2949104406907 OMB No 1545-0047 Return of Private Foundation

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

2019

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.

Open to Public Inspection

	For	calen	dar year 2019 or tax year beginning		, 2019	, and e			, 20
	Nam	e of four	ndation		•		A Employ	er identification number	er
	LEG	ACY S	OLUTIONS FOUNDATION					83-2419941	
			street (or P O box number if mail is not delivered to street address)		Room	/suite	B Telepho	ne number (see instruct	ions)
	92 (orners	stone Drive		1	99		760-477-3007	7
	City	or town,	state or province, country, and ZIP or foreign postal code				C If exemp	otion application is pend	
	Car	y, NC 2	7519					,	·
				of a former	public	charity	D 1. Fores	gn organizations, check	here ▶ 🗍
	_	000	☐ Final return ☐ Amended					•	_
			✓ Address change Name cha	nge				gn organizations meeting k here and attach compt	
	H	Check	type of organization: Section 501(c)(3) exempt p		ation	nu		e foundation status was	_
			in 4947(a)(1) nonexempt charitable trust Other tax					507(b)(1)(A), check here	
		•	narket value of all assets at J Accounting method				= 14.114		
			f year (from Part II, col. (c),				F If the to under s	undation is in a 60-mont ection 507(b)(1)(B), chec	th termination k here ► ☐
		line 16		e on cash basi	ıs.)				_
		art I				L			(d) Disbursements
			amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue expenses p			investment come	(c) Adjusted net income	for charitable purposes
			the amounts in column (a) (see instructions))	books		""	COME	Income	(cash basis only)
	_	1	Contributions, gifts, grants, etc., received (attach schedule)	12	26,400	1 1.	. 14. 14.	1 P 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	8 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		2	Check ► ☐ If the foundation is not required to attach Sch. B			15.12			190 19 3 3 3
13		3	Interest on savings and temporary cash investments					1	4 - 4 - 10 cz - 10 st
سيرلا	_	4	Dividends and interest from securities						4 6
04		5a	Gross rents						
04		b	Net rental income or (loss)	·	-7 ·	A	क जीवित्र	West Charles	
	a)	6a	Net gain or (loss) from sale of assets not on line 10	- ' '	·		11	3 384.	A 12 14 14 15 1
	Revenue	b	Gross sales price for all assets on line 6a	5	. ji	·			- C + 5 2.
	Ş	7	Capital gain net income (from Part IV, line 2)				<u>`</u>		6 3 th 3 th co.
	Re	8	Net short-term capital gain		2 4.3	٠, ٠	1.41.2		2
	_	9	Income modifications	, 1	***				4.25
		10a	Gross sales less returns and allowances	* ; ;	. 		ور ⊻ .	Million to Y A.	4 (40)
		b	Less. Cost of goods sold		- :	k" "		4.2- 31	** 6'4
		c	Gross profit or (loss) (attach schedule)	7		4,	I'' i	†	
		11	Other income (attach schedule)						
		12	Total. Add lines 1 through 11	12	26,400			0	3 3 50 1
		13	Compensation of officers, directors, trustees, etc.	1	.0,400	-		†	
	seuses	14	Other employee salaries and wages						1
S	ŝ	15	Pension plans, employee benefits				RE	CEIVED	
\mathfrak{Q}	ğ	16a	Legal fees (attach schedule)			1		300	
5	ш	b	Accounting fees (attach schedule)		1,400	1	327	2 0 2020	1,400
Z	<u>×</u>	С	Other professional fees (attach schedule)		.,		81 10	La Core	
Ш	ati	17	Interest	•			<u> </u>		1
O	str	18	Taxes (attach schedule) (see instructions)			1	00	DEN, UT	Ŭ .
ANNED GCT	Ē	19	Depreciation (attach schedule) and depletion						125 7, 10
	Εþ	20	Occupancy						·
ξЭ	Operating and Administrative Ex	21	Travel, conferences, and meetings				•		
0	nd	22	Printing and publications						
0 2021	g	23	Other expenses (attach schedule)						
2	ţį	24	Total operating and administrative expenses.						
	ra		Add lines 13 through 23		1,400			0	1,400
	be	25	Contributions, gifts, grants paid		.,	5 -7 18 C	and the give of	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	.,,,,,
	O	26	Total expenses and disbursements. Add lines 24 and 25	<u> </u>	1,400			1 0	1,400
		27	Subtract line 26 from line 12:		.,	-:	* * * * * * * * * * * * * * * * * * *	(是)	
		a	Excess of revenue over expenses and disbursements	12	25,000	1771	1 2 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	"阿克勒"的	
		b	Net investment income (if negative, enter -0-)	1 . V. O & .	24.3			O PAR "HIPP,"	Car Training winds
		1 ~	Adjusted not income (if negative enter -0-)			Ary H			1 2 3 2

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of 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	0	C	0
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶	4 % 4 1		
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶		6, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	1 1 1 1 1 1 1 1 1
		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) ▶	Bild and we be	The state of the s	
		Less: allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use	0	125,000	125,000
Assets	9	Prepaid expenses and deferred charges			
ğ	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 ▶	- 7/2 3 13 1	2 - 3E	
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments – mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶	<u> </u>	* **	<u> </u>
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	0	125,000	125,000
	17	Accounts payable and accrued expenses	<u> </u>	123,000	125,000
	18	Grants payable			
Liabilities	19	Deferred revenue			
Ξ	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable (attach schedule)			1 2
	22				
	23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)	0	(
-Ç		Foundations that follow FASB ASC 958, check here			4
Net Assets or Fund Balances		and complete lines 24, 25, 29, and 30.			
au	24	Net assets without donor restrictions			'
Ba	25	Net assets with donor restrictions			
₽		Foundations that do not follow FASB ASC 958, check here ▶ □			1 (5)
֖֚֚֚֚֚֚֚֚֚֡֝֝֞֡֡֞֞֞֞֞֞֝֡		and complete lines 26 through 30.			
ž	26	Capital stock, trust principal, or current funds	. 0	C	
S	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0	C	* * * * * * * * * * * * * * * * * * * *
set	28	Retained earnings, accumulated income, endowment, or other funds	0	125,000	
As	29	Total net assets or fund balances (see instructions)		125,000	' !
et /	30	Total liabilities and net assets/fund balances (see			
		instructions)		125,000	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			•
1		Il net assets or fund balances at beginning of year-Part II, colu		•	
		-of-year figure reported on prior year's return)			0
2		er amount from Part I, line 27a			125,000
3		er increases not included in line 2 (itemize) ▶		3	
4		lines 1, 2, and 3			125,000
5		reases not included in line 2 (itemize)		5	
6	Tota	Il net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lı	ne 29 6	125,000

		nd(s) of property sold (for example, real ease, 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						
b						
<u>c</u>	·					
d						
е_	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis xpense of sale		n or (loss) f) minus (g))
а			ļ .			
b			1			
С	_					
d						
е	Complete only for accets she	owing gain in column (h) and owned	by the foundat	uon on 12/31/69		
	Complete only for assets site		1	cess of col (i)		t (h) gain minus t less than -0-) or
_	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	, , ,	col. (j), if any		rom col (h))
a b	· · · · · · · · · · · · · · · · · · ·					
C						
d						
e						
	Capital gain net income o	rinei cabital iossi 🔞 💆 🤄	also enter in), enter -0- in		2	
;	If gain, also enter in Part	in or (loss) as defined in section I, line 8, column (c) See instru				
				1		
r op	V Qualification Undustrional use by domestic pr	der Section 4940(e) for Redivate foundations subject to the re this part blank.	uced Tax or	n Net Investment		
r op ect s th Yes	Qualification Understonal use by domestic proposed on 4940(d)(2) applies, leave the foundation liable for the "the foundation doesn't the Enter the appropriate amount of the state of the	der Section 4940(e) for Red ivate foundations subject to the	uced Tax or section 4940 utable amount o not complet	n Net Investment (a) tax on net invest t of any year in the te this part.	Income ment income.) pase period?	
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Part '		nstruc	tion	ıs)
1a .	Exempt operating foundations described in section 4940(d)(2), check here \(\bigs\) and enter "N/A" on line 1.	. •	7.	.
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)	<u> </u>		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here ▶ ✓ and enter 1% of Part I, line 27b	\$ - c	* 1	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)	<u> </u>	<u> </u>	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
3	Add lines 1 and 2			0
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			0
6	Credits/Payments:		, ·	1
а	2019 estimated tax payments and 2018 overpayment credited to 2019	* : :		- 4
b	Exempt foreign organizations—tax withheld at source		t	- 1
С	Tax paid with application for extension of time to file (Form 8868) 6c			1
d	Backup withholding erroneously withheld	<u> </u>	٠,	
7	Total credits and payments. Add lines 6a through 6d			0
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			0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10		•	0
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 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	٦١	/es	No
	participate or intervene in any political campaign?	1a		✓_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	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.			أنب
С	Did the foundation file Form 1120-POL for this year?	1c		√
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			4
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$, *	. • 🕴
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		," ·[;;`
_	on foundation managers. ► \$			لب
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.	2		-
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	اخد	<u></u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		√
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .	5		<u>✓</u>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	;		
	By language in the governing instrument, or	,	١	- 1
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that		[<u>'</u>
	conflict with the state law remain in the governing instrument?	6	✓	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	✓	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶	, ,	714	· .
_	NV		١.	· · · [
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	8b		· 1
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	 -		لـــــا
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"		1	
40	complete Part XIV	9	*	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		✓_

Part	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		1
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		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	✓	
	Website address ► n/a			
14		0-477- 2751		
45	Located at ▶ 92 Cornerstone Drive #199, Cary, NC ZIP+4 ▶ Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here	2/51	9	
15	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
10	over a bank, securities, or other financial account in a foreign country?	16		1
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶	,	n jeg	.;
Part	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.	<u>, , , , , , , , , , , , , , , , , , , </u>	Yes	No
1a	During the year, did the foundation (either directly or indirectly):			1,
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes Volume No. (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	1, 11	, ,	, , ,
	disqualified person?	int.		, .
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No			٠,٠,
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No No Transfer any income or assets to a disqualified person (or make any of either available for	30	;'v.	
	the benefit or use of a disqualified person?	<i>x</i> ' '	1.	-'
	(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			
	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	<u></u> ,	
	Organizations relying on a current notice regarding disaster assistance, check here	2	(4) P	
С	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	4	√
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)):	•	4	B , E
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines		+1 +	
	6d and 6e) for tax year(s) beginning before 2019?			•
	If "Yes," list the years ▶ 20, 20, 20, 20	· .		
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	<i>.</i>		
	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 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	F ₃	•	
За	at any time during the year?	5 5	',	•
h	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or	44.		1
b	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the	٠	,	٠.
	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	<u></u>		
	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 charitable purposes?	4a		✓
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	· · ·	<u> </u>	لنِــا
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		✓

Part	VII-B	Statements Regarding Activities	for W	hich Form	4720	May Be R	equire	ed (conti	nued)			
5a ·		year, did the foundation pay or incur				•		_			Yes	No
		on propaganda, or otherwise attempt t						Yes	✓ No		** +>	l
		nce the outcome of any specific public		-			-	_		C/X	٠,	<u>, ' ' </u>
		y or indirectly, any voter registration dr						∐ Yes	✓ No		' '	`
	(3) Provid	le a grant to an individual for travel, stu	dy, or d	other similar p	ourpose	98? -*: d		Yes	✓ No			
		le a grant to an organization other than n 4945(d)(4)(A)? See instructions		ntable, etc., (_		100		<i>'</i>]
		le for any purpose other than religious,						Yes	✓ No			.
		ses, or for the prevention of cruelty to o							√ No	3	1,5	
b	, ,	ewer is "Yes" to 5a(1)–(5), did any of the							_		• •	
		tions section 53.4945 or in a current no								5b		لـــــــــــــــــــــــــــــــــــــ
	•	ions relying on a current notice regardi		_					▶□			, 1
С	_	wer is "Yes" to question 5a(4), does t	-				the tax					
	because i	t maintained expenditure responsibility	for the	grant?				☐ Yes	☐ No		. •	ļ
	If "Yes," a	attach the statement required by Regula	ations s	ection 53.49	45-5(d)					'	•	•;
6a		undation, during the year, receive any					emiums	;			t	.,
	-							☐ Yes	✓ No		<u> </u>	_ 3
b		undation, during the year, pay premiun	ns, dire	ctly or indired	ctly, on	a personal	benefit	t contract	? .	6b		√
		6b, file Form 8870									• • • •	- 1
7a		e during the tax year, was the foundation								7b		
ь 8		did the foundation receive any proceeds ndation subject to the section 4960 tax							11.	70	· .	
0		tion or excess parachute payment(s) du							✓ No		4	`
Par		nformation About Officers, Direc									ees.	
		and Contractors	•								•	
1	List all of	ficers, directors, trustees, and found								.		
		(a) Name and address	hou	e, and average rs per week ed to position	i (lf r	mpensation not paid, iter -0-)	emplo	Contribution byee benefit erred compe	plans	(e) Expe	nse ace allowan	
Ander	son Donan											
2 Cor	nerstone D	rive #199, Cary, NC 27519	Preside	nt, 5 0		0			0			0
												
							ļ					
2	Compens "NONE."	sation of five highest-paid employee	s (oth	er than thos	se incli	uded on li	ne 1—:	see instr	uction	s). If n	one,	enter
				(b) Title, and a	verage			(d) Contrib	utions to	/-> F		
	(a) Name and	address of each employee paid more than \$50,00	0	hours per w devoted to po	veek	(c) Comper	nsation	employee plans and compen	deferred	(e) Expe	nse acc allowan	
Vone												

							-					
	·····											
Fad:		ather amplement and area \$50,000										
otal	number of	other employees paid over \$50,000 .							, ▶			

Part VIII	Information About Officers, Directors, Trustees, Foundation and Contractors (continued)		
3 Five	highest-paid independent contractors for professional services. See in	structions. If none, enter "NONI	Ξ."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		,	
Total numb	er of others receiving over \$50,000 for professional services		
Part IX-A	Summary of Direct Charitable Activities		•
List the fo	undation's four largest direct chantable activities during the tax year. Include relevant statistins and other beneficianes served, conferences convened, research papers produced, etc.	cal information such as the number of	Expenses
1 N/A			
2			

••			
3	,		
4			
Part IX-E	Summary of Program-Related Investments (see instruction	s)	
Describe t	ne two largest program-related investments made by the foundation during the tax year on line	es 1 and 2	Amount
1 N/A			
2			
All other p	ogram-related investments. See instructions		
3			
	lines 1 Abyourb 2		
1000 100	linea I through 9		1

Part	X Minimum Investment Return (All domestic foundations must complete this part. Forei	gn four	ndations,
	see instructions.)		
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	0
b	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	0
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	0
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Part	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.)	oundat	ions
1	Mınımum ınvestment return from Part X, line 6	1	0
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.)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0
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	0
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	1,400
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:	0-	
a	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 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	4	1,400
5			
c	Enter 1% of Part I, line 27b. See instructions	5	1 400
6			1,400
	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.	y wnetr	er the loundation
	quantes for the section foreign reduction of tax in those years.		- 000 DE (00.00)

•		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				N/A
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only				
b	Total for prior years: 20, 20, 20		<u> </u>		
3	Excess distributions carryover, if any, to 2019:			-	ı
а	From 2014				ı
b	From 2015				
С	From 2016		,		
d	From 2017				
е	From 2018				
f	Total of lines 3a through e				
4	Qualifying distributions for 2019 from Part XII, line 4: ▶ \$				ļ
а	Applied to 2018, but not more than line 2a .				
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2019 distributable amount				
е	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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income. Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed				
	•				
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
е	Undistributed income for 2018. Subtract line	,			ii
	4a from line 2a. Taxable amount-see				
	instructions				
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be				-
	distributed in 2020				
7	Amounts treated as distributions out of corpus				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				Í
	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.				ĺ
_	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9.				
а	Excess from 2015				ļ
b	Excess from 2016				
С	Excess from 2017			İ	
d	Excess from 2018				ļ
е	Excess from 2019				1

Form 99	00-PF (2019) LEGACY SOLUTION	ONS FOUNDA	TION, EIN 83	-2419941		Page 10
Part	XIV Private Operating Founda	tions (see instru	ctions and Part V	/II-A, question 9	9)	
1a.	If the foundation has received a ruling foundation, and the ruling is effective fo			private operating	6/24	/2018
b	Check box to indicate whether the four		-			(8) or 4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year	<u> </u>	Prior 3 years		<u> </u>
	income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	investment return from Part X for each year listed	0	0			0
b	85% of line 2a	0	0			0
C	Qualifying distributions from Part XII,				/	
	line 4, for each year listed	1,400	5,000			6,400
d	Amounts included in line 2c not used directly	1,400	0,000			0,100
-	for active conduct of exempt activities	اه	0			0
е	Qualifying distributions made directly	· · · · · · · · · · · · · · · · · · ·	0	/		<u> </u>
C	for active conduct of exempt activities.		/			
	Subtract line 2d from line 2c	1,400	5,000			6,400
3	Complete 3a, b, or c for the	1,400	3,000			0,400
3	alternative test relied upon:					
_	·					
· a	"Assets" alternative test—enter.	105 000			Ì	105.000
	(1) Value of all assets(2) Value of assets qualifying under	125,000	0			125,000
	section 4942(j)(3)(B)(i) .	105.000				105.000
L		125,000				125,000
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in					
	Part X, line 6, for each year listed		İ			
_		-				
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)(iii) .					
	(3) Largest amount of support from					
	an exempt organization					
	(A) Gross investment income .			- 4		
Part	Cuppionionian,		-	e roundation n	iad \$5,000 or m	ore in assets at
	any time during the year – Information Regarding Foundation		5.)			
1	List any managers of the foundation		ted more than 2%	of the total cont	ributions received	by the foundation
а	before the close of any tax year (but o					by the loundation
	, ,	inly in they have co	mindated more tha	in φο,σοο). (σεε 3	001 001 (0)(2).)	
	son Donan List any managers of the foundation	who own 100/ or	more of the steel	of a corporation	o (or on oqually la	ran partian of the
b	ownership of a partnership or other er					ige portion of the
	ownership of a partitership of other er	idity) of which the i	oundation has a re	070 Or greater into	ereşt.	
	Information Departing Contribution	Cuant Cift Lass	. Cabalavahin at	- Duamana		
2	Information Regarding Contribution Check here ▶ ☑ if the foundation		•			
	unsolicited requests for funds. If the fo					
	complete items 2a, b, c, and d. See in		into, granto, etc., to	o individuais or o	rgariizations under	other conditions,
			roop of the nerson	to whom applied	tions should be se	ddrooo od:
а	The name, address, and telephone nu	mber of email add	ress or the berson	to whom applica	uons snould be at	uui esseu.
	The form in which applications about	l bo cubmitted and	information and	antoriala thay at-	uld moludo:	
b	The form in which applications should	i de sudmineu anu	milormation and ff	iaterials triey SNO	aid molude:	
	Any submission deadlines:			.		
C	Tary Submission deadmies.					
d	Any restrictions or limitations on aw	ards, such as by	geographical are	as, charitable fi	elds, kinds of inst	titutions, or other
-	factors:		•		•	•

Part	XV. Supplementary Information (cont.	inued)	ad for Eur	tura Daymont	
3 .	Grants and Contributions Paid During t Recipient	If recipient is an individual, show any relationship to	Foundation		
		show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a	Name and address (home or business) Paid during the year	or substantial contributor	redipient		
	r and daming the year				
None					
	a.	1			
		,	,		
	•	~ '	,		
					İ
	•				
	•				
	Total			▶ 3	Ba
b	Approved for future payment				
None					
			:		
				•	
	Total				3b

	rt XVI			·	T=		T
≘nte	r gros	s amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	on 512, 513, or 514	1 (E)
1	Progr	ram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
	а						
	b _						
	c _						
	d _						
	е _						
	f _						
	-	ees and contracts from government agencies					
2		bership dues and assessments					
3		est on savings and temporary cash investments ends and interest from securities					
4 5		ends and interest from securities	5: 1,		, ,,		,
3		ebt-financed property	· · · · · · · · · · · · · · · · · · ·	•	 	······························	· · · · · · · · · · · · · · · · · · ·
		ot debt-financed property					
6		ental income or (loss) from personal property		-			
7		r investment income					
8	Gain	or (loss) from sales of assets other than inventory					
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory					
11		r revenue: a			<u> </u>		
	р _						
	c –				 	<u> </u>	
	d _						
12	e Subt	otal. Add columns (b), (d), and (e)	,		+		
12	Subt	otal. Add coldining (b), (d), and (e)	1	l <u></u>	1 *		
13	Tota	L Add line 12 columns (b) (d) and (e)				. 13	0
13	Tota	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation 	 ns.)		· · · · · ·	13	0
13 (See	Tota	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	ıs.)			13	0
13 (See Pa	Tota works rt XV ne No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	is.) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota works rt XV	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation 	is.) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota works rt XV ne No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	is.) Accomplishm	ent of Exemp	t Purposes		
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13 (See Pa	Tota works rt XV ne No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	is.) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota works rt XV ne No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	is.) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota works rt XV ne No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	is.) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota works rt XV ne No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	is.) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota works rt XV ne No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	is.) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota works rt XV ne No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	is.) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota works rt XV ne No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	is.) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota works rt XV ne No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	is.) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota works rt XV ne No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	is.) Accomplishm	ent of Exemp	t Purposes		
13 (See Pa	Tota works rt XV ne No.	 I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation B Relationship of Activities to the A 	is.) Accomplishm	ent of Exemp	t Purposes		

		 Organization 	ons										_	
1 a	ın se organ	ne organization of ection 501(c) (of hizations? ofers from the rep	other than s	ection 501(c)	(3) organızati	ons) or	in section	on 527,	ganızati relatıng	on descr to pol	ibed itical		Yes	No
u		ash	_									1a(1)		1
	• •					• • •	• • •		• •		•	1a(2)		<u> </u>
	• •	ther assets .					• •				•	14(2)		
b		transactions:										41 (4)		
		ales of assets to		•	-							1b(1)		√
		urchases of asse									•	1b(2)		✓
	• •	ental of facilities										1b(3)		✓
	(4) R	eimbursement ai	rrangements								•	1b(4)		✓
	(5) Lo	oans or loan gua	rantees .									1b(5)		✓
	(6) Pe	erformance of se	ervices or me	embership or fi	undraising sol	icitations						1b(6)		✓
С		ng of facilities, e										1c		✓
d	If the	answer to any	of the above	ıs "Yes," con	nplete the foll	owing sc	hedule. (Column (b) shoul	d always	s sho	w the	faır m	arket
		of the goods, o												
	value	in any transaction	on or sharing	arrangement,	show in colui	mn (d) the	e value o	f the good	ls, othe	r assets,	or se	rvices	recei	ved
(a) Line	no (l	b) Amount involved	(c) Name	e of noncharitable	exempt organizat	ion	(d) Descr	iption of tran	sfers, tran	nsactions,	and sha	anng arra	angeme	ents
		<u>-</u>												
				-										
									•					
		•										•		
				·										
							•							
								_						
													-	
-														
2a b	descr	e foundation dire ribed in section 5 s," complete the	501(c) (other	than section 5								☐ Ye	es 🗌	No
		(a) Name of organ	ization		(b) Type of org	ganization			(c) De	scription of	relatio	nship		
		r penalties of perjury, I									knowled	ige and b	oelief, it	is true,
Sign Here		ct, and complete Decli Audurn attre of officer or trus	nM. 6	et other train taxpay	7-11-20 Date	k		rive ?	•	Ton Ma	h the p	RS discuireparer s ctions [hown b	elow?
Do: -	<u>' </u>	Print/Type preparer		Prepa	rer's signature	· 1 ·		Date		Check	٦ . ١	PTIN		
Paid		Tracy Paglia		14	wey S F	1		7/2/20	20	self-empl		Pon	36688	4
Prepa			Inspiring Mov	rement. Inc		apra		-1	Firm's	EIN ►		81-511		
Use (July	Firm's address			NV 89128	- 			Phon			9-712-4		

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

2019

Employer identification number

LEGACY SOLUTIONS FOUNDATION 83-2419941 Organization type (check one): Section: Filers of: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable 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).

Name of organization

LEGACY SOLUTIONS FOUNDATION

Employer identification number

83-2419941

Part I	Contributors (see instructions). Use duplicate cop	oles of Part I if additional space is	neeaea.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Anderson Donan 92 Cornerstone Drive #199 Cary, NC 27519	\$ 126,400	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 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 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
LEGACY SOLUTIONS FOUNDATION

Employer identification number 83-2419941

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	Land	\$125,000	12/12/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Legacy Solutions Foundation EIN 83-2419941 Form 990-PF For the year ended December 31, 2019

Part VII-A, line 8b – the Nevada Attorney General does not require the Form 990-PF to be furnished.