins	structions)					
īis	19	Depreciation (attach schedule) a	·	9 24,446				
Ē	20	Occupancy		10,366				9,848
Ρ	21	Travel, conferences, and meetin	gs	17,203				13,436
ä	22	Printing and publications						
Operating and	23	Other expenses (attach schedule	e)	459,164				439,135
rat	24	Total operating and administ	•					
be		Add lines 13 through 23		1,681,658	_	0		1,554,108
_	25	Contributions, gifts, grants paid		65,800	-			65,800
	26	Total expenses and disburse	ments. Add lines 24 and	1,747,458		0		1,619,908
	27	Subtract line 26 from line 12:						
	а	Excess of revenue over expedisbursements	nses and	164,057				
	b	Net investment income (if ne	gative, enter -0-)			32,482	_	
	С	Adjusted net income (if negat	ive, enter -0-)				32,482	

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Grants payable

Other liabilities (describe ▶_

and complete lines 24, 25, 29 and 30. Net assets without donor restrictions . . .

Net assets with donor restrictions .

and complete lines 26 through 30.

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow FASB ASC 958, check here 🕨 🗀

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year-Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Capital stock, trust principal, or current funds

Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds

Foundations that follow FASB ASC 958, check here

18

19

20 21

22

23

24 25

26 27

28

29

30

Part III

Liabilities

Assets or Fund Balances

Net

2

3

	3	Accounts receivable ► 22,152			
		Less: allowance for doubtful accounts ▶	7,626	22,152	22,152
	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 ▶			
5	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	4,112		
As	10 a	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)	708,000	1,375,014	1,375,014
	14	Land, buildings, and equipment: basis ►149,082			
		Less: accumulated depreciation (attach schedule) ▶ 53,279	87,745	9 5,803	95,803
	15	Other assets (describe)			_
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	1,801,630	1,949,775	1,949,775
	17	Accounts payable and accrued expenses	121,041	105,129	_

121,041

1,680,589

1,680,589

1,801,630

105,129

1,844,646

1,844,646

1,949,775

1

2

3 4

5

6

1,680,589

1,844,646

1,844,646

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164,057

Page **3**

	• •	ee the kind(s) of property sold (e.g., arehouse; or common stock, 200 shs	·	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	1					
•						
•						
•						
	(a)	(f)		(g)	(h)
	(e) Gross sales price	Depreciation allowed		other basis		r (loss)
	- Cross sales price	(or allowable)	plus exp	ense of sale	(e) plus (f) minus (g)
a						
b						
С						
d						
e						
	Complete only for assets	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69		I)
	(i)	(i)		(k)		h) gain minus less than -0-) or
	F.M.V. as of 12/31/69	Adjusted basis as of 12/31/69		of col. (i) l. (j), if any		om col.(h))
		as of 12/31/09	over cor	. (j), ii aliy	200000 (111	om con(n))
<u>a</u> b						
d						
е			If asin placements D	net Tipe 7		
2	Capital gain net income	e or (net capital loss)	If gain, also enter in P If (loss), enter -0- in I		2	
3	•	gain or (loss) as defined in sections ort I, line 8, column (c) (see instructi	ons). If (loss), enter -0)-	3	
	mr are 1, mre o)		
Part	V Qualification I	Under Section 4940(e) for Re	educed Tax on Net	Investment In	come	
For or	_	private foundations subject to the sec				
		,			,	
fsecti	ion 4940(d)(2) applies, le	eave this part blank.				
		ne section 4942 tax on the distributant of qualify under section 4940(e). Do			? \ \ \ \ \ \ \ \ \	es 🗹 No
1	Enter the appropriate an	nount in each column for each year;	see instructions before	e making any entrie	s.	
	(a) se period years Calendar (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rati (col. (b) divided by c	
year	2018	1,955,670		1,270,482	(cor. (b) divided by c	1.539313
	2017	1,978,094		519,454		3.808025
	2016	1,570,054		319,434		3.000023
	2015					
	2013					
2	Total of line 1, column (d)		2		5.347339
		o for the 5-year base period—divide				3.347339
		ndation has been in existence if less		.0, or by the		1.069468
		incharitable-use assets for 2019 from		4		1,891,825
5	Multiply line 4 by line 3			5		2,023,246
		ent income (1% of Part I, line 27b)		6		325
						2,023,571
		ions from Part XII, line 4 ,				1,644,354
		eater than line 7, check the box in Pa			ng a 1% tax rate. Se	
	instructions.	, siles and box in the	, 25,	.p. see alle pare dell	.g =	· · - · ·

orm	990-PF (2019)					F	age 6
Pa	rt VII-B Statements Regard	ling Activities for Which	Form 4720 May Be	Required (continued)			
5a	During the year did the foundation p	pay or incur any amount to:				Yes	No
	(1) Carry on propaganda, or otherw	vise attempt to influence legisla	ation (section 4945(e))?	☐ Yes 🗸			
	(2) Influence the outcome of any sp	pecific public election (see sect	ion 4955); or to carry	⊔ Yes 🛂	NO		
	on, directly or indirectly, any vo	ter registration drive?		· · 🗌 Yes 🗸			
	(3) Provide a grant to an individual	for travel, study, or other simi	ilar purposes?		No		
	(4) Provide a grant to an organizati	ion other than a charitable, etc	, organization described	⊔ Yes ⊻	NO		
	in section 4945(d)(4)(A)? See in	nstructions		· · □ Yes ☑			
	(5) Provide for any purpose other to	han religious, charitable, scient	tific, literary, or	□ fes 🛂	NO		
	educational purposes, or for the	prevention of cruelty to childr	en or animals?	· · 🗌 Yes 🗹			
b	If any answer is "Yes" to $5a(1)-(5)$,	did any of the transactions fa	il to qualify under the ex	ceptions described in	NO		
	Regulations section 53.4945 or in a	current notice regarding disast	ter assistance? See instr	uctions	5b		
	Organizations relying on a current n	notice regarding disaster assista	ance check here	▶ □			
С				Ш			
	tax because it maintained expenditu	* **	•	п. п			
	If "Yes," attach the statement requi			· · L Yes L	No		
6a	Did the foundation, during the year,			ıms on			
-	a personal benefit contract?	, , , ,					
b	Did the foundation, during the year,			⊔ Yes 💟	No 6b		No
_	If "Yes" to 6b, file Form 8870.	, pay premianis, an eetiy or ma	meeny, on a personal be	nent contract. I I I	55		
7a	At any time during the tax year, wa	s the foundation a party to a p	rohibited tax shelter trai	nsaction?			
	If "Yes", did the foundation receive	• • • •		⊔ Yes 💌	No 7b		
8	Is the foundation subject to the sect				/ 5		
•	excess parachute payment during th	, , , , ,					
				· · <u> </u>			
Pai		Officers, Directors, Trust	ees, Foundation Ma	inagers, Highly Paid Er	nployees	,	
	and Contractors						
1	List all officers, directors, trustee		•		1		
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and	(e) Exper	nse acc	ount,
	(a) Name and address	devoted to position	-0-)	deferred compensation	other a	llowand	ces
See .	Additional Data Table						
		1					
		1					
		1					
		-					
2	Compensation of five highest-pa	id employees (other than th	ose included on line 1	_see instructions). If no	ne. enter "	NONE.	71
_	compensation of medingment pe			(d) Contributions to	,		
(a)	Name and address of each employee	paid (b) Title, and average hours per week	(c) Compensation	employee benefit	(e) Expen		
	more than \$50,000	devoted to position	(c) compensation	plans and deferred	other al	lowanc	es
)in -	A Cillay Employee		E7 70	compensation			
	A Gilley Employee	RN 40.00	57,78	7,415			0
	olcester Ct ix City, AL 36870	1.5.55					
Hell	IX CITY, AL 30870						
ota	I number of other employees paid ov	er \$50,000					0
						0 DE	(2010)

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Pa	Information About Officers, Directors, Trust and Contractors (continued)	ees, Foundation Managers, Highly Paid E	mployees,
3	Five highest-paid independent contractors for professional s	services (see instructions). If none, enter "NOI	NE".
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ЮИ	VE		
Tot	al number of others receiving over \$50,000 for professional services.		
Pa	art IX-A Summary of Direct Charitable Activities		
	the foundation's four largest direct charitable activities during the tax year. Inclu inizations and other beneficiaries served, conferences convened, research papers		Expenses
1	Clinical Medical Research - Statement 12		909,960
2	Cognitive Screening - Statement 13		267,880
3	Brain Health Education - Statement 14		387,720
4	Sponsorships to Promote Brain Health - Statement 15		54,348
Pa	art IX-B Summary of Program-Related Investments ((see instructions)	_
	Describe the two largest program-related investments made by the foundation du	uring the tax year on lines 1 and 2.	Amount
1	NA		0
2			
1	All other program-related investments. See instructions.		
3			
 :	-1 Add lines 4 Abressels 3		
ot	al. Add lines 1 through 3		
			Form 990-PF (2019)

2b

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

1,619,908

24,446

1,644,354

1,644,354

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Income tax for 2019. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

3

4 5

6

1

2

3

4

5

b

Part XII

Distributable amount before adjustments. Subtract line 2c from line 1.

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Undistributed Income (see instructions)

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 $\hat{7}$ (see instructions). . .

9 Excess distributions carryover to 2020.

Subtract lines 7 and 8 from line 6a.

10 Analysis of line 9:

a Excess from 2015.

b Excess from 2016.

c Excess from 2017. d Excess from 2018.

e Excess from 2019.

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		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only				
b	Total for prior years: 20				
3	Excess distributions carryover, if any, to 2019:				
а	From 2014 956,905				
b	From 2015 1,189,723				
С	From 2016 1,567,623				
d	From 2017 1,978,094				
_	From 2018 1,955,690				
	Total of lines 3a through e	7,648,035			
4	Qualifying distributions for 2019 from Part				
1	XII, line 4: ► \$				
	Applied to 2018, but not more than line 2a				
b	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.				
	Remaining amount distributed out of corpus	1,644,354			
	Excess distributions carryover applied to 2019.				
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	9,292,389			i
b	Prior years' undistributed income. Subtract line 4b from line 2b				
	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				
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions				
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by				

956,905

8,335,484

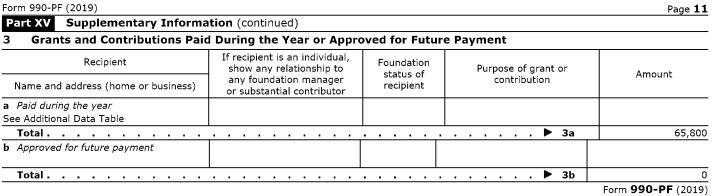
1,189,723

1,567,623

1,978,094

1,955,690 1,644,354

Part XIII



Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exemp
Program	service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.
_	arch Income	Business code	7 11110 01110	Exclusion code	, anounc	1,879,00
b						, ,
с						
d						
е						
f						
_	and contracts from government agencies					
	rship dues and assessments					
Interest investm	on savings and temporary cash					
	ds and interest from securities tal income or (loss) from real estate:					
	financed property					
	ebt-financed property					
	tal income or (loss) from personal property					
	nvestment income.					
	(loss) from sales of assets other than					
invento				<u> </u>		
	ome or (loss) from special events:					
Gross p	rofit or (loss) from sales of inventory					
Other r	evenue: a					
с						
_						
e Subtota	al. Add columns (b), (d), and (e).				3	
Subtota Total. / (See wo	Al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu Belationship of Activities to the	lations.) le Accomplisi	nment of Exem	ıpt Purposes	3	1,879,03
Subtota Total. / (See wo Irt XVI 1e No.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.) le Accomplisi income is report empt purposes	nment of Exem ted in column (e) of (other than by pro	npt Purposes of Part XVI-A contribu oviding funds for such	ted importantly to purposes). (See	
Subtota Total. A (See wo rt XVI Le No.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) brksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations.) le Accomplisi income is report tempt purposes edical research t	nment of Exement of in column (e) of column	npt Purposes of Part XVI-A contribu oviding funds for such nizations exempt purp	ted importantly to purposes). (See	1,879,03
Subtota Total. / See wo rt XVI e No.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex instructions.) Fees to conduct and participate in clinical me	lations.) le Accomplisi income is report tempt purposes edical research t	nment of Exement of in column (e) of column	npt Purposes of Part XVI-A contribu oviding funds for such nizations exempt purp	ted importantly to purposes). (See	1,879,0
Subtota Total. / See wo rt XVI e No.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex instructions.) Fees to conduct and participate in clinical me	lations.) le Accomplisi income is report tempt purposes edical research t	nment of Exement of in column (e) of column	npt Purposes of Part XVI-A contribu oviding funds for such nizations exempt purp	ted importantly to purposes). (See	1,879,0
Subtota Total. / See wo rt XVI e No.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex instructions.) Fees to conduct and participate in clinical me	lations.) le Accomplisi income is report tempt purposes edical research t	nment of Exement of in column (e) of column	npt Purposes of Part XVI-A contribu oviding funds for such nizations exempt purp	ted importantly to purposes). (See	1,879,0
Subtota Total. / See wo rt XVI e No.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex instructions.) Fees to conduct and participate in clinical me	lations.) le Accomplisi income is report tempt purposes edical research t	nment of Exement of in column (e) of column	npt Purposes of Part XVI-A contribu oviding funds for such nizations exempt purp	ted importantly to purposes). (See	1,879,0
Subtota Total. / See wo rt XVI e No.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex instructions.) Fees to conduct and participate in clinical me	lations.) le Accomplisi income is report tempt purposes edical research t	nment of Exement of in column (e) of column	npt Purposes of Part XVI-A contribu oviding funds for such nizations exempt purp	ted importantly to purposes). (See	1,879,0
Subtota Total. / See wo rt XVI e No.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex instructions.) Fees to conduct and participate in clinical me	lations.) le Accomplisi income is report tempt purposes edical research t	nment of Exement of in column (e) of column	npt Purposes of Part XVI-A contribu oviding funds for such nizations exempt purp	ted importantly to purposes). (See	1,879,0
Subtota Total. / See wo rt XVI e No.	al. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex instructions.) Fees to conduct and participate in clinical me	lations.) le Accomplisi income is report tempt purposes edical research t	nment of Exement of in column (e) of column	npt Purposes of Part XVI-A contribu oviding funds for such nizations exempt purp	ted importantly to purposes). (See	1,879,0

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Part XVII Information Regarding Transfers To and Transactions and Relationships With Nonchari Exempt Organizations	table		
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
(A) Reimburcement arrangements	15(4)		No.

(5) Loa	ns or loan guarantees.			1b(5)	No
(6) Perfo	ormance of services or r	nembership or fundraising solicitations		1b(6)	No
c Sharing	of facilities, equipment,	mailing lists, other assets, or paid employees.		1c	No
of the go	ods, other assets, or se	e is "Yes," complete the following schedule. Corvices given by the reporting foundation. If the angement, show in column (d) the value of the	e foundation received less than fair market va		·
(a) Line No.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and s	haring arrangen	nents
describe	•	rectly affiliated with, or related to, one or more er than section 501(c)(3)) or in section 527? . schedule.	<u> </u>	✓ No	

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

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. May the IRS discuss this 2020-10-25 return with the preparer shown

Pai Pre Us

James W Goodwin III

Date

Title Date

belo

w	_
e instr.)	· 🔽

Yes 🗆 No

id	l
ep	oarer
e	Only

Firm's name ▶ Goodwin & Adams CPAs PC 2020-11-12

P00283301

ly 3238 University Avenue Firm's address ▶

Signature of officer or trustee

Print/Type preparer's name

Preparer's Signature

Columbus, GA 31907

Check if selfemployed ▶ 🔲

(se PTIN

Firm's EIN ▶84-4006559

Phone no. (706) 565-7374

(a) Name and address

Title, and average hours per week (b) devoted to position

(c) Compensation (If not paid, enter -0-)

Total (b) devoted to position (c) Contributions to employee benefit plans and deferred compensation (e) other allowances

	(-,	,	and deferred compensation	
Jonathan L Liss	President and Treasurer	625,000	20,523	C
7409 Rolling Bend Ct	40.00			

125,000

3,000

37,000

n

n

Columbus, GA 31904		
Lisa Liss Officer	Vice President and	
7409 Rolling Bend Ct	Secretary 40.00	

Trustee 0.10

Trustee 0.10

Trustee

Trustee

1.70

0.10

Columbus, GA 319041971

David Silverman Trustee

Hermosa Beach, CA 90254

66 9th St

Bill Brock

Georges Kaado

928 Winthrope Dr Virginia Beach, VA 23452

3 Redmans Drive
Oak Ridge, NJ 07438

Hans Underbrink Trustee

1522 Harvard St Apt 3 Santa Monica, CA 90404

Recipient Foundation Purpose of grant or If recipient is an individual, Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year				
Temple Israel1617 Wildwood Ave Columbus, GA 31906	None	PC	Help persons with neurological disease	10,400
1				

Columbus, GA 31906			disease	•
Schwob School of Music900 Broadway Columbus, GA 31901	None	PC	Sponsorship of music program	30,000

Schwob School of Music900 Broadway Columbus, GA 31901	None	PC	Sponsorship of music program	30,000
Alzheimers Association5156 River Rd	Non	PC	Help persons with neurological	20,900

65,800

Columbus, GA 31901				,
Alzheimers Association5156 River Rd	Non	PC	Help persons with neurological	20,900

Alzheimers Association5156 River Rd	Non	PC	Help persons with neurological	20,
Columbus GA 31904			diseases	

	1	 	
lumbus, GA 31904		diseases	

olumbus, GA 31904		diseases	<u> </u>

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

a Paid during the year				
Columbus Highschool Alumni Assoc 1301 1st Ave Columbus, GA 31901	None	PC	Support organization	500

Columbus, GA 31901				
Lakewood Baptist Church 4011 Lakewood Dr	None	PC	Help persons with neurological diseases	
Discourse City Al DCOCT			l .	1

or substantial contributor

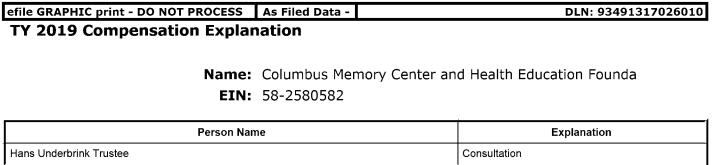
Total .

0010011007 071 02002				
Lakewood Baptist Church 4011 Lakewood Dr Phenix City, AL 36867	None	PC	Help persons with neurological diseases	4,000

▶ 3a

65,800

efile GRAPHIC print - DO NOT	PROCESS	As Filed D	ata -			DL	N: 93491317026010
TY 2019 Accounting Fees Schedule							
_							
Name: Columbus Memory Center and Health Education Founda							
		58-2580		,			
Category	Amo	ount		Investment Income	Adjusted Incom		Disbursements for Charitable Purposes
Accounting and Tax Preparation		15,035		0		0	0



Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2019 Depreciation Schedule

Name: Columbus Memory Center and Health Education Founda

EIN: 58-2580582

Depreciation Schedule

Table 2014-06-22 500 320 SL 7 71 0 0 0 0 Storage Cabinet 2014-08-08 481 305 SL 7 69 0 0 0 0 Patent Camera 2014-08-08 484 428 SL 5 5 56 0 0 0 DVR 2015-03-17 966 724 SL 5 193 0 0 0 Computer 2015-03-17 1,947 1,459 SL 5 189 0 0 0 Headset 2015-10-05 943 614 SL 5 189 0 0 0 Headset 2015-10-05 943 614 SL 5 189 0 0 0 Ultrasound Machine 2015-10-05 205 133 SL 5 189 0 0 0 Ultrasound Machine 2015-10-05 83 33.60 SL 5 1,034 0 0 0 IPAO 2016-07-08 1,156 583 331 SL 5 117 0 0 0 IPAO 2016-07-08 1,166 583 SL 5 117 0 0 0 IPAO 2016-07-08 1,166 583 SL 5 116 0 0 0 IPAO 2016-07-08 1,165 583 SL 5 116 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 116 0 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 5 116 0 0 0 0 IPAS 2016-07-08 1,165 583 SL 5 5 116 0 0 0 0 IPAS 2016-07-08 1,165 SL 5 116 0 0 0 0 IPAS 2016-07-08 1,165 SL 5 116 0 0 0 0 IPAS 2016-07-08 1,165 SL 5 116 0 0 0 0 0 IPAS 2016-07-08 1,165 SL 5 116 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
Patient Camera 2014-08-08 484 428 SL 5 56 0 0 DVR 2015-03-17 966 724 SL 5 193 0 0 Computer 2015-03-17 1,947 1,459 SL 5 389 0 0 Headset 2015-10-05 943 614 SL 5 189 0 0 Monitor 2015-10-05 943 614 SL 5 189 0 0 Monitor 2015-10-05 943 614 SL 5 189 0 0 Ultrasound Machine 2015-10-05 205 133 SL 5 41 0 0 Ultrasound Machine 2015-10-08 5,168 3,360 SL 5 311 0 0 Television 2016-01-08 1,554 933 SL 5 311 0 0 IPAD 2016-01-08 1,554 933 </td <td>Table</td> <td>2014-06-22</td> <td>500</td> <td>320</td> <td>SL</td> <td>7</td> <td>71</td> <td>0</td> <td>0</td> <td></td>	Table	2014-06-22	500	320	SL	7	71	0	0	
DVR 2015-03-17 966 724 SL 5 193 0 0 Computer 2015-03-17 1,947 1,459 SL 5 389 0 0 Headset 2015-10-05 943 614 SL 5 189 0 0 Monitor 2015-10-05 943 614 SL 5 189 0 0 Monitor 2015-10-05 943 614 SL 5 189 0 0 Monitor 2015-10-05 943 614 SL 5 41 0 0 Monitor 2015-10-05 205 133 SL 5 41 0 0 Ultrasound Machine 2015-10-08 5,168 3,360 SL 5 1,034 0 0 Television 2016-03-10 583 331 SL 5 311 0 0 Laptop 2016-03-10 583 31 SL<	Storage Cabinet	2014-08-08	481	305	SL	7	69	0	0	
Computer 2015-03-17 1,947 1,459 SL 5 389 0 0 Headset 2015-10-05 943 614 SL 5 189 0 0 Headset 2015-10-05 943 614 SL 5 189 0 0 Monitor 2015-10-05 205 133 SL 5 41 0 0 Ultrasound Machine 2015-10-08 5,168 3,360 SL 5 1,034 0 0 Television 2016-01-08 1,554 933 SL 5 311 0 0 IPAD 2016-03-10 583 331 SL 5 117 0 0 Laptop 2016-07-08 1,166 583 SL 5 233 0 0 Refrigerator 2016-08-08 578 280 SL 5 116 0 0 Computer 2016-08-19 1,553 726	Patient Camera	2014-08-08	484	428	SL	5	56	0	0	
Headset 2015-10-05 943 614 SL 5 189 0 0 0 Headset 2015-10-05 943 614 SL 5 189 0 0 0 Monitor 2015-10-05 205 133 SL 5 41 0 0 0 Ultrasound Machine 2015-10-08 5,168 3,360 SL 5 1,034 0 0 0 Television 2016-01-08 1,554 933 SL 5 311 0 0 0 IPAD 2016-03-10 583 331 SL 5 117 0 0 0 Laptop 2016-07-08 1,166 583 SL 5 117 0 0 0 Refrigerator 2016-08-08 578 280 SL 5 116 0 0 0 Computer 2016-08-19 1,553 726 SL 5 311 0 0 0 TENS Unit 2016-09-01 500 233 SL 5 311 0 0 0 Computer 2016-130 1,214 506 SL 5 311 0 0 0 Computer 2016-130 1,214 506 SL 5 311 0 0 0 Refrigerator 2017-01-04 1,214 364 SL 5 243 0 0 0 Refrigerator 2017-01-24 1,090 234 SL 7 7 155 0 0 0 Office Chair 2017-01-24 5,051 1,083 SL 7 7 722 0 0	DVR	2015-03-17	966	724	SL	5	193	0	0	
Headset 2015-10-05 943 614 SL 5 189 0 0 0 Monitor 2015-10-05 205 133 SL 5 41 0 0 0 Ultrasound Machine 2015-10-08 5,168 3,360 SL 5 1,034 0 0 0 Television 2016-01-08 1,554 933 SL 5 311 0 0 0 IPAD 2016-03-10 583 331 SL 5 117 0 0 0 Laptop 2016-07-08 1,166 583 SL 5 233 0 0 0 Refrigerator 2016-08-08 578 280 SL 5 5 116 0 0 Computer 2016-08-19 1,553 726 SL 5 311 0 0 0 TENS Unit 2016-09-01 500 233 SL 5 100 0 0 Computer 2016-11-30 1,214 506 SL 5 243 0 0 Computer 2017-01-04 1,214 364 SL 5 243 0 0 Refrigerator 2017-01-24 1,090 234 SL 7 156 0 0 Office Chair 2017-01-24 5,051 1,083 SL 7 722 0 0	Computer	2015-03-17	1,947	1,459	SL	5	389	0	0	
Monitor 2015-10-05 205 133 SL 5 41 0 0 Ultrasound Machine 2015-10-08 5,168 3,360 SL 5 1,034 0 0 Television 2016-01-08 1,554 933 SL 5 311 0 0 IPAD 2016-03-10 583 331 SL 5 117 0 0 Laptop 2016-07-08 1,166 583 SL 5 233 0 0 Refrigerator 2016-08-08 578 280 SL 5 116 0 0 Computer 2016-08-19 1,553 726 SL 5 311 0 0 TENS Unit 2016-08-19 1,553 726 SL 5 311 0 0 Computer 2016-09-01 500 233 SL 5 100 0 0 Computer 2016-11-30 1,214 506 <td>Headset</td> <td>2015-10-05</td> <td>943</td> <td>614</td> <td>SL</td> <td>5</td> <td>189</td> <td>0</td> <td>0</td> <td></td>	Headset	2015-10-05	943	614	SL	5	189	0	0	
Ultrasound Machine 2015-10-08 5,168 3,360 SL 5 1,034 0 0 Television 2016-01-08 1,554 933 SL 5 311 0 0 IPAD 2016-03-10 583 331 SL 5 117 0 0 Laptop 2016-07-08 1,166 583 SL 5 233 0 0 Refrigerator 2016-08-08 578 280 SL 5 116 0 0 Computer 2016-08-19 1,553 726 SL 5 311 0 0 TENS Unit 2016-09-01 500 233 SL 5 100 0 0 Computer 2016-11-30 1,214 506 SL 5 243 0 0 0 Computer 2017-01-04 1,214 364 SL 5 243 0 0 0 Refrigerator 2017-01-24<	Headset	2015-10-05	943	614	SL	5	189	0	0	
Television 2016-01-08 1,554 933 SL 5 311 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Monitor	2015-10-05	205	133	SL	5	41	0	0	
IPAD 2016-03-10 583 331 SL 5 117 0 0 Laptop 2016-07-08 1,166 583 SL 5 233 0 0 Refrigerator 2016-08-08 578 280 SL 5 116 0 0 Computer 2016-08-19 1,553 726 SL 5 311 0 0 TENS Unit 2016-09-01 500 233 SL 5 100 0 0 Computer 2016-11-30 1,214 506 SL 5 243 0 0 Computer 2017-01-04 1,214 364 SL 5 243 0 0 Refrigerator 2017-01-24 1,090 234 SL 7 156 0 0 Office Chair 2017-01-24 5,051 1,083 SL 7 722 0 0	Ultrasound Machine	2015-10-08	5,168	3,360	SL	5	1,034	0	0	
Laptop 2016-07-08 1,166 583 SL 5 233 0 0 Refrigerator 2016-08-08 578 280 SL 5 116 0 0 Computer 2016-08-19 1,553 726 SL 5 311 0 0 TENS Unit 2016-09-01 500 233 SL 5 100 0 0 Computer 2016-11-30 1,214 506 SL 5 243 0 0 Computer 2017-01-04 1,214 364 SL 5 243 0 0 Refrigerator 2017-01-24 1,090 234 SL 7 156 0 0 Office Chair 2017-01-24 5,051 1,083 SL 7 722 0 0	Television	2016-01-08	1,554	933	SL	5	311	0	0	
Refrigerator 2016-08-08 578 280 SL 5 116 0 0 Computer 2016-08-19 1,553 726 SL 5 311 0 0 TENS Unit 2016-09-01 500 233 SL 5 100 0 0 Computer 2016-11-30 1,214 506 SL 5 243 0 0 Computer 2017-01-04 1,214 364 SL 5 243 0 0 Refrigerator 2017-01-24 1,090 234 SL 7 156 0 0 Office Chair 2017-01-24 5,051 1,083 SL 7 722 0 0	IPAD	2016-03-10	583	331	SL	5	117	0	0	
Computer 2016-08-19 1,553 726 SL 5 311 0 0 TENS Unit 2016-09-01 500 233 SL 5 100 0 0 Computer 2016-11-30 1,214 506 SL 5 243 0 0 Computer 2017-01-04 1,214 364 SL 5 243 0 0 Refrigerator 2017-01-24 1,090 234 SL 7 156 0 0 Office Chair 2017-01-24 5,051 1,083 SL 7 722 0 0	Laptop	2016-07-08	1,166	583	SL	5	233	0	0	
TENS Unit 2016-09-01 500 233 SL 5 100 0 0 Computer 2016-11-30 1,214 506 SL 5 243 0 0 Computer 2017-01-04 1,214 364 SL 5 243 0 0 Refrigerator 2017-01-24 1,090 234 SL 7 156 0 0 Office Chair 2017-01-24 5,051 1,083 SL 7 722 0 0	Refrigerator	2016-08-08	578	280	SL	5	116	0	0	
Computer 2016-11-30 1,214 506 SL 5 243 0 0 Computer 2017-01-04 1,214 364 SL 5 243 0 0 Refrigerator 2017-01-24 1,090 234 SL 7 156 0 0 Office Chair 2017-01-24 5,051 1,083 SL 7 722 0 0	Computer	2016-08-19	1,553	726	SL	5	311	0	0	
Computer 2017-01-04 1,214 364 SL 5 243 0 0 0 Refrigerator 2017-01-24 1,090 234 SL 7 156 0 0 0 Office Chair 2017-01-24 5,051 1,083 SL 7 722 0 0 0	TENS Unit	2016-09-01	500	233	SL	5	100	0	0	
Refrigerator 2017-01-24 1,090 234 SL 7 156 0 0 0 0 O O O O O O O O O O O O O O O	Computer	2016-11-30	1,214	506	SL	5	243	0	0	
Office Chair 2017-01-24 5,051 1,083 SL 7 722 0 0	Computer	2017-01-04	1,214	364	SL	5	243	0	0	
	Refrigerator	2017-01-24	1,090	234	SL	7	156	0	0	
Floring 2017 02 0E 2 000 1 172 C	Office Chair	2017-01-24	5,051	1,083	SL	7	722	0	0	
	Electronics	2017-02-05	3,909	1,173	SL	5	782	0	0	

Description of Date Cost or Other Property Acquired Basis

2017-12-12

2018-01-10

2018-01-10

2018-01-10

2018-01-10

2018-03-06

2018-03-22

Furniture

Wall Art

Furniture

Carpets

Desks

Van

Exam Table

918

2,663

1,458

2,987

1,554

6,781

28,316

Depreciation Schedule

Prior Years'

Depreciation

197 SL

213 SL

SL

190 SL

104 SL

155 SL

484 SL

2,832

Computation Method

						Expense			211014404
Chairs	2017-03-08	2,146	460	SL	7	307	0	0	
Infusion Pump	2017-03-10	707	212	SL	5	141	0	0	
Chairs	2017-05-10	2,546	546	SL	7	364	0	0	
Sound System	2017-06-09	2,825	848	SL	5	565	0	0	
Golf Cart	2017-06-19	6,500	1,950	SL	5	1,300	0	0	
Photo Lighting	2017-07-05	501	150	SL	5	100	0	0	
Computer	2017-07-05	1,598	480	SL	5	320	0	0	
Server	2017-08-08	5,063	1,519	SL	5	1,013	0	0	
Computer	2017-08-25	882	264	SL	5	176	0	0	
Computer	2017-09-08	1,147	344	SL	5	229	0	0	
Receiver	2017-10-06	918	276	SL	5	184	0	0	
Furniture Adegbile	2017-10-09	7,300	1,564	SL	7	1,043	0	0	
Cameras	2017-11-02	3,576	1,073	SL	5	715	0	0	

Rate /

Life (# of years)

Current Year's

Depreciation

Expense

131

380

208

427

311

969

5,663

5

5

Adjusted Net

Income

Cost of Goods

Sold Not

Included

Net Investment

Income

0

0

0

0

0

0

0

0

0

0

0

Description of Date Cost or Other Property Acquired Basis

2019-01-27

2019-01-27

2019-02-15

2019-02-15

2019-12-31

IPad

IPad

Camera

Computer

Amplifier

Depreciation Schedule

Prior Years'

Depreciation

0 | SL

0

0

0

0 | SL

SL

SL

SL

968

939

1,127

6,933

2,213

	1				<u> </u>	_ 			
Desks	2018-03-30	1,595	114	SL	7	228	0	0	
Medical Equipment Foremost	2018-04-28	2,497	250	SL	5	499	0	0	
Computer	2018-05-03	2,051	205	SL	5	410	0	0	
Mac Notebook	2019-02-14	6,819	0	SL	5	682	0	0	
Desk	2019-02-22	708	0	SL	7	51	0	0	
Computer - ACOM	2019-02-22	1,024	0	SL	5	102	0	0	
Camera 3	2019-03-03	1,516	0	SL	5	1 52	0	0	
Computer - ACOM	2019-03-03	1,028	0	SL	5	103	0	0	
Refrigerator	2019-03-20	1,169	0	SL	7	84	0	0	
Camera	2019-11-27	1,127	0	SL	5	113	0	0	
Computer	2019-11-27	6,933	0	SL	5	693	0	0	

Rate /

Life (# of years)

Current Year's

Depreciation

Expense

97

94

113

693

221

5

5

Net Investment

Income

Adjusted Net

Income

0

0

0

0

0

Cost of Goods

Sold Not Included

Computation Method

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491317026010						
TY 2019 Investments - Other Schedule								
Name: (Columbus Memory	Center and Health Education Founda						

1,375,014

1,375,014

EIN:	58-2580582		
Investments Other Schedule 2			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value

Fixed Income CDs

TY 2019 Land, Etc.		
Schedule		

efile GRAPHIC print - DO NOT PROCESS

Name: Columbus Memory Center and Health Education Founda

DLN: 93491317026010

EIN: 58-2580582								
Category / Item	Cost / Other	Accumulated	Book Value	End of Yea				

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value

As Filed Data -

Furniture and Fixtures 35,134 10,550 24,584 24,584

Machinery and Equipment 113,948 42,729 71,219 71,219

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	-	DLN	i: 93491317026010
TY 2019 Legal Fees Schedu	ıle	_		
Nan	ne: Columbus M	emory Center and	Health Education	Founda
	IN: 58-2580582	•		
	IN: 30-2300362			1
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
				розез

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	: 93491317026010					
TY 2019 Other Expenses Schedule									
Name:	Columbus Mem	ory Center and H	ealth Education F	- - - - -					
	58-2580582	iory contendinari	caren Eddedion	ourida					
Other Expenses Schedule				1					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes					

63,344

94,753

5,560

21,849

1,312

2,494

16,921

196,062

111

60

0

0

0

0

0

0

0

0

0

60,177

94,753

5,282

18,790

1,247

16,074

196,062

0

CTIA.	30-2300302		
Other Expenses Schedule			
Description	Revenue and Expenses per	Net Investment Income	Adjusted Ne

Advertising

Bank Charges

Research costs

Contract Labor

Insurance Lab Expenses

Computer Expense

Dues Subscriptions

Licenses and permits

Education & Seminars

Other Expenses Schedule								
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income					

Description
Revenue and Expenses per Books

Revenue and Expenses per Books

Net Investment Income
Income
Disbursements for Charitable Purposes

19,943

0 0 19,943

15,476

1,833

5,985

1.843

1,125

745

4,875

14,702

1,741

2,993

1,751

745

Medical Supplies19,943Office Expense9,748

Other Expenses Schedule

Office Supplies

Postage Expense

Payroll Expenses

Storage

Uniforms

Repairs & Maintenance

As Filed Data -

Name: Columbus Memory Center and Health Education Founda

EIN: 58-2580582

Other Income Sched	Income Schedu
--------------------	---------------

Research Income

Other Income Schedule			
Description	Revenue And	Net Investment	Adjusted N

efile GRAPHIC print - DO NOT PROCESS

Net Income

Income

DLN: 93491317026010

Expenses Per Books

1,879,033

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 12	
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ACTIVITY ONE

Clinical Medical Research

Conduct and participate in clinical medical research and case studies for the purpose of advancing the prevention, treatment and elimination of disease. We are currently conducting FDA approved research, financially sponsored by international pharmaceutical companies. During 2019 we conducted 6 research trials including Alzheimer's and Dementia, AD prevention, and Mild Cognitive Impairment.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 1

909,960

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 13

ACTIVITY TWO

Cognitive Screening

City and region-wide free cognitive screening. Every senior is eligible for a free cognitive test we call the Memory Number. In 2019 we screened about 3,700 people and distributed thousands of free booklets on memory loss and brain health

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 2

267,880

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 14

ACTIVITY THREE

Brain Health Education

In 2019 we conducted 10 "Ask the Memory Doctor" Town Halls. We traveled to and made presentations at area churches, civic organizations and retirement communities.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 3

387,720

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 15

ACTIVITY FOUR

Sponsorship and Participation with Organizations to Promote Brain Health

Sponsored Columbus State University "Gusto" student scholarship fundraiser. Financially sponsored Alzheimer's Walk and Dancing Stars of Columbus. Participated in the local chapter board of advisors. Lectured state-wide representatives and co-hosted their major fundraiser. It is estimated that 80% of all referrals to the local chapter are made by Columbus Memory Center. Invited association representatives to speak at our public forums.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 4

54,348