Form 990-PF

Department of the Treasury Internal Revenue Service

## **Return of Private Foundation**

Open to Public Inspection

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/Form990PFfor instructions and the latest information

		lendar year 2019 or tax year beginning			, 2019,	and ending				, 20
N	ame o	f foundation					A	<b>Employer identit</b>	fication numbe	r
	CO	TUA RAINBOW_FUND						58-	-6043659	
N	umbe	and street (or PO) box number if mail is not delivered to	street a	ddress)		Room/suite	В	Telephone numb	er (see instructi	ons)
							i			
	P.C	. BOX 1802					-	88	38-866-3	275
c		own, state or province, country, and ZIP or foreign posta	l code			_	_			
							C	If exemption applica	ation is	
	PRC	VIDENCE, RI 02901-1802						pending, check here		
$\bar{\mathbf{G}}$		eck all that apply   Initial return		Initial return	of a former p	ublic charity	קג		ab.at. b	
		Final return	-	Amended ret	•	,	15	1 Foreign organiza 2 Foreign organiza		. – 🗀
		Address change	<del> </del>	Name change				85% test, check h	nere and attach	$\sim$
H	Che	eck type of organization: X Section 501(	c)(3) ex			<del></del> -		computation .		. – 🗀
Ϊ	_	Section 4947(a)(1) nonexempt charitable trust	,,,,,,	ther taxable pr	wate foundati	ion <b>O</b> Y	E	If private foundation		· ( (
7			inting	method X Ca	ash Acc		┦_	under section 507(b		
•			_	necify)	a311	i u u i	F	If the foundation is under section 507(b		
		· · · · · · · · · · · · · · · · · · ·		d), must be on ca	ach bacie l		-	under section 507(c	on those nets	• •
	_	Analysis of Revenue and Expenses (The	olullill i	d), must be on ca	3511 00315 )				(d) Disbur	sements
L	CUL	total of amounts in columns (b), (c), and (d)		Revenue and penses per	(b) Net inve		(c) A	Adjusted net	for char	ritable
		may not necessarily equal the amounts in	φx	books	ıncom	e		income	purpo (cash bas	
<u> </u>		column (a) (see instructions) )				-			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1	1	Check X if the foundation is not required to			<u></u>					
	2	attach Sch B		3.		3.		<del></del>	<del> </del>	C/DM/III 1
	3	Interest on savings and temporary cash investments-								STMT 1
	4	Dividends and interest from securities		33,420.	3.	2,751.		<del></del>	<del></del>	STMT 2
	5a	Gross rents							<del> </del>	<del></del>
	Ь	Net rental income or (loss)		1 504				RECH	1171-15	
Le	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all		-1,584.			+-	NECE	1//	<del></del>
Revenue		assets on line 6a35,000.					12	-		<del>ĕ </del> -
ě	7	Capital gain net income (from Part IV, line 2) .					18	-JUN 2 8		ŎĮ
_	8	Net short-term capital gain					I			ريًا
	9 10a	Income modifications		·			╂-	OGDE		<u>κ</u> i
	1.00	and allowances							1, 01	
	1	Less Cost of goods sold .								<u> </u>
	!	Gross profit or (loss) (attach schedule)								
	11	Other income (attach schedule)		21 222						
_	12	Total. Add lines 1 through 11		31,839.		2,754.		· · · -		
رم	13	Compensation of officers, directors, trustees, etc	_	6,911.		4,147.				<u>2,764</u> .
enses	14	Other employee salaries and wages								
ē	15	Pension plans, employee benefits							<del></del>	
2	16a	Legal fees (attach schedule)								
e	ь	Accounting fees (attach schedule)								
\$	С	Other professional fees (attach schedule)								
ta	17	Interest			<del>.</del>			<u></u>		
<u>s</u> .	18	Taxes (attach schedule) (see instructions. 3.		782.		211.				
Ē	19	Depreciation (attach schedule) and depletion.								
₫	20	Occupancy								
ğ	16a b c 17 18 19 20 21 22 23 24	Travel, conferences, and meetings								
a	22	Printing and publications								
ng	23	Other expenses (attach schedule)								
ati	24	Total operating and administrative expenses.								
Jer.		Add lines 13 through 23		7,693.		<u>4,358.</u>				<u>2,764</u> .
ŏ	25	Contributions, gifts, grants paid		42,500.						42,500.
_	26	Total expenses and disbursements Add lines 24 and 25		50,193.		4,358.				45,264.
	27	Subtract line 26 from line 12								
	а	Excess of revenue over expenses and disbursements		-18,354.						
	b	Net investment income (if negative, enter -0-)			28	3,396.				
	С	Adjusted net income (if negative, enter -0-)								

JSA For Paperwork Reduction Act Notice, see instructions.

9E1410 1 000 FAW539 M876 04/21/2020 10:24:12

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(3

Pá	art II	Balance Sheets	Attached schedules and amounts in the	Beginning of year	End	of year
			description column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ng			
	2	Savings and temporary	cash investments	27,254.	44,908	44,908
-						
		Less allowance for doub	otful accounts >		<u> </u>	
	4	Pledges receivable				
		Less allowance for doub	otful accounts >			
	5					
	6	Receivables due from	officers, directors, trustees, and other			
		disqualified persons (atta	ach schedule) (see instructions)			
	7	Other notes and loans re	eceivable (attach schedule)			
			otful accounts			
2			;e			
Assets	-		eferred charges			
As			government obligations (attack The ula.			
			stock (attach schedule) . STMT .5.	833,194.	796,610	1,494,876
			bonds (attach schedule)			
ſ	11	Investments - land, building and equipment basis				
		Less accumulated deprecia				
		(attach schedule)	loans			<u> </u>
- 1			ch schedule)		<del></del>	
	14	Land, buildings, and equipment basis	<b>&gt;</b>			
		Less accumulated deprecia	tion			
		(attach schedule) Other assets (describe				<del> </del>
- 1	-	•	completed by all filers - see the			
			age 1, item I)	860,448.	841,518	1,539,784
$^{\dagger}$			ccrued expenses	000,2201		1,333,702
		, ,				<del>"</del>
					<del></del>	<del></del>
=			rs, trustees, and other disqualified persons.		<del>-</del>	
ā			tes payable (attach schedule)			<del></del>
_			tes payable (attach schedule)			
		Other habilities (describe	· · · · · · · · · · · · · · · · · · ·			
	23	Total liabilities (add line	s 17 through 22)		NON	ᆏ
$\neg$			FASB ASC 958, check here	-	IVOIV	<del></del>
alances		and complete lines 24,				
틞		•				
Ē			r restrictions		<del>.</del>	<del> </del>
8			strictions			<del> </del>
딝		roundations that do not to and complete lines 26 thro	ollow FASB ASC 958, check here			
	••			860,448.	841,518	
Net Assets or Fund	26		ipal, or current funds	000,440.	041,310	<u>•</u>
뜅	21	, , ,	land, bldg, and equipment fund		<del></del>	
S)	28	•	ated income, endowment, or other funds	860,448.	841,518	
ا پر	29 20		balances (see instructions)	000,440.	041,310	<del></del>
[돌	30		net assets/fund balances (see	060 110	841,518	
D.			was in Not Assets on Fund Pole	860,448.	041,310	<u> </u>
	rt III	<del></del>	ges in Net Assets or Fund Balan			<del></del>
1			alances at beginning of year - Part I		- ,	0.00 440
_			I on prior year's return)			860,448.
			line 27a			-18,354.
			ed in line 2 (itemize) ▶			040.004
						842,094.
			line 2 (itemize) ► INCOME ADJUSTMENT	51 B . II	5	576.
6_	Tota	net assets or fund ba	llances at end of year (line 4 minus li	ne 5) - Part II, column (b)	<u>, l</u> ıne 29   <b>6</b>	841,518.

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Part IV Capital Gains and Losses for Tax on Investment Income

Page 3

	(a) List and des 2-story bi	acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )		
1 7	PUBLICLY TRADED	SECURITIES		D-Donation		
	0					
	<u> </u>					
	2					
-	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu	
	35,000.		36,584.			-1,584.
	35,000.					1,304.
				<del>                                     </del>		
_					<del>-</del>	<del></del>
	1		<del> </del>	<del> </del>		<del></del>
	Complete only for assets sh	owing gain in column (h) and owned b	y the foundation on 12/31/69	-	<del></del>	
	Complete only for assets sa				Gains (Col. (h) ga (k), but not less ti	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	001	Losses (from col	(h))
						-1,584.
t	0					
	3					
	1					
			<u> </u>			
2	Capital gain net income		nin, also enter in Part I, line 7 pss), enter -0- in Part I, line 7	2		-1,584.
	If gain, also enter in Pa	art I, line 8, column (c) See inst	tructions If (loss), enter -0- in	3		
Pa	rt V Qualification U	nder Section 4940(e) for Redu	uced Tax on Net Investment Ir	ncome		
Was		t qualify under section 4940(e). Do	• •	ase period	۶۶	Yes X No
1		nount in each column for each year		o any ent	ries	
<u> </u>	(a)	(b)	(c)	ig any cite	(d)	<del></del>
Col	Base period years	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution rat (col. (b) divided by c	
	endar year (or tax year beginning in) 2018	20,202.	1,363,522.			0.014816
	2017	23,733.	1,277,382.			0.014510
	2016	3,981,258.	4,546,902.			0.875598
	2015	200,618.	4,856,842.			0.041306
	2014	170,971.	4,804,652.			0.035584
	2014	170,371.	4,004,032.	1		0.033304
2		d)		2		0.985883
3	_	o for the 5-year base period - divide	•			
	the number of years the	3		0.197177		
4	Enter the net value of no	4	1,	417,730.		
5 Multiply line 4 by line 3						279,544.
6	Enter 1% of net investme	ent income (1% of Part I, line 27b) .		6	<del></del>	284.
7	Add lines 5 and 6			7		279,828.
8		ons from Part XII, line 4 reater than line 7, check the box		8 hat part o	ısing a 1% tax	45,264. rate. See the

rm	990-PF (2019) 58-6043659			age 4
ar	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	uction	s)
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)			
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check			<u> 568.</u>
	here  and enter 1% 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)			
:	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			<u>IONE</u>
	Add lines 1 and 2			<u> 68.</u>
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			<u>ione</u>
	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0			<u> 68.</u>
;	Credits/Payments			•
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 544.			
ь	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld			
	Total credits and payments Add lines 6a through 6d			<u>44.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			24.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be Credited to 2020 estimated tax ► NONE Refunded ► 11			
li	VII-A Statements Regarding Activities			
3	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		<u>X</u>
)	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	<b>i</b>		
	published or distributed by the foundation in connection with the activities			
;	Did the foundation file Form 1120-POL for this year?	1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation 🕨 \$ (2) On foundation managers 🕨 \$			
3	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			
	Has the foundation engaged in any activities that have not previously been reported to the IRS?	_ 2		<u>X</u>
	If "Yes," attach a detailed description of the activities			
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<u> X</u>
•	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
)	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u>X</u>
	If "Yes," attach the statement required by General Instruction T			
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	_ 6	Х	
	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	Х	
	Enter the states to which the foundation reports or with which it is registered. See instructions DE			
,	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
	ls the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes,"			,

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

Par	t VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)7 If "Yes," attach schedule See instructions	11		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ►N/A			
14	The books are in care of ▶ <u>U.S. TRUST FIDUCIARY TAX SERVICES</u> Telephone no ▶ (888) 866			
	Located at ▶ <u>P.O. BOX 1802, PROVIDENCE, RI</u> ZIP+4 ▶ <u>02901</u> -	<u> 1802</u>		,
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		🕨	· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?		•	
	(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	1		
	termination of government service, if terminating within 90 days )	i	1	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		<u>X</u>
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2019?	1c		X_
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	1	ł	
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		- 1	•
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	۵.		
	all years listed, answer "No" and attach statement - see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	:		
٥-	Did the foundation held were the second of t	ĺ	ľ	4
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
D	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or		l	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	Ì		
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the	26	ł	
	foundation had excess business holdings in 2019)	3b	<del></del> -	
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	46-		· :
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	) DE	<u> X</u>

Par	VII-B Statements Regarding Activities f	or Which Form	1720 May Be Red	uired (continued)				
5a	During the year, did the foundation pay or incur any amo					Yes	No	
	(1) Carry on propaganda, or otherwise attempt to influe		n 4945(e))?	Yes X No	,			
	(2) Influence the outcome of any specific public ele	ection (see section	4955); or to carry o	n,		,		
	directly or indirectly, any voter registration drive?							
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes - X No							
	(4) Provide a grant to an organization other than a				١.			
	section 4945(d)(4)(A)? See instructions			7/	,   -			
	(5) Provide for any purpose other than religious, ch							
	purposes, or for the prevention of cruelty to children	or animals?		. Yes X No	,			
b	b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in							
	Regulations section 53 4945 or in a current notice regar						_	
	Organizations relying on a current notice regarding disas	ter assistance, check	here					
С	If the answer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the	ax	_		:	
	because it maintained expenditure responsibility for the				,			
	If "Yes," attach the statement required by Regulations se							
6a	Did the foundation, during the year, receive any fur	nds, directly or indir	ectly, to pay premiu	ms			١.	
	on a personal benefit contract?			. Yes X No	_		_	
b	Did the foundation, during the year, pay premiums, direc	tly or indirectly, on a	personal benefit contra	act?	6b		Χ	
	If "Yes" to 6b, file Form 8870							
7a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?.	. Yes X No			_ (	
b	If "Yes," did the foundation receive any proceeds or have	any net income attrib	outable to the transact	ion?	7b			
8	Is the foundation subject to the section 4960 tax on pay	ment(s) of more than	\$1,000,000 in				t	
	remuneration or excess parachute payment(s) during the						٠ .	
Part	Information About Officers, Director and Contractors	rs, Trustees, Fou	indation ivianagei	s, nignly Pald Emp	noyees,			
1_	ist all officers, directors, trustees, and foundation		neir compensation.					
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans	(e) Expens			
SEE	STATEMENT 6	devoted to position	enter -0-7	and deferred compensation	~			
<u> </u>	DIMIBIRATI O		6,911.					
			<u> </u>					
		ĺ		1				
					******		******	
				]				
	Compensation of five highest-paid employees NONE."	(other than thos	e included on lin	e 1 - see instructio	ns) If no	ne, o	enter	
1	Vame and address of each employee paid more than \$50,000	(b) Title, and average	(a) Composition	(d) Contributions to employee benefit	(e) Expens	e accou	nt,	
(a)	name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other all	wance	s	
	<del></del>							
NONE			NONE	NONE	N	ONE		
		-						
		(				_		
				T				
Total	number of other employees paid over \$50,000	<u> </u>	<u></u> <u></u>	<u></u> ▶		ONE		
	<del></del> -				Form 990	PF /	2010	

3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	E	NONE
		<del></del>
	<del></del>	
Total	number of others receiving over \$50,000 for professional services	NONE
	IX-A Summary of Direct Charitable Activities	
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 N	DNE	
_		
2_		
_		
3 _		
_		
		<del></del>
4_		
_		
Part	IX-B Summary of Program-Related Investments (see instructions)	<del></del>
	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
	DNE	
_		
2_		
_		
		<del></del>
	other program-related investments. See instructions	
3 <u>N</u> (	ONE	
_		

Par	art X Minimum Investment Return (All domestic foundations must complete this page instructions.)	oart. Foreign fo	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitat purposes:	ole, etc.,	
a	a Average monthly fair market value of securities	1a	1,402,739.
	<b>b</b> Average of monthly cash balances		36,581.
С	c Fair market value of all other assets (see instructions)	1c	NONE
d	<b>d Total</b> (add lines 1a, b, and c)	1d	1,439,320.
е	e Reduction claimed for blockage or other factors reported on lines 1a and	}	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets		NONE
3		3	1,439,320.
4			
	instructions),	<del></del>	21,590.
5		•	1,417,730.
6			70,887.
Pai	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper and certain foreign organizations, check here ▶ and do not complete this part )	ating foundation	S
1		1	70,887.
2 a	a Tax on investment income for 2019 from Part VI, line 5 2a	568.	
b	b Income tax for 2019 (This does not include the tax from Part VI) 2b		
C	c Add lines 2a and 2b	2c	568.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	70,319.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	70,319.
6	Deduction from distributable amount (see instructions)		NONE NONE
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on F	Part XIII,	
	line 1	<u> </u>	70,319.
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	<u>1</u> a	45,264.
b	<b>b</b> Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charital	ole, etc.	
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the		
а	a Suitability test (prior IRS approval required)	<u>3</u> a	NONE
b	<b>b</b> Cash distribution test (attach the required schedule)	3b	NONE_
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part X	III, line 4 4	45,264.
5		1	
	Enter 1% of Part I, line 27b. See instructions		N/A
6	Adjusted qualifying distributions Subtract line 5 from line 4		45, <u>264</u> .
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years		ig whether the foundation
	qualifies for the section 4940(a) reduction of tay in those years		

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Page 9

Pa	rt XIII Undistributed Income (see instr	uctions)			
•	Distributable amount for 2019 from Part XI,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
٠					70,319.
_	line 7				
	Undistributed income, if any, as of the end of 2019			NONE	
	Enter amount for 2018 only		NONE	10114	
	Excess distributions carryover, if any, to 2019				<del></del>
	1 1 1				
	77077				
	From 2015		}		
	77077				
		3,507,778.	<del></del>		
	Total of lines 3a through e	3,307,770.			<del></del>
4	Qualifying distributions for 2019 from Part XII, line 4 > \$ 45,264.				
_				NONE	
	Applied to 2018, but not more than line 2a			NONE	
b	Applied to undistributed income of prior years (Election required - see instructions)		NONE		
	•	<del></del>			
С	Treated as distributions out of corpus (Election required - see instructions)	NONE		ľ	
d	Applied to 2019 distributable amount				45,264.
	Remaining amount distributed out of corpus	NONE			
5	Excess distributions carryover applied to 2019				
	(If an amount appears in column (d), the same amount must be shown in column (a))	25,055.			_25,055.
6	Enter the net total of each column as				
	indicated below:	2 400 502	}		
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,482,723.			
b	Prior years' undistributed income Subtract		NONE		
	line 4b from line 2b		NONE		<del></del>
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)		NONE		
	tax has been previously assessed	<del></del> ,	NONE		
d	Subtract line 6c from line 6b Taxable amount - see instructions		NONE		
e	Undistributed income for 2018 Subtract line				<del></del>
	4a from line 2a Taxable amount - see instructions			NONE	
f	Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2020				NONE
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)	NONE			
8	Excess distributions carryover from 2014 not				
	applied on line 5 or line 7 (see instructions)	NONE			
9	Excess distributions carryover to 2020.	-			
	Subtract lines 7 and 8 from line 6a	3,482,723.			
	Analysis of line 9				
	Excess from 2015 NONE				
	Excess from 2016 3, 482, 723 .				
	Excess from 2017 NONE				
	Excess from 2018 NONE				
е	Excess from 2019 NONE				

Pa	TEXIV Private Op	erating Foundation	s (see instructions a	and Part VII-A, ques	tion 9)	<u>NØT APPLICABI</u>
1 a	If the foundation has	received a ruling or o	determination letter the	at it is a private ope	erating	
	foundation, and the ruling	-			<u> </u>	· <del></del>
	Check box to indicate v		is a private operating		in_section 4942	(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad- justed net income from Part	Tax year		Prior 3 years	1 11 2222	(e) Total
	I or the minimum investment	(a) 2019	(b) 2018	(c) 2017	(d) 2016	<del> </del>
	return from Part X for each					
	year listed	J <del></del>	<del> </del>		/	<del>-</del>
	85% of line 2a				<del></del>	
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		j			
_	2d from line 2c		ļ <i>/</i>	<b></b>		<u> </u>
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	<del></del>		<u> </u>	<del></del>	
	under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test	<del></del>			<del> </del>	
_	enter 2/3 of minimum invest-					
	ment 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 512(a)(5)),					
	or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(m)					<u> </u>
	(3) Largest amount of sup- port from an exempt					
	organization	/		<del> </del>		
Par		tary Information (	Complete this part	only if the found	ation had \$5,000	or more in assets at
		uring the year - see				
1	Information Regarding	Foundation Manager	's:			
а	List any managers of					•
	before the close of any	tax year (but only if th	ney have contributed	more than \$5,000) (\$	See section 507(d)(2)	
	N/A			<del></del>	<del></del>	<del></del>
	List any managers of ownership of a partner					ly large portion of the
	ownership of a partners	ship of other entity) of	which the loundation	illas a 10 % of greate	i interest	
	N/A					
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsh	ip, etc., Programs:	<del></del>	
	Check here ▶ ☐ If the time of time of the time of tim		•		ritable organizations	and does not accent
	unsolicited requests for					
	complete items 2a, b, c				-	
a	The name, address, and	d telephone number o	r email address of the	person to whom app	lications should be ad	dressed.
	SEE STATEMENT 8	3				
b	The form in which appl	ications should be sub	omitted and information	on and materials they	should include.	
	SEE ATTACHED ST	CATEMENT FOR LI	NE 2			
	A					
С	Any submission deadling		ND 0			
	SEE ATTACHED ST	ATEMENT FOR LI	NE 2			
- г	Any restrictions or lii	mitations on awards	such as hy geogr	anhical areas charit	able fields kinds of	institutions or other
	factors.	adons on awards,	such as by yeogr	apinious areas, charit	abic ficius, kilius Ul	maniferioris, or other
	SEE ATTACHED ST	י∆יד ברים יוים ארבור	NE 2			
SA	ODD WITWCHED OF	TITTHERT TON LIT	.HL <u>L</u>		<del></del>	Form <b>990-PF</b> (2019)

3 Grants and Contributions Paid Dur	ing the Year or App	roved for	Future Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	7
a Paid during the year				
			INTERNATIONAL GENERAL	
FRANCIS ASBURY SOCIETY			UNRESTRICTED GENERAL	
P.O. BOX 7 WILMORE KY 40390	N/A	PC	SUPPORT	25,000.
INDIAN SPRINGS HOLINESS CAMP		Ï	UNRESTRICTED GENERAL	
420 WATERFORD DR GANTERVILLE GA 30120	N/A	PC	SUPPORT	12,500.
ASBURY UNIVERSITY		ľ	UNRESTRICTED GENERAL	
1 MACKLEM DRIVE WILMORE KY 40390	N/A	PC	SUPPORT	5,000.
		1		
		}		
•				
	<u>L</u>			42.500
b Approved for future payment	<del></del>	· · · · · · · · · · · · · · · · · · ·	∕	42,500.
b Approved to ratare payment				
	<u> </u>			
<u>Total</u>	<del> </del>	<u></u>	▶ 3b	

Part XVI-	A Analysis of Income-Produ	ucing Act	ivities			
Enter gross a	amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
-	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
=		<u> </u>		<del> </del>		(See matructions )
<del></del>						
				<del>                                     </del>		
				<del> </del>		
				<del> </del>	<del></del>	
e f				<del>                                     </del>		
	and contracts from government agencies		<u> </u>			
_	•			<del> </del>		
	ship dues and assessments	<del></del>		14	3.	
	savings and temporary cash investments			14	33,420.	
	s and interest from securities					
	financed property					
	ebt-financed property			<u> </u>		
	·					<del></del>
	income or (loss) from personal property				· · · · · · · · · · · · · · · · · · ·	
	estment income		<del></del>	18	-1,584.	
	ss) from sales of assets other than inventory		<del>-</del> -			
	ne or (loss) from special events · · · · ofit or (loss) from sales of inventory · · ·					
-	renue a					<u> </u>
			<del></del>			
						<del></del>
				_		
e						
	Add columns (b), (d), and (e) · · · ·				31,839.	
	d line 12, columns (b), (d), and (e)					31,839.
	eet in line 13 instructions to verify calcu					52/553.
Part XVI-E	Relationship of Activities	to the A	complishment of Ex	cempt Purp	ooses	
Line No	Explain below how each activity	v for which	n income is reported in	n column (e	e) of Part XVI-A contribu	ted importantly to the
▼	accomplishment of the foundation					
	<u>-</u>	<del>_</del>				
	<del></del>					
					<del> </del>	<u> </u>
	<u> </u>					
			NOT APPLICABLE	<u> </u>		
		_				
					<u> </u>	
					<del></del>	

	Organizations								
1 Did	the organization direct	ly or indirectly e	ngage in any of the follo	wing with a	any other organ	zation described	$  \top  $	Yes	No
in :	section 501(c) (other	than section	501(c)(3) organizations)	or in sec	tion 527, rela	ting to political			
orga	anizations?								
a Tran	nsfers from the reporting	g foundation to a	noncharitable exempt or	ganization o	of				
(1)	Cash						1a(1)		X
(2)	Other assets						1a(2)		_ X
<b>b</b> Oth	er transactions.								
(1)	Sales of assets to a non	charitable exemp	ot organization				1b(1)		X
(2)	Purchases of assets from	m a noncharitable	e exempt organization				1b(2)		X
(3)	Rental of facilities, equip	pment, or other a	ssets		. <b></b>		1b(3)		X
(4)	Reimbursement arrange	ements					1b(4)		X
	•								X
			or fundraising solicitation						X
		-	, other assets, or paid emp						X
	·		," complete the following	₹		•			
	<del></del>		es given by the reporting						
			ement, show in column (						
(a) Line no	(b) Amount involved	(c) Name of no	ncharitable exempt organization	(d) De	escription of transfer	s, transactions, and share	ng arran	igeme	<u>nts</u>
				<del></del>					
			<del></del>			<del></del>			
<del></del>	<del> </del>	<del></del>				· · · · · · · · · · · · · · · · · · ·			
			<del>-</del>		<del>-</del>	<del></del> -			
· <del></del>				<u> </u>					
					·				
	<del> </del>	<del></del>							
<del></del>							-		
			<del></del>						
	<u> </u>								
			iated with, or related to,				_	_	1
			ion 501(c)(3)) or in sectio	ո 527 <sup>7</sup> ․ ․ ․		<u>.</u> _	Yes	s <u>X</u>	No
<b>b</b> If "Y	es," complete the follow								
	(a) Name of organization	n -	(b) Type of organization	n	(c)	Description of relations	nib		
	<del></del>		<del></del>			<del></del>			
			<del></del>			<del></del>			
	<del>-</del>	<del></del>							—
					<del></del>	<del></del>			
Ür	nder penalties of perjury, I declar	re that I have examine	d this return, including accompanying	ng schedules and	d statements, and to	the best of my knowledge	and be	lief, it	is true,
	prrect, and complete Declaration of	preparer (other than tax	payer) is based on all information of w	hich preparer has	s any knowledge	<del></del>			
Sign	Falling O D	-K.	04/21/2020			<b>I</b> '	discuss		return
Here   🖁	Signature of officer or trustee		Date	Title	<del>_</del>	with the prep	parer sho	Yes	elow? No
	•					<u> </u>			
J	Print/Type preparer's nar	me	Preparer's signature		Date	Check If P	TIN		
Paid						self-employed			
Prepare	Firm's name				F	ırm's EIN			
Use Onl									
					Р	hone no			
						Forr	ո 990-	-PF (	2019)

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

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

	NET	INVESTMENT	INCOME	1 1 1 1 1
KEVENUE	AND	EXPENSES	PER BOOKS	!!!!!!!!

DESCRIPTION

	3.	TOTAL
(-)	3.	BANK OF AMERICA TEMPORARY OVERNIGHT DEPO

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FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

81 60 70 71 71 71 71 71 71 71 71 71 71 71 71 71		
DESCRIPTION 	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
DOUBLELINE TOTAL RETURN BD FUND CL ISHR MSCI EAFE INDEX FUND FEDERATED US TREASURY CASH RESERVES #125 SPDR S&P DIVIDEND ETF VANGUARD TOTAL BD MARKET ETF VANGUARD MID-CAP ETF VANGUARD LARGE-CAP ETF	7,054. 2,922. 757. 2,904. 2,143. 2,421. 13,041.	6,424. 2,922. 718. 2,904. 2,143. 2,421. 13,041. 2,178.
TOTAL	33,420.	32,751.

7

- TAXES

FORM 990PF, PART I

 $\sim$ 

STATEMENT

DESCRIPTION	US TREASURY BALANCE DUE US TREASURY ESIMATED TAXES FOREIGN TAXES-QUAL DIV FOREIGN TAXES-NONQUAL DIV	TOTALS			
DE9	US US FOF				

202.

27. 544. 202. 9.

NET INVESTMENT INCOME

REVENUE AND EXPENSES PER BOOKS

211.

782.

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS

DESCRIPTION

912833KB5 UNITED STATES TREAS B2QMXG0#4 SINGAPORE GOVT BD IS B4NHJG4#6 CANADA GOVT BD ISIN

TOTALS

FORM 990PF, PART II - CORPORATE STOCK 

ENDING FMV 	78,828. 163,035. 720,720. 156,530. 169,942. 118,327. 87,494.
ENDING BOOK VALUE	79,536. 60,301. 251,960. 60,011. 174,132. 94,594. 76,076. 
BEGINNING BOOK VALUE	79,536. 60,301. 251,960. 60,011. 210,716. 94,594. 76,076. 833,194.
	TOTALS
DESCRIPTION	921937835 VANGUARD TOTAL BD MA 922908629 VANGUARD MID-CAP ETF 922908637 VANGUARD LARGE-CAP E 922908751 VANGUARD SMALL-CAP E 258620103 DOUBLELINE TOTAL RET 78464A763 SPDR S&P DIVIDEND ET 464287465 ISHARES MSCI EAFE ET

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FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES 

OFFICER NAME:

BANK OF AMERICA

ADDRESS:

1020 N FRENCH ST

WILMINGTON, DE 19884

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

6,911. COMPENSATION .....

OFFICER NAME:

STEPHEN LUCE

ADDRESS:

P.O. BOX 32847

KNOXVILLE, TN 37930

TITLE:

CO-TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

MATHEW D LUCE

ADDRESS:

PO BOX 292

BUCKLEY, MI 49620-0292

TITLE:

CO-TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

OFFICER NAME:

SARA E LUCE SIDES

ADDRESS:

212 UNAMI TRL

NEWARK, DE 19711-7509

TITLE:

CO-TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

CO TUA RAINBOW FUND 58-6043659

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES 

OFFICER NAME:

MARY C LUCE GILES

ADDRESS:

6808 WESTLAND DR

KNOXVILLE, TN 37919-7433

TITLE:

CO-TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

TOTAL COMPENSATION:

6,911.

=============

RECIPIENT NAME:

BETTYE JONES, SVP-US TRUST CO OF DE ADDRESS:

1100 N KING ST, DE5-002-04-12 WILMINGTON, DE 19884 RECIPIENT'S PHONE NUMBER: (302) 416-33

FORM, INFORMATION AND MATERIALS:

NO SPECIFIC FORM

SUBMISSION DEADLINES:

NONE

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RESTRICTIONS OR LIMITATIONS ON AWARDS: NONE

## FEDERAL FOOTNOTES

1 013 4

THE COMPENSATION SHOWN ON THE RETURN THAT IS PAID TO BANK OF AMERICA, N.A. AS CORPORATE TRUSTEE IS NOT CALCULATED BASED UPON AN HOURLY RATE FOR TIME SPENT BY THE TRUSTEE; RATHER, BANK OF AMERICA'S COMPENSATION AS CORPORATE TRUSTEE IS CALCULATED USING A MARKET VALUE FEE SCHEDULE. THE TRUST OFFICER'S TIME SPENT PERFORMING ADMINISTRATIVE RESPONSIBILITIES FOR THIS FOUNDATION AVERAGES ONE HOUR PER WEEK. IN ADDITION, TIME IS SPENT BY OTHER STAFF MEMBERS FOR RECORDKEEPING, INVESTMENT MANAGEMENT, INCOME COLLECTION, RENDERING STATEMENTS AND ACCOUNTINGS, REGULATORY REPORTING, REGULATORY COMPLIANCE, AND TAX SERVICES.