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OMB No 1545-0047

Form 990-PF

Department of the Treasury
Internal Revenue ServiceReturn 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.

2019

Open to Public Inspection

For calendar year 2019 or tax year beginning , and ending

Name of foundation

OPHELIA POLK MOORE MEMORIAL TRUST

Number and street (or P O box number if mail is not delivered to street address)

625 PECAN ST

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

HELENA AR 72342

G Check all that apply

Initial return
Final return
Address change

Initial return of a former public charity
Amended return
Name change

H Check type of organization

Section 501(c)(3) exempt private foundation

X Section 4947(a)(1) nonexempt charitable trust

Other taxable private foundation

I Fair market value of all assets at
end of year (from Part II, col (c),
line 16) ► \$ 340,579J Accounting method Cash Accrual
 Other (specify)

(Part I, column (d), must be on cash basis)

A Employer identification number

71-0247120

B Telephone number (see instructions)

870-338-8115

C If exemption application is pending, check here ► D 1 Foreign organizations, check here ► 2. Foreign organizations meeting the
85% test, check here and attach computation ► E If private foundation status was terminated under
section 507(b)(1)(A), check here ► F If the foundation is in a 60-month termination
under section 507(b)(1)(B), check here ► Part II Analysis of Revenue and Expenses (The total of
amounts in columns (b), (c), and (d) may not necessarily equal
the amounts in column (a) (see instructions))

		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule)				
2	Check ► <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
3	Interest on savings and temporary cash investments	54	54	54	
4	Dividends and interest from securities	5,681	5,681	5,681	
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	STMT 1 11,017			
b	Gross sales price for all assets on line 6a	44,677			
7	Capital gain net income (from Part IV, line 2)		11,017		
8	Net short-term capital gain			0	
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less Cost of goods sold				
c	Gross profit or (loss) (attach schedule)				
11	Other income (attach schedule)	STMT 2 5,000		5,000	
12	Total. Add lines 1 through 11	21,752	16,752	10,735	
13	Compensation of officers, directors, trustees, etc	0			
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule)	SEE STMT 3 250			250
b	Accounting fees (attach schedule)	STMT 4 525			525
c	Other professional fees (attach schedule)				
17	Interest				
18	Taxes (attach schedule) (see instructions)	STMT 5 261			
19	Depreciation (attach schedule) and depletion	STMT 6			
20	Occupancy				
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses (att sch)				
24	Total operating and administrative expenses.				
	Add lines 13 through 23	1,036	0	0	775
25	Contributions, gifts, grants paid	24,600			24,600
26	Total expenses and disbursements. Add lines 24 and 25	25,636	0	0	25,375
27	Subtract line 26 from line 12				
a	Excess of revenue over expenses and disbursements	-3,884			
b	Net investment income (if negative, enter -0-)		16,752		
c	Adjusted net income (if negative, enter -0-)			10,735	

SCANNED MAR 15 2022

Revenue

Operating and Administrative Expenses

For Paperwork Reduction Act Notice, see instructions.

DAA

Form 990-PF (2019)

G1

Assets	Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year			End of year		
			(a) Book Value		(b) Book Value		(c) Fair Market Value	
			22,024	18,272	18,272			
10a	1 Cash – non-interest-bearing							
	2 Savings and temporary cash investments							
	3 Accounts receivable ►							
	Less allowance for doubtful accounts ►							
	4 <i>I</i> lledges 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 (att. schedule) ►		0					
	Less allowance for doubtful accounts ►							
	8 Inventories for sale or use							
	9 Prepaid expenses and deferred charges							
	10a Investments – U S and state government obligations (attach schedule)	SEE STMT 7						
	b Investments – corporate stock (attach schedule)		298,148		314,846		322,307	
	c Investments – corporate bonds (attach schedule)							
11	11 Investments – land, buildings, and equipment basis ►							
	Less accumulated depreciation (attach sch.) ►							
	12 Investments – mortgage loans							
	13 Investments – other (attach schedule)							
	14 Land, buildings, and equipment basis ►	483,170						
	Less accumulated depreciation (attach sch.) ►	STMT 8						
	15 Other assets (describe ►							
	16 Total assets (to be completed by all filers – see the instructions Also, see page 1, item I))					
				820,172		816,288		340,579
17	17 Accounts payable and accrued expenses							
	18 Grants payable							
	19 Deferred revenue							
	20 Loans from officers, directors, trustees, and other disqualified persons							
	21 Mortgages and other notes payable (attach schedule)							
	22 Other liabilities (describe ►)					
	23 Total liabilities (add lines 17 through 22)			0		0		
24	Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30.	► <input type="checkbox"/>						
	Net assets without donor restrictions							
	25 Net assets with donor restrictions							
	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30.	► <input checked="" type="checkbox"/>						
	26 Capital stock, trust principal, or current funds							
	27 Paid-in or capital surplus, or land, bldg , and equipment fund							
	28 Retained earnings, accumulated income, endowment, or other funds							
	29 Total net assets or fund balances (see instructions)			820,172		816,288		
	30 Total liabilities and net assets/fund balances (see instructions)			820,172		816,288		
				820,172		816,288		
Net Assets or Fund Balances	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	820,172
2 Enter amount from Part I, line 27a	2	-3,884
3 Other increases not included in line 2 (itemize) ►	3	
4 Add lines 1, 2, and 3	4	816,288
5 Decreases not included in line 2 (itemize) ►	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 29	6	816,288

Part IV. Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P – Purchase D – Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a AMERICAN ENTERPRISE INV					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a 11,017			11,017		
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any			
a			11,017		
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2	11,017	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) See instructions If (loss), enter -0- in Part I, line 8			3		

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

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

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

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

 Yes No

If "Yes," the foundation doesn't qualify under section 4940(e) Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2018	17,425	785,932	0.022171
2017	22,852	787,421	0.029021
2016			
2015			
2014			

- 2 Total of line 1, column (d) 2 **0.051192**
- 3 Average distribution ratio for the 5-year base period – divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years 3 **0.025596**
- 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 4 **803,952**
- 5 Multiply line 4 by line 3 5 **20,578**
- 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 **168**
- 7 Add lines 5 and 6 7 **20,746**
- 8 Enter qualifying distributions from Part XII, line 4 8 **25,375**

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here ► and enter "N/A" on line 1
Date of ruling or determination letter (attach copy of letter if necessary—see instructions)

b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► and enter 1% of Part I, line 27b

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 Add lines 1 and 2

4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)

5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-

6 Credits/Payments

a 2019 estimated tax payments and 2018 overpayment credited to 2019

b Exempt foreign organizations – tax withheld at source

c Tax paid with application for extension of time to file (Form 8868)

d Backup withholding erroneously withheld

7 Total credits and payments Add lines 6a through 6d

8 Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached

9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ►

10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ►

11 Enter the amount of line 10 to be Credited to 2020 estimated tax ► Refunded ►

1	168
2	0
3	168
4	0
5	168
6a	
6b	
6c	
6d	
7	
8	
9	168
10	
11	

Part VII-A Statements Regarding Activities

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? Yes No

1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 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

1c Did the foundation file Form 1120-POL for this year?

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 ► \$ _____

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? 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? N/A

b If "Yes," has it filed a tax return on Form 990-T for this year?

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 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 remain in the governing instrument?

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

8a Enter the states to which the foundation reports or with which it is registered See instructions ► **AR**

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by *General Instruction G*? If "No," attach explanation

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See instructions for Part XIV If "Yes," complete Part XIV

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

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

5a	During the year did the foundation pay or incur any amount to	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	N/A	5b ► <input type="checkbox"/>
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945–5(d)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	N/A	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6b	X
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	N/A	
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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

1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 9				

2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

► 0

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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. See instructions. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

Part IX-A **Summary of Direct Charitable Activities**

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

Expenses

1 TO FOSTER, IMPROVE, AND FURTHER THE HEALTH, EDUCATION AND WELFARE OF DISADVANTAGED PHILLIPS COUNTY YOUTHS.

2

3

4

Part IX-B **Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Amount

1 N/A

2

All other program-related investments. See instructions

3

Total. Add lines 1 through 3


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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc . purposes		
a	Average monthly fair market value of securities	1a	306,423
b	Average of monthly cash balances	1b	18,272
c	Fair market value of all other assets (see instructions)	1c	491,500
d	Total (add lines 1a, b, and c)	1d	816,195
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	816,195
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see instructions)	4	12,243
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	803,952
6	Minimum investment return. Enter 5% of line 5	6	40,198

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

1	Minimum investment return from Part X, line 6	1	40,198
2a	Tax on investment income for 2019 from Part VI, line 5	2a	168
b	Income tax for 2019 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	168
3	Distributable amount before adjustments Subtract line 2c from line 1	3	40,030
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	40,030
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	40,030

Part XII **Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1a	25,375
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 charitable, etc , purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	3a	
a	Suitability test (prior IRS approval required)	3b	
b	Cash distribution test (attach the required schedule)	4	25,375
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	5	168
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b See instructions	6	25,207
6	Adjusted qualifying distributions. Subtract line 5 from line 4		

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				40,030
2 Undistributed income, if any, as of the end of 2019			37,778	
a Enter amount for 2018 only				
b Total for prior years 20 ____ , 20 ____ , 20 ____				
3 Excess distributions carryover, if any, to 2019				
a From 2014				
b From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e				
4 Qualifying distributions for 2019 from Part XII, line 4 ► \$ 25,375			25,375	
a Applied to 2018, but not more than line 2a				
b Applied to undistributed income of prior years (Election required – see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2019 distributable amount				
e Remaining amount distributed out of corpus				
5 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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income. Subtract 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 assessed				
d Subtract line 6c from line 6b Taxable amount – see instructions				
e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount – see instructions			12,403	
f Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020				40,030
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)				
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				

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

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

b Check box to indicate whether the foundation is a private operating foundation described in section

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

1 Information Regarding Foundation Managers:

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

N/A

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

N/A

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

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

a The name, address, and telephone number or email address of the person to whom applications should be addressed

**GINA PILLOW 870-338-8115
625 PECAN HELENA AR 72342**

b The form in which applications should be submitted and information and materials they should include

THE FORM IN WHICH APPLICATIONS ARE
SEE STATEMENT 10

c Any submission deadlines

NONE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

SEE STATEMENT 11

Part XV.1 Supplementary Information (continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
THE FAMILY CENTER, INC. 406 PECAN HELENA AR 72342		PC	INTERNET SERVICES FOR SHELTERED CHILDREN	2,000
THRIVE, INC. 310 CHERRY ST HELENA AR 72342		PC	SUPPLIES FOR KIDS ZONE	2,000
WARFIELD CONCERTS PO BOX 81 HELENA AR 72342		PC	STEP AFRICA PROGRAM	4,000
FREEMAN MEMORIAL PLAYGROUND PO BOX 342 HELENA AR 72342		PC	PLANNED EVENTS AT PLAYGROUND	1,000
YOUNG LIFE OF PC 2011 STRINGTOWN ROAD HELENA AR 72342		PC	SUMMER CAMP FOR DISADVANTAGE YOUTH	4,000
KING BISCUIT BLUES FESTIVAL 319 PHILLIPS ST HELENA AR 72342		PC	SUPPORT YOUTH AREA	2,000
LOWER MISSISSIPPI RIVER FOUNDATION 107 PERRY ST HELENA AR 72342			SUMMER PROGRAM FOR LOCAL STUDENTS	1,500
PHILLIPS COUNTY COLLEGE FOUNDATION 1000 CAMPUS DRIVE HELENA AR 72342			FOOD BANK FOR STUDENTS	2,000
BOYS & GIRLS CLUB OF PHILLIPS COUNTY 8 PLAZA ST WEST HELENA AR 72390			TO PROVIDE BOYS AND GIRLS OF PC	2,000
PILLOW CLINIC GRANT 101 SHIRLEY HICKS DR HELENA AR 72342			TO PROVIDE HELATHCARE GRANT	500
Total			► 3a	24,600
b Approved for future payment				
N/A				
Total			► 3b	

Part XV Supplementary Information (continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
LAQUINTA BAKER			VEHICLE PURCHASE ASSISTANCE	2,800
HELENA AR 72342				
WALMART CENTER 602 SHEILA ST WEST HELENA AR 72390			CHARITY CARD ASSISTANCE	800
Total				► 3a
<i>b Approved for future payment</i>				
N/A				
Total				► 3b

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

1 Program service revenue

a LAND RENT

b _____

c _____

d _____

e _____

f _____

g Fees and contracts from government agencies

2 Membership dues and assessments

3 Interest on savings and temporary cash investments

4 Dividends and interest from securities

5 Net rental income or (loss) from real estate

a Debt-financed property

b Not debt-financed property

6 Net rental income or (loss) from personal property

7 Other investment income

8 Gain or (loss) from sales of assets other than inventory

9 Net income or (loss) from special events

10 Gross profit or (loss) from sales of inventory

11 Other revenue a _____

b _____

c _____

d _____

e _____

12 Subtotal. Add columns (b), (d), and (e)

13 Total. Add line 12, columns (b), (d), and (e)

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
N/A	

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Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

Whom Sold	Date Acquired	Date Sold	How Received		Cost	Expense	Depreciation	Net Gain / Loss
			Sale Price	Sale				
LAND 5 . 61 ACRES	1/01/02	8/05/19	\$ 16,830	\$ 16,830	\$ 16,830	\$ 0	\$ 0	\$ 0
SALE 5 . 61 ACRES			\$ 16,830	\$ 16,830	\$ 16,830	\$ 0	\$ 0	\$ 0
TOTAL			\$ 33,660	\$ 33,660	\$ 33,660	\$ 0	\$ 0	\$ 0

Statement 2 - Form 990-PF, Part I, Line 11 - Other Income

Description	Revenue per Books		Net Investment Income	Adjusted Net Income
	\$ 5,000	\$ 5,000		
LAND RENT	\$ 5,000	\$ 5,000	\$ 0	\$ 5,000
TOTAL	\$ 5,000	\$ 5,000	\$ 0	\$ 5,000

Statement 3 - Form 990-PF, Part I, Line 16a - Legal Fees

Description	Total		Net Investment	Adjusted Net	Charitable Purpose
	\$ 250	\$ 250			
INDIRECT LEGAL FEES	\$ 250	\$ 250	\$ 0	\$ 0	\$ 250
TOTAL	\$ 250	\$ 250	\$ 0	\$ 0	\$ 250

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Statement 4 - Form 990-PF, Part I, Line 16b - Accounting Fees

<u>Description</u>	<u>Total</u>	<u>Net Investment</u>	<u>Adjusted Net</u>	<u>Charitable Purpose</u>
INDIRECT ACCOUNTING FEES	\$ 525	\$ 525	\$ 525	\$ 525
TOTAL	\$ 525	0	0	0

Statement 5 - Form 990-PF, Part I, Line 18 - Taxes

<u>Description</u>	<u>Total</u>	<u>Net Investment</u>	<u>Adjusted Net</u>	<u>Charitable Purpose</u>
FEDERAL TAXES 2018	\$ 261	\$ 261	\$ 261	\$ 261
TOTAL	\$ 261	0	0	0

Statement 6 - Form 990-PF, Part I, Line 19 - Depreciation

<u>Description</u>	<u>Date Acquired</u>	<u>Cost Basis</u>	<u>Prior Year Depreciation</u>	<u>Method</u>	<u>Life</u>	<u>Current Year Depreciation</u>	<u>Net Investment Income</u>	<u>Adjusted Net Income</u>
LAND 5 .61 ACRES	1/01/02	\$ 16,830	\$ 16,830		0	\$ 0	\$ 0	\$ 0
TOTAL		\$ 16,830	0					

Statement 7 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>	<u>Basis of Valuation</u>	<u>Fair Market Value</u>
AMERIPRISE FINANCIAL	\$ 298,148	\$ 314,846	MARKET	\$ 322,307
TOTAL	\$ 298,148	\$ 314,846		\$ 322,307

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Statement 8 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment

Description	Beginning Net Book	End Cost / Basis	End Accumulated Depreciation	Net FMV
	\$ 500,000	\$ 483,170	\$ 0	\$ 0
TOTAL	\$ 500,000	\$ 483,170	\$ 0	\$ 0

Statement 9 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
GINA PILLOW 625 PECHAN HELENA AR 72342	SENIOR WARDE	0.00	0	0	0
WALTER MORRIS , JR. PO BOX 770 HELENA AR 72342	TREASURER	0.00	0	0	0
GIBSON TURLEY , JR. PO BOX 770 HELENA AR 72342	CLERK	0.00	0	0	0
BUFF BROTHERS PO BOX 770 HELENA AR 72342	VESTRY	0.00	0	0	0
JACK HORNOR PO BOX 770 HELENA AR 72342	VESTRY	0.00	0	0	0
TAP JENNINGS PO BOX 770 HELENA AR 72342	JUNIOR WARDE	0.00	0	0	0
JANE HORNOR 625 PECHAN HELENA AR 72342	VESTRY	0.00	0	0	0

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**Statement 9 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees,
Etc. (continued)**

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
CARLA MYERS 625 PECAN HELENA AR 72342	VESTRY	0.00	0	0	0
MIKE FIELDER 625 PECAN ST HELENA AR 72342	VESTRY	0.00	0	0	0
BEN PITTMAN 625 PECAN ST HELENA AR 72342	VESTRY	0.00	0	0	0
ANN LEE 625 PECAN ST HELENA AR 72342	VESTRY	0.00	0	0	0

Statement 10 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

APPLICATION FORMAT IS A WRITTEN PROPOSAL LISTING HOW THE GRANTS WILL BE USED.

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

NONE

Statement 11 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

GRANT REQUESTS MUST BE IN ALIGNMENT WITH THE PURPOSE OF THE ORGANIZATION WHICH IS TO FOSTER, IMPROVE, AND FURTHER THE HEALTH, EDUCATION AND WELFARE OF DISADVANTAGED PHILLIPS COUNTY YOUTH.