Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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.

Fo	r caler	ndar year 2019 or tax year beginning		, 2019	9, and	ending		, 20
Nan	ne of fou	Indation				A Employe	er Identification numb	er
TH	E <u>MAH</u>	ONEY FAMILY FOUNDATION, INC				}	82-1794837	
Nun	nber and	street (or P.O. box number if mail is not delivered to street address)		Room	/suite	B Telephor	ne number (see instruct	tions)
PO	BOX 3	338					479-903-385!	5
City	or town	, state or province, country, and ZIP or foreign postal code				C If exemp	tion application is pend	ting, check here▶
BE	NTON	VILLE, AR 72712				O II CAOMP	пол пррповаот в реги	ing, chock holds
G	Chec	k all that apply: Initial return Initial return	of a former r	oublic	chanty	D 1. Foreig	n organizations, check	here ▶□
		☐ Final return ☐ Amended				i		
		☐ Address change ☐ Name cha	nge	_	./\		n organizations meetin here and attach comp	
$\overline{\mathbf{H}}$	Checl	k type of organization: Section 501(c)(3) exempt p		ation	14	1	foundation status was	
П		on 4947(a)(1) nonexempt charitable trust Other tax			ation		07(b)(1)(A), check here	
		narket value of all assets at J Accounting method				l		
•		if year (from Part II, col. (c),	. 🗀 Odon 1		501443	F If the fou under se	indation is in a 60-mont ction 507(b)(1)(B), chec	th termination :k here . ▶ □
		6) ► \$ 41,798 (Part I, column (d), must b	e on cash basi	s)				
P	art I					<u> </u>	T	(d) Disbursements
-	art r	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue a expenses p			investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions).)	books		ır	ncome	income	purposes (cash basis only)
_	1 4			4 442			 	
	1	Contributions, gifts, grants, etc., received (attach schedule)		6,463			 	· · · · · · · · · · · · · · · · · · ·
	2	Check ► ☐ if the foundation is not required to attach Sch. B						
	3	Interest on savings and temporary cash investments		42		42		
	4	Dividends and interest from securities		165		165		
	5a	Gross rents				·		
	b	Net rental income or (loss)					ļ	
Revenue	6a	Net gain or (loss) from sale of assets not on line 10		,617)			 	
e	b	Gross sales price for all assets on line 6a 48,946						
9	7	Capital gain net income (from Part IV, line 2)				0		
Œ	8	Net short-term capital gain					0	
	9	Income modifications]
	10a	Gross sales less returns and allowances						
	b	Less: Cost of goods sold						1
	С	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11	5	5,048		207	207	
	13	Compensation of officers, directors, trustees, etc.		0		0	0	
Şe	14	Other employee salaries and wages						
Expenses	15	Pension plans, employee benefits						
ğ.	16a	Legal fees (attach schedule)					RECEIVED	100
_	b	Accounting fees (attach schedule)					CENT	101
Administrative	C	Other professional fees (attach schedule)					REU	0 3
at	17	Interest				1	APR 27 20	10/10/
SE	18	Taxes (attach schedule) (see instructions)					DR	
Ξ.	19	Depreciation (attach schedule) and depletion				18	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1
Ę	20	Occupancy				1/2	OGDEN	
-	21	Travel, conferences, and meetings					000	
and	22	Printing and publications						
	23	Other expenses (attach schedule) Statement.		835				
Ĕ	24	Total operating and administrative expenses.	· · · · · · · · · · · · · · · · · · ·	-033				<u> </u>
Operating		Add lines 13 through 23		835				
je.	25	Contributions, gifts, grants paid	7.	_835 2.870				
ō	25 26							
		Total expenses and disbursements. Add lines 24 and 25		3,705				
	27	Subtract line 26 from line 12:	140					
	a	Excess of revenue over expenses and disbursements	(18	,657)				
	Ь	Net investment income (if negative, enter -0-)				207		<u> </u>
	C	Adjusted net income (if negative, enter -0-)		- 1		j	0	j l

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11289X





Form 990-PF (2019) Page **2**

Pa	ırt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
•		should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing	59,475	18,232	18,232
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	·		
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	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)			
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ► Blackrock Short Oblig Fund CI A)		23,566	23,692
	16	Total assets (to be completed by all filers-see the			1110 211
		ınstructions. Also, see page 1, item l)		41,798	41707
	17	Accounts payable and accrued expenses			
ç	18	Grants payable			
£	19	Deferred revenue			
₫	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ►)			
	23	lotal liabilities (add lines 17 through 22)	0	0	
Balances		Foundations that follow FASB ASC 958, check here]		
٤		and complete lines 24, 25, 29, and 30.			
8	24	Net assets without donor restrictions			
<u> </u>	25	Net assets with donor restrictions			
≦		Foundations that do not follow FASB ASC 958, check here ▶ □			
ヹ		and complete lines 26 through 30.			
9	26	Capital stock, trust principal, or current funds			
ş	27	Paid-in or capital surplus, or land, bldg., and equipment fund	50.475		
ŠŠ	28	Retained earnings, accumulated income, endowment, or other funds	59,475 59,475	41,798	
Ä	29	Total net assets or fund balances (see instructions)	59,475	41,/76	
Net Assets or Fun	30	Total liabilities and net assets/fund balances (see instructions)	59,475	41,798	
	rt III	Analysis of Changes in Net Assets or Fund Balances	37,473	41,770	·
		I net assets or fund balances at beginning of year—Part II, colu	mp (a) line 20 (mus	t agree with	
•		of-year figure reported on prior year's return)			59,475
2		r amount from Part I, line 27a			(18,657)
3		er increases not included in line 2 (itemize) Increased value in B			980.28
		lines 1, 2, and 3			41,798
5		reases not included in line 2 (itemize) ▶		5	
		I net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lir	ne 29 6	41,798

ì	•	е	ao	ı

Part	IV Capital Gains and	d Losses for Tax on Investn	nent Income			
		nd(s) of property sold (for example, real e use; 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	Walmart Stock - 490 share	s		D	2/19/2019	2/22/2019
<u>b</u>	<u> </u>					
<u>C</u>						
<u>d</u>			·····			
<u>e</u>				<u> </u>		
	(e) Gross sales price	(f) Deprectation allowed (or allowable)		other basis nse of sale		n or (loss) f) minus (g))
а	48,941			50,563		(1,622)
<u>b</u>						
<u>C</u>						
<u>d</u>					····	
<u>e</u>						··-··
	Complete only for assets sho	owing gain in column (h) and owned	by the foundation	on 12/31/69.		. (h) gain minus
	(i) FMV as of 12/31/69	(i) Adjusted basis as of 12/31/69		s of col. (i) . (j), if any		less than -0-) or rom col. (h))
a						
<u>b</u>			- , - <u>- , - ,</u>	,		
c				· · · · · · · · · · · · · · · · · · ·		
<u>d</u>						
<u>e</u>	<u>.</u>					
2	Capital gain net income o		also enter in Pa , enter -0- in Pai		2	(1,622)
3	If gain, also enter in Part	in or (loss) as defined in sections I, line 8, column (c). See instru	ctions. If (loss)			
Part		ler Section 4940(e) for Redu		· · · · · / .	3	(1,622)
Was ti		e this part blank. section 4942 tax on the distribu qualify under section 4940(e). Do			pase period?	☐ Yes ☐ No
1		ount in each column for each yea			aking any entries.	·
Cale	(a) Base penod years ndar year (or tax year beginning in	Adjusted qualificate distribution		(c) f nonchantable-use as	Dist	(d) ribution ratio livided by col. (c))
	2018					- · · · · · · · · · · · · · · · · · · ·
	2017					
	2016					
	2015					
	2014					
2	Total of line 1, column (d)				. 2	
3		for the 5-year base period—divoundation has been in existence			by . 3	
4	·	charitable-use assets for 2019 fr	•		. 4	
		Cridinabie-use assets for 2015 ii	OIII Fart A, line	3		
5	Multiply line 4 by line 3		• • • •		. 5	
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)	· · · · · ·	. 6	
7	Add lines 5 and 6				. 7	
8		ons from Part XII, line 4			. 8	0/ toy rate Can 45
	Part VI instructions.	ater than line 7, check the box ir	ran vi, line 1b	, and complete t	nat part using a 1	70 tax rate. See the

Form 990-PF (2019) Page 4 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions) Exempt operating foundations described in section 4940(d)(2), check here \(\bigset\) 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 1 0 All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 2 2 0 3 0 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 4 0 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 O Credits/Payments: 2019 estimated tax payments and 2018 overpayment credited to 2019 . . . Exempt foreign organizations—tax withheld at source 0 Tax paid with application for extension of time to file (Form 8868) . . . 0 Backup withholding erroneously withheld 7 7 0 8 Enter any penalty for underpayment of estimated tax. Check here I if Form 2220 is attached 8 0 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 0 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. 10 Enter the amount of line 10 to be: Credited to 2020 estimated tax Statements Regarding Activities Dunna the tax year, did the foundation attempt to influence any national, state, or local legislation or did it No 1a J Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 1c v 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? 2 J 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 3 Did the foundation have unrelated business gross income of \$1,000 or more during the year? **4**a 4b 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 v 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 Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ 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 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," 9 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their 10

Page 8	
--------	--

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)? If "Yes," attach schedule. See instructions	11	!	~
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		~
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	~	
4.4	Website address THEMAHONEYFAMILYFOUNDATION.ORG			
14	***************************************	9-903-		·
15	Located at ► PO BOX 338, BENTONVILLE, AR ZIP+4 ► Section 4947(a)(1) nonexempt charatable trusts filing Form 990-PF in lieu of Form 1041—check here	7271	2	
13		• •	•	▶ ⊔
16	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
10	over a bank, securities, or other financial account in a foreign country?	16	163	~
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶		;	1
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		·
	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?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? \square Yes \square No] ;		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes			
	(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 penod after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)–3 or in a current notice regarding disaster assistance? See instructions .	1b		
	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		
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 6d and 6e) for tax year(s) beginning before 2019?		į	
	If "Yes," list the years ▶ 20, 20, 20, 20		Ì	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed assets.)			
_	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. 20, 20, 20, 20, 20, 20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or 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 the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	4a		
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	ru		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		~

Form 990-PF (2019) Page 6 Statements Regarding Activities for Which Form 4720 May Be Required (continued) Part VII-B 5a During the year, did the foundation pay or incur any amount to: Yes No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? **☑** No (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ₩ No (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ₩ No (4) Provide a grant to an organization other than a charitable, etc., organization described in ₩ 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? 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 5b Organizations relying on a current notice regarding disaster assistance, check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax If "Yes," attach the statement required by Regulations section 53,4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870. b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? . 7b Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors List all officers, directors, trustees, and foundation managers and their compensation. See instructions. (c) Compensation (If not paid, enter -0-) (b) Title, and average (d) Contributions to (e) Expense account, other allowances employee benefit plans and deferred compensation (a) Name and address hours per week devoted to position PRESIDENT - 1 **LAWRENCE MAHONEY** 0 0 PO BOX 338, BENTONVILLE, AR 72712 SEC/TREASURER **SANDRA MAHONEY** 0 O n PO BOX 338, BENTONVILLE, AR 72712 **CAITLIN MAHONEY SPEARS** VICE-PRESIDENT -0 0 0 906 SW PURE GLOBE, BENTONVILLE, AR 72712 **BRENDAN MAHONEY DIRECTOR - 1** 0 PO BOX 338, BENTONVILLE, AR 72712 Compensation of five highest-paid employees (other than those included on line 1-see instructions). If none, onter "NONE." (d) Contributions to (b) Title, and average (e) Expense account. employee benefit (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation plans and deferred other allowances compensation Total number of other employees paid over \$50,000 0

Form 990-PF (2019) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) 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 Total number of others receiving over \$50,000 for professional services 0 **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 Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc. 2 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 All other program-related investments. See instructions. Total. Add lines 1 through 3

Form 990-PF (2019) Page **8**

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign found	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	38.000
b	Average of monthly cash balances	1b	19,500
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	57,500
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	57,500
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	863
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	56,637
6	Minimum investment return. Enter 5% of line 5	6	2,832
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► ☐ and do not complete this part.)	oundatio	าร
1	Minimum investment return from Part X, line 6	1	2,832
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b 0	1 1	
C	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,832
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	2,832
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	2,832
Part	XII Qualifying Distributions (see instructions)	•	
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes:		· · · · · · · · · · · · · · · · · · ·
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	73,705
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0
3	Amounts set aside for specific chantable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	73,705
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	73,705
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether	the foundation

Part	Undistributed Income (see instruction	ons)	·		
		(a) Corpus	(b) Years pnor 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:				2,832
а	Enter amount for 2018 only			0	
b	Total for pnor years: 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2019:				
a	From 2014				
b	From 2015	ļ			
c d	From 2016			1	
e	From 2018				
f	Total of lines 3a through e	92,435			
4	Qualifying distributions for 2019 from Part XII,	72,433			
•	line 4: ▶ \$				
a	Applied to 2018, but not more than line 2a .				·· ·· · · · · · · · · · · · · · · · ·
b	Applied to undistributed income of prior years (Election required—see instructions)		o		
С	Treated as distributions out of corpus (Election required—see instructions)			}	
d	Applied to 2019 distributable amount	· · · · · · · · · · · · · · · · · · ·			2,832
e	Remaining amount distributed out of corpus	70,873			
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same				
	amount must be shown in column (a).)				0
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	163,308			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has	ļ			'
	been issued, or on which the section 4942(a)	İ	1		
_	tax has been previously assessed		0		
d	Subtract line 6c from line 6b. Taxable amount—see instructions		o		
e	Undistributed income for 2018. Subtract line				
	4a from line 2a. Taxable amount-see	1			
	instructions			0	
f	Undistributed income for 2019. Subtract lines	ŀ		Į	
	4d and 5 from line 1. This amount must be distributed in 2020	,			_
_					0
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section	İ	ł		
	170(b)(1)(F) or 4942(g)(3) (Election may be	İ			
	required—see instructions)	o]	
8	Excess distributions carryover from 2014 not				
•	applied on line 5 or line 7 (see instructions) .	o			
9	Excess distributions carryover to 2020.			······	
	Subtract lines 7 and 8 from line 6a	163,308			
10	Analysis of line 9:				
а	Excess from 2015		,		ļ
b	Excess from 2016	-			ł
C	Excess from 2017 10,676	}		1	
d	Excess from 2018				
e	Excess from 2019				

_	0-PF (2019)					Page 10
Part	XIV Private Operating Founda	tions (see instru	ictions and Par	t VII-A, question 9)	
1a	If the foundation has received a ruling foundation, and the ruling is effective for					
b	Check box to indicate whether the fou				ction 1 4942(i)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net		1	Prior 3 years		
20	income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	investment return from Part X for	(a) 2019	(0) 2010	(0) 2017	(4) 20.0	
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4, for each year listed					
d	Amounts included in line 2c not used directly	1	\			
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.			1		ļ
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the		<u> </u>	4		····
•	alternative test relied upon:					
_	•					
а	"Assets" alternative test—enter:					
	(1) Value of all assets		 	 		
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)		 		\	
Ь	"Endowment" alternative test-enter 2/3					
	of minimum investment return shown in		•			ľ
	Part X, line 6, for each year listed					
С	"Support" alternative test - enter:	1				
	(1) Total support other than gross					
	investment income (interest,	İ				
	dividends, rents, payments on					
	secunties loans (section 512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt	1				
	organizations as provided in					
	section 4942(j)(3)(B)(iii)			 		
	(3) Largest amount of support from					
	an exempt organization		ļ			
_	(4) Gross investment income			<u> </u>	- I &E 000 av vo	
Part				the foundation n	ad \$5,000 or m	ore in assets at
	any time during the year-		ns.)			
1	Information Regarding Foundation	Managers:				
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have co	ontributed more t	than \$5,000). (S ee so	ection 507(d)(2).)	
NONE						
b	List any managers of the foundation	who own 10% o	r more of the sto	ock of a corporation	(or an equally la	arge portion of the
	ownership of a partnership or other e	ntity) of which the	foundation has a	a 10% or greater inte	erest.	
NONE						
2	Information Regarding Contribution	n. Grant. Gift. Loa	n. Scholarship.	etc Programs:		
~	Check here ▶ ☐ if the foundation				organizations and	i does not accept
	unsolicited requests for funds. If the					
	complete items 2a, b, c, and d. See it		gitts, grants, etc.	., to mainidadio or or	gariizationo ando	ir Garor Gorianionio,
			dunan a6 4b a mana	on to whom applied	tions should be s	ddrosod:
	The name, address, and telephone no	umber or email ad	aress of the pers	on to whom applica	uons snould be a	duressed.
SEE S	TATEMENT 3					
						
b	The form in which applications should	d be submitted and	d information and	d materials they sho	uld include:	
C	Any submission deadlines:					
d	Any restrictions or limitations on av	wards, such as b	y geographical	areas, charitable fie	elds, kinds of ins	stitutions, or other
	factors:					

Page 110

Part XV Supplementary Information (con 3 Grants and Contributions Paid During		ed for Fu	ture Payment	
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	Or Gubble Contributor	 		
American Public University 0110 Battleview Pkwy, #114, Manassas, VA 20109	COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	3,60
American University 1400 Massachusetts Avenue, NW, Wash DC 20016	COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	2,00
Arizona State University PO Box 870312, Tempe, AZ 85287-0312	COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	3,73
Arkansas State University PO Box 2640, State University, AR 72467	COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	13,08
Arkansas Tech University 105 West O St, Russellville, AR 72801	COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	2,24
Augusta University 120 15th St, Augusta, GA 30912	COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	2,70
DePaul University E Jackson Blvd, Ste 9900, Chicago, IL 60604	COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	2,50
Fellcian University 162 S Main St, Lodi, NJ 07644	COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	3,000
Kansas State University 19 Mid-Campus Dr N, Manhattan, KS 66506	COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	1,500
Kennesaw State University 185 Cobb Ave, MD 0116, Kennesaw, GA 30144	COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	3,600
esley University 9 Everett St, Cambridge, MA 02140	COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	1,00
iberty University 971 Liberty University Blvd, Lynchburg, VA 24515	COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	3,60
flarygrove College 1425 W McNichols Rd, Detroit, MI 48221	COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	2,000
Aiddle Tennesse State University 301 E. Main St, Murfreesboro, TN 37132	COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	2,00
CONTINUED ON NEXT PAGE - PAGE 11b		;		
Total			▶ 3a	· · · · · · · · · · · · · · · · · · ·
b Approved for future payment				
	,			

Amount needs address (home or business) Recipient Section Sec	orm 990-PF (2019)	<u></u>			Page 11
Name and address (home or business) any feed and commission of the property o			ad for Eu	tura Darmant	
Name and address (home or business) Amount name and address (home or business) Amount or business) Amount or business or bu			T	ture Payment	
a Paid during the year Northeastern University 160 Huntington Ave, Boston, MA 02115 161 Durinition University 160 Huntington Ave, Boston, MA 02115 162 Durinition University 160 Huntington Ave, Boston, MA 02215 163 College NA SCHOLARSHIPS FOR STUDENTS 1,1 1,2 1,2 1,3 1,4 1,4 1,4 1,4 1,4 1,4 1,4 1,4 1,4 1,4	· · · · · · · · · · · · · · · · · · ·	show any relationship to any foundation manager	status of		Amount
Northeastern University Did Dominion University 21 Affred B. Rotlins Jr. Hall, Norfolk, VA 23529 COLLEGE NA SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 4. SCHOLARSHIPS FOR STUDENTS 5. SCHOLARSHIPS FOR STUDENT		or substantial contributor			-,
1360 Huntington Ave, Boston, MA 02115 Did Dominion University 121 Alfred B. Rollins Jr. Hall, Norfolk, VA 23529 COLLEGE NA SCHOLARSHIPS FOR STUDENTS 3. Southeastern University 100 Longfellow Bird, Lakeland, FL 33801 COLLEGE NA SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 2. 100 Laving Storm May 100 Laving Scholarships For STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 4. SCHOLARSHIPS FOR STUDENTS 4. SCHOLARSHIPS FOR STUDENTS 5. Linversity of West Georgia 8. SCHOLARSHIPS FOR STUDENTS 1. SCHOLARSH					
121 Alfred B, Rollins Jr. Hall, Norfolk, VA 23529 COLLEGE NA SCHOLARSHIPS FOR STUDENTS 3. Southearn Arkansas University 1000 Longfellow Bivd, Lakeland, FL 33801 COLLEGE NA SCHOLARSHIPS FOR STUDENTS 1.1 Southern New Hampshire University 1000 Box 95009, Buston, MA 92050-5008 COLLEGE NA SCHOLARSHIPS FOR STUDENTS 2.0 SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 2.0 SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 3. SCHOLARSHIPS FOR STUDENTS 4. SCHOLARSHIPS FOR STUDENTS 5. SCHOLARSHIPS FOR STUDENTS 5. SCHOLARSHIPS FOR STUDENTS 5. SCHOLARSHIPS FOR STUDENTS 5. SCHOLARSHIPS FOR STUDENTS 5. SCHOLARSHIPS FOR STUDENTS 5. SCHOLARSHIPS FOR STUDENTS 5. SCHOLARSH	360 Huntington Ave, Boston, MA 02115	COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	2,500
COLLEGE NVA SCHOLARSHIPS FOR STUDENTS 1.1 SOuthern Arkansas University 00 E University MSC 9411, Magnolia, AR 71753 COLLEGE NVA SCHOLARSHIPS FOR STUDENTS 2.6 SOUTHERN New Hampshire University 00 E University MSC 9411, Magnolia, AR 71753 COLLEGE NVA SCHOLARSHIPS FOR STUDENTS 2.6 SOUTHERN New Hampshire University 00 Box 3709, 97109 Arbor, Mil 49283-0219 COLLEGE NVA SCHOLARSHIPS FOR STUDENTS 2.7 Joinversity of Central Missouri 0 Box 200, Warrensburg, MO 64093 University of St Francis 701 Spring SI, Fort Wayne, IN 46808 Indiversity of St Francis 2.0 Lines Strong SI, Fort Wayne, IN 46808 Indiversity of West Georgia 0.0 May 68, Carrollton, GA 30118 COLLEGE NVA SCHOLARSHIPS FOR STUDENTS 1.6 Iniversity of Wisconsin 0 Box 2000, Superior, Wi Sa880 COLLEGE NVA SCHOLARSHIPS FOR STUDENTS 1.6 SCHOLARSHIPS FOR STUDENTS		COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	3,300
COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 2.1 Southern New Hampshire University O Box 55009, Boston, MA 02205-5008 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 3.3 Spring Arbor University O Box 195, 961ng Arbor, MI 49283-0219 Liniversity of Central Missouri O Box 490, 971ng Arbor, MI 49283-0219 Liniversity of Central Missouri O Box 490, Warrensburg, MO 64093 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 2.3 Liniversity of St Francis COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 2.3 Liniversity of St Francis COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1.6 Liniversity of Urginia O Box 200, 984, Charlottesville, VA 22904 Liniversity of West Georgia Liniversity of West Georgia Liniversity of Wisconsin O Box 2000, Superior, WI 56880 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1.6 Liniversity of Wisconsin O Box 2000, Superior, WI 56880 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1.6 Liniversity of Wisconsin O Box 2000, Superior, WI 56880 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1.6 Liniversity of Wisconsin COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1.6 Liniversity of Wisconsin COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1.6 Liniversity of Wisconsin COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1.6 Liniversity of Wisconsin COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1.6 Liniversity of Wisconsin Liniversit		COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	1,800
O Box \$5008, Boston, MA 02205-5008 ipring Arbor University O Box 219, Spring Arbor, MI 49283-0219 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 2,7 Iniversity of Central Missouri O Box 219, Spring Arbor, MI 49283-0219 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 2,7 Iniversity of St Francis COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1,0 Iniversity of St Francis COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1,0 Iniversity of Winginia COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1,0 Iniversity of Winginia COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1,0 Iniversity of Wisconsin O Box 2000, Superior, WI 54880 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1,0 Iniversity of Wisconsin O Box 2000, Superior, WI 54880 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1,0 Iniversity of Wisconsin COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1,0 Iniversity of Wisconsin Iniversity SCHOLARSHIPS FOR STUDENTS 1,0 Iniversity of Wisconsin Iniversity SCHOLARSHIPS FOR STUDENTS 1,0 Iniversity of Wisconsin Iniversity SCHOLARSHIPS FOR STUDENTS 1,0 Iniversi		COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	2,000
iniversity of Central Missouri O Box 219, Spring Arbor, MI 49283-0219 Iniversity of Central Missouri O Box 800, Warrensburg, MIO 64093 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 2, Iniversity of St Francis 701 Spring St, Fort Wayne, IN 46808 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1, Carrollton, GA 30118 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1, Carrollton, GA 30118 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1, Carrollton, GA 30118 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1, Carrollton, GA 30118 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1, Carrollton, GA 30118 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1, Carrollton, GA 30118 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1, Carrollton, GA 30118 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1, Carrollton, GA 301698 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1, Carrollton, GA 31698 COLLEGE N/		COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	3,386
NA SCHOLARSHIPS FOR STUDENTS 2.inliversity of St Francis COLLEGE NA SCHOLARSHIPS FOR STUDENTS 1,0 Inliversity of West Georgia 601 Maple St, Carrollton, GA 30118 Inliversity of Wisconsin PO Box 2000, Superior, WI 54880 Valded University Valded University Valded University COLLEGE NA SCHOLARSHIPS FOR STUDENTS 1,0 SCHOLARSHIPS FOR STUDENTS 2,4 Total Delta Scholarships For Students 1,0 SCHOLARSHIPS FOR STUDENTS 1,0 SCHOLARSHI	, ,	COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	2,741
Total Total COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1,0 Approved for future payment COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1,0 N/A SCHOLARSHIPS FOR STUDENTS 1,0 N/A SCHOLARSHIPS FOR STUDENTS 1,0 N/A SCHOLARSHIPS FOR STUDENTS 1,0 N/A SCHOLARSHIPS FOR STUDENTS 1,1 SCHOLARSHIPS FOR STUDENTS 1,1 SCHOLARSHIPS FOR STUDENTS 1,1 SCHOLARSHIPS FOR STUDENTS 1,1 SCHOLARSHIPS FOR STUDENTS 1,1 SCHOLARSHIPS FOR STUDENTS 1,2 ACCOLLEGE N/A SC		COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	2,107
P.O. Box 400204, Charlottesville, VA 22904 Iniversity of West Georgia 601 Maple St, Carrollton, GA 30118 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1,6 Iniversity of Wisconsin O Box 2000, Superior, WI 54880 Iniversity of Wisconsin O Box 2000, Superior, WI 54880 Iniversity of Wisconsin O Box 2000, Superior, WI 54880 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1,6 Iddosta State University 500 N. Patterson St, Valdosta, GA 31698 Valden University 5297 Collections Ctr Dr, Chicago, IL 60693 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1,5 SCHOLARSHIPS FOR STUDENTS 1,6 SCHOLARSHIPS FOR STUDENTS 1,7 SCHOLARSHIPS FOR STUDENTS 1,7 SCHOLARSHIPS FOR STUDENTS 1,7 SCHOLARSHIPS FOR STUDENTS 1,8 SCHOLARSHIPS FOR STUDENT		COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	1,000
Mapping St. Carrollton, GA 30118 COLLEGE N/A SCHOLARSHIPS FOR STUDENTS 1.5		COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	1,000
Total Total Approved for future payment COLLEGE N/A C		COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	1,500
Total		COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	1,500
Total		COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	1,500
b Approved for future payment		COLLEGE	N/A	SCHOLARSHIPS FOR STUDENTS	2,450
b Approved for future payment					
b Approved for future payment					
	Total			▶ 3a	72,870
Total	b Approved for future payment				
Total					
IOTAI	Total	<u> </u>		▶ 3b	

Page **12** '

		VI-A Analysis of Income-Producing Ac			1=	· -	,
Ente	er gro	oss amounts unless otherwise indicated.	(a)	(b)	(c)	on 512, 513, or 514 (d)	(e) Related or exempt function income
1	Pro	ogram service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
•				<u> </u>	 		·
	a				 		·
	b		— ———				<u> </u>
	C			····			
	d				↓		
	е			- 			
	f						
		Fees and contracts from government agencies					
2	Me	mbership dues and assessments					
3	Inte	erest on savings and temporary cash investments					
4	Div	idends and interest from securities					•
5	Net	t rental income or (loss) from real estate:					
		Debt-financed property					
		Not debt-financed property					
6		t rental income or (loss) from personal property			 	· · · · · · · · · · · · · · · · · · ·	
7		ner investment income		ļ. .	 		
8		n or (loss) from sales of assets other than inventory	-		18	·	
9		t income or (loss) from special events	 	 	 '' 		
		oss profit or (loss) from sales of inventory			 		
10				· · · · · · · · · · · · · · · · · · ·	 		
11		ner revenue: a	<u></u>		 	·····	
	b			.	 		
	C						
	d			.			
	e						
12	Sut	ototal. Add columns (b), (d), and (e) tal. Add line 12, columns (b), (d), and (e)		0	1	0	0
13	Tot	tal. Add line 12, columns (b), (d), and (e)				13	
		ksheet in line 13 instructions to verify calculation					
		VI-B Relationship of Activities to the A			`		
	e No ▼	 Explain below how each activity for which accomplishment of the foundation's exempt pure 	income is repo	rtod in column	(e) of Part XVI-	A contributed in ses) (See instruc	nportantly to the
	<u> </u>		P				
			 			_,	
						 	
		· · · · · · · · · · · · · · · · · · ·					
						-, 	
					·		
			· · · · · · · · · · · · · · · · · · ·				
							 · ·
		<u> </u>					
							
			<u> </u>				
							
						 	
							
		1					
							

Part	XVII	Information Organization		sfers to and Transa	ctions and R	elationshi	ps W	ith N	oncha	ritabk	Exe	empt
1	in se			engage in any of the fol 501(c)(3) organization							Yes	No
а	Transfers from the reporting foundation to a noncharitable exempt organization of:									-		
	• •						• •		• •	1a(1)		~
b		ther assets . r transactions:			 .		• •		• •	1a(2)	-	-
	(1) S	ales of assets to	a noncharitable exer							1b(1)		~
	(2) P	urchases of asse	ets from a noncharita	ble exempt organization	on					1b(2)		~
	(3) Rental of facilities, equipment, or other assets						1b(3)		~			
	(4) Reimbursement arrangements						1b(4)		~			
	(5) L	oans or loan gua	rantees							1b(5)		>
	(6) P	erformance of se	rvices or membershi	ip or fundraising solicit	ations					1b(6)		٧
C	Shari	ng of facilities, e	quipment, mailing lis	ts, other assets, or paid	d employees .					1c		~
d (a) Line	value value	of the goods, of	ther assets, or services or sharing arrange	," complete the follow ses given by the report ement, show in column aritable exempt organization	ing foundation. (d) the value of	If the found	dation other	receir rasse	ved less ts, or se	s than ervices	fair m recei	arket ved.
(a) Line		by randon and ned	(4) (12.13 6) (10.14.1	Dividio Coloripi di Salitazioni	(a) Descri	puon or dansie		SUMION	3, 610 311	and Care	I ig ciril	
				filiated with, or related tion 501(c)(3)) or in sec						☐ Ye	s V	No
b	If "Ye	s," complete the	following schedule.									
		(a) Name of organi	zation	(b) Type of organi	zation		(c) Des	cription	of relatio	nship		
Sign				this return, including accompa	nation of which prepa	arer has any kno		r	ny knowled May the li			
Here	Signature of officer or trustee PU Date			Date -	2/2010 President			with the preparer shown below? See instructions. Yes No				
Paid		Print/Type preparer	s name	Preparer's signature		Date		Check self-en	if iployed	PTIN		
Prepa		Firm's name ▶					Firm's					
Use C	JUIA	nty Firm's name ► Firm's EIN ► Phone no.										
		i iiii s audiess		 _		i	FHORE	, 110.		001)_DE	(2010)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

THE MAHONEY FAMILY FOUNDATION, INC

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Employer identification number

82-1794837

Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt chantable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF ✓ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt chantable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II, For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number 82-1794837

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
_1	PO BOX 338 BENTONVILLE, AR 72712	\$\$50,563 	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
2	MARY MAHONEY 44 PLEASANT STREET STONEHAM, MA 02180	\$ 5,600	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
3	XEVIN JONES 3101 STONEWOOD DRIVE VIRGINIA BEACH, VA 23456	\$200	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
4	RICHARD MCGRATH 35 BELMONT STREET SOMERVILLE, MA 02143	\$ <u>100</u>	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	,	- _ \$	Person				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		- \$	Person				

Name of organization
THE MAHONEY FAMILY FOUNDATION, INC

Employer identification number 82-1794837

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.						
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
490 SHARES WALMART STOCK	\$ 50.563	2/19/2019				
. (b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
	\$					
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
	\$					
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
	\$					
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
	\$					
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received				
	(b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b)	(b) Description of noncash property given (c) FMV (or estimate) (see instructions.) (d) FMV (or estimate) (see instructions.) (e) FMV (or estimate) (see instructions.) (f) Description of noncash property given (c) FMV (or estimate) (see instructions.) (d) FMV (or estimate) (see instructions.) (e) FMV (or estimate) (see instructions.) (f) Description of noncash property given (h) Description of noncash property given (c) FMV (or estimate) (see instructions.) (d) FMV (or estimate) (see instructions.) (e) FMV (or estimate) (see instructions.)				

Name of organization
THE MAHONEY FAMILY FOUNDATION, INC

Employer identification number 82-1794837

Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)

Use duplicate copies of Part III if additional space is needed.

(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held						
Part I										
ļ										
ţ		(e) Transfe	r of aift							
1	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee									
ŀ	mansieree 3 name, address, a	III T T	110,000	ionip of danieles. to danieles						
(a) No. from Part I	(b) Purpose of gift	(c) Use of	gift	(d) Description of how gift is held						
ŀ										
Ì		(e) Transfe								
1	Transferee's name, address, a	nd ZIP + 4	Relation	ship of transferor to transferee						
(a) No										
(a) No. from Part I	(b) Purpose of gift	(c) Use of	f gift	(d) Description of how gift is held						
[
	(e) Transfer of gift									
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee									
ľ										
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held						
	<u></u>									
	(e) Transfer of gift									
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee									

MARY MAHONEY

FORM 990-PF			OTHER EXPENSES		STATEMENT 1
<u>DESCRIPTION</u>	(A) EXPENSES PER BOOKS		(B) NET INVEST- MENT INCOME	(C) ADJUSTED <u>NET INCOME</u>	(D) CHARITABLE <u>PURPOSES</u>
BANK FEES TECHNOLOGY TO FORM 990-PF, PG 1, LN 23	\$ \$ 	591 244 	\$0 \$0 \$0	\$0 \$0 \$0	\$0 \$0
THE MAHONEY FAMILY FO	UNDA	<u>.</u>		<u>82-1794837</u>	
FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10					STATEMENT 2
NAME OF CONTRIBUTOR		ADD	DRESS .		
LAWRENCE MAHONEY			D BOX 338 NTONVILLE, AR 72712		

44 PLEASANT STREET

SOMERVILLE, MA 02180

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 3

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SANDRA MAHONEY
P O BOX 338

BENTONVILLE, AR 72712

TELEPHONE NUMBER

NAME OF GRANT PROGRAM

479-903-3855

THE MAHONEY FAMILY FOUNDATION, INC.

EMAIL ADDRESS

SANDRA.MAHONEY@THEMAHONEYFAMILYFOUNDATION.ORG

FORM AND CONTENT OF APPLICATIONS

COMPLETE APPLICATION FOUND AT THE FOLLOWING WEBSITE:

HTTPS://WWW.THEMAHONEYFAMILYFOUNDATION.ORG

ANY SUBMISSION DEADLINES

INFORMATION AVAILABLE ON WEBSITE FOR DUE DATES FOR EACH SEMESTER

RESTRICTIONS AND LIMITATIONS ON AWARDS

ELIGIBLE TO WORKING TEACHERS AND NURSES WITH AT LEAST THREE YEARS OF

EXPERIENCE. MUST BE A US CITIZEN OR PERMANENT RESIDENT