Form 990-PF

Department of the Treasury Internal Revenue Service

SCANNED NOV 0 9 2021

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

▶ Do not enter social security numbers on this form as it may be made public ► Go to www irs gov/Form990PF for instructions and the latest information

For cale	endar year 2019 or tax year beginning		, and ending		
Name	of foundation			A Employer identification	n number
DUC	KER FAMILY FOUNDATION			83-2551018	8
Number	and street (or P O box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number	
553	35 CENTER HILL ROAD			901-568-7	777
City or	town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is	pending, check here
COI	LLIERVILLE, TN 38017				
G Chec	ck all that apply: Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organization	ns, check here
	Final return	Amended return		9	DE0()
	Address change	Name change		2 Foreign organizations in check here and attach of	computation
H Chec	ck type of organization: X Section 501(c)(3) ex	kempt private foundation		E If private foundation st	tatus was terminated
		Other taxable private founda	llion -	under section 507(b)(1	1)(A), check here
	narket value of all assets at end of year J Accounti	•	Accrual	F If the foundation is in a	a 60-month termination
		ther (specify)		under section 507(b)(1	1)(B), check here
▶ \$	1,673,125. (Part I, colun	nn (d), must be on cash basi	IS)		1 (4) = .
Part	(The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
	necessarily equal the amounts in column (a))	2,197,212.		N/A	(cash basis only)
1	, ,	2,191,212.		N/A	
2	Interest on savings and temporary	•			,
3	cash investments Dividends and interest from securities	7,806.	7,806.		STATEMENT 2
7	a Gross rents	7,000.	7,000.		DIMILIMINI 2
	Net rental income or (loss)				
	Net gain or (loss) from sale of assets not on line IU	- 10,161.			STATEMENT 1
9 0	b Gross sales price for all assets on line 6a 392,787.	10,1010		·	
Revenue 2	450415 61 1110 44		257,749.		
æ 8			,		
9	Income modifications				
10	Gross sales less returns and allowances				j
	b Less Cost of goods sold				ļ
	c Gross profit or (loss)				
11	Other income				·]
12	Total Add lines 1 through 11	2,164,557.	265,555.		
13	Compensation of officers, directors, trustees, etc	0.	<u> </u>		0.
14	, ,			· · · · · -	
15					
Ö	a Legal fees	TEN/ED			
		CEIVED		-	
- Щ	c Other professional fees	101			
9 17 ≟ 10	Interest AUG	0 5 2020 S			
17 18 19	1 L	<u></u>			1
19 19 20		DEN, UT			'
Admin 20					-
				-	
<u></u>				-	
1 24	· ·				<u> </u>
Operating 25	expenses Add lines 13 through 23	0.	0.		0.
리 ₂₅	Contributions, gifts, grants paid	356,000.			356,000.
- 1	Total expenses and disbursements				
-0	Add lines 24 and 25	356,000.	0.		356,000.
27					,
- 1	Excess of revenue over expenses and disbursements	1,808,557.]
	Net investment income (il negative, enter -u-)		265,555.		
	C Adjusted net income (if negative, enter -0-)			N/A	

LHA For Paperwork Reduction Act Notice, see instructions

Form **990-PF** (2019)

Par	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
Par	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2			44,593.	44,593.
2	Accounts receivable			
"	Less allowance for doubtful accounts		······································	
١.				
4				······································
	Less allowance for doubtful accounts	-	-	
5				
6	· · · · · ·			
	disqualified persons			
7	Other notes and loans receivable			
	Less allowance for doubtful accounts			
8 <u>اي</u>	Inventories for sale or use			
Assets 6 6	Prepaid expenses and deferred charges			
₹ 10	a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 3	0.	1,763,964.	1,628,532.
	c Investments - corporate bonds			
- 1	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
12				
13				
14		"-		,
''	Less accumulated depreciation			
15				
1 -	Total assets (to be completed by all filers - see the	-		
'0	` ` `	0.	1,808,557.	1,673,125.
-	Instructions Also, see page 1, item I)		1,000,337.	1,013,123.
17	· · · · · · · · · · · · · · · · · · ·			<u>-</u>
18	Grants payable			
د ا د ا	Deferred revenue			
Liabilities 52 02 02 02 03 03 03 03 03 03 03 03 03 03 03 03 03	Fig. 1			1
[21	Mortgages and other notes payable		-	
7 22	Other liabilities (describe			
		^	0	
23	Total liabilities (add lines 17 through 22)	0.	0.	I
	Foundations that follow FASB ASC 958, check here			Ì
S .	and complete lines 24, 25, 29, and 30			1
일 24	Net assets without donor restrictions			
Balances 25				
	Foundations that do not follow FASB ASC 958, check here			
ᇍ	and complete lines 26 through 30			1
ㅎ 26		0.	0.	
왕 27	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.]
SS 28	Retained earnings, accumulated income, endowment, or other funds	0.	1,808,557.	<u> </u>
Net Assets or Fund 68 2 2 8 80 2 2 8	Total net assets or fund balances `	0.	1,808,557.	·
			1 000 555	
30	Total liabilities and net assets/fund balances	0.	1,808,557.	
Parl	Analysis of Changes in Net Assets or Fund Ba	lances		
	al net assets or fund balances at beginning of year - Part II, column (a), line 2	00		
	al net assets or fund balances at beginning of year - Part II, column (a), line 2 ist agree with end-of-year figure reported on prior year's return)		1	0.
•	er amount from Part I, line 27a		2	1,808,557.
	er increases not included in line 2 (itemize)		3	0.
	I lines 1, 2, and 3	· · · · -	3	1,808,557.
	reases not included in line 2 (itemize)		5	0.
	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (h) line 20	6	1,808,557.
6 Tot	ar net assets or fund balances at end of year find 4 fillings line 3) - Part II, Col	unin (u), mic 23		Form 990-PF (2019)

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	Losses for Tax on In			14.	Have accessed		
(a) List and describe the 2-story brick wareh	kind(s) of property sold (for exa buse, or common stock, 200 sh	mple, real esta s MLC Co)	te,	l P	How acquired - Purchase - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED	SECURITIES				D	09/01/05	12/16/19
b PUBLICLY TRADED	SECURITIES				D	06/08/09	12/16/19
c							
<u>d</u>				-			-
e		T		<u> </u>			<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (los ((e) plus (f) minus	(g))
a 1,964.			57				1,394 256,355
b 390,823.			134,46	8.			256,355
C	<u> </u>	<u> </u>		-	•		
d							
Complete only for assets showing ga	un in column (h) and owned by	the foundation	on 12/31/60			//) Counc (Col. (b) co	n minus
Complete only for assets showing ga						(I) Gains (Col (h) gainsol (k), but not less the	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any			Losses (from col	
			(,,, -)				1,394
a b		 		\dashv			256,355
		<u> </u>		\neg			200,000
c d		<u> </u>				- ·	
e							
<u> </u>	C If any also ente	r in Dort I. lino	7	7			
Capital gain not income or (net capital	lloss) $ \begin{cases} \text{If gain, also enter -} \\ \text{If (loss), enter -} \end{cases} $	o- in Part I, line	7	<i>}</i>	2		257,749
Net short-term capital gain or (loss) a		nd (6)		٦			
If gain, also enter in Part I, line 8, colu	ımn (c)			 		N/Z	Δ
If (loss), enter -0- in Part I, line 8 Part V Qualification Und	er Section 4940(e) for	Reduced	Tax on Net	Inve	stment Inc		
Vas the foundation liable for the section "Yes," the foundation doesn't qualify un				od?			Yes X No
Enter the appropriate amount in each	column for each year, see the i	nstructions bef	ore making any er	ntries.			
(a) Base period years Calendar year (or tax year beginning ir	(b) Adjusted qualifying dis	stributions	Net value of no	(c) nchai	ritable-use asset	s Distr	(d) ibution ratio ivided by col (c))
2018		0.				0.	.000000
2017							
2016							
2015							
2014	<u>. </u>	_					
? Total of line 1, column (d)						2	.000000
Average distribution ratio for the 5-ye	ar base period - divide the total	on line 2 by 5	O, or by the numbe	er of y	ears/		
the foundation has been in existence	f less than 5 years					3	.00000
Enter the net value of noncharitable-u	se assets for 2019 from Part X,	line 5				4	731,067
5 Multiply line 4 by line 3					5	0	
6 Enter 1% of net investment income (1% of Part I, line 27b)					6	2,656	
·						7	2,656
Add lines 5 and 6							
Enter qualifying distributions from Pa	•					8	356,000
If line 8 is equal to or greater than line See the Part VI instructions	e 7, check the box in Part VI, line	e 1b, and comp	olete that part usin	g a 1°	% tax rate.		
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	3	,		
Forn	n 990-PF (2019) DUCKER FAMILY FOUNDATION 83-25	51018	Pa	age 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec	e instruc	tions)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			\neg
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%		2,65	6.
	of Part I, line 27b			i
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.
3	Add lines 1 and 2		2,65	6.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			<u>0.</u>
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		2,65	<u>6.</u>
6	Credits/Payments			- 1
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 0.			-
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
	Backup withholding erroneously withheld 6d 0.			
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 8			<u>0.</u>
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		2,65	<u>b.</u>
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11 Int VII-A Statements Regarding Activities			
		$\neg \neg$	Yes	Ño
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	 		X
	any political campaign? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1a 1b		$\frac{\mathbf{x}}{\mathbf{x}}$
U	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			Į
_	Did the foundation file Form 1120-POL for this year?	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.	"		_
	(1) On the foundation \blacktriangleright \$ 0. (2) On foundation managers \blacktriangleright \$ 0.		- 1	- (
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			- (
	managers ► \$ 0.		1	- 1
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		x
	If "Yes," attach a detailed description of the activities.			<u> </u>
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		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
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?	5		<u>X</u>
	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.			1
	By language in the governing instrument, or			- {
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		-	
	remain in the governing instrument?	6	X	
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	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions	—		- 1
	TN	- I I		İ
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)	1	1	1

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of each state as required by General Instruction G2 If "No," attach explanation

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes," complete Part XIV

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

		Yes	No
	11		_X
i			
	12		Х
	13	X	

Telephone no ▶901-568-7777

Located at ▶ 5535 CENTER HILL ROAD, COLLIERVILLE, TN

Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here
and enter the amount of tax-exempt interest received or accrued during the year

At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?

See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country ▶

Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required

Yes No.

	loreign country	1 1		
a	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
a	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?		- 1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?		- 1	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	.	ł	
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	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 N/A	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		X
?	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))		- 1	
a	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines		ļ	
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		İ	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		·	
	>			
a	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) N/A	3b		
а	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X

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Form 990-PF (2019) DUCKER FAMILY FOUNDATION	_		83-255103	L 8	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	ued)		
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	1 4945(e))?	Y6	es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire				
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	7	Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? See instructions		Ye	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo				[
the prevention of cruelty to children or animals?			es 🗶 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations			
section 53 4945 or in a current notice regarding disaster assistance? See instru		N/A	ib		
Organizations relying on a current notice regarding disaster assistance, check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr					
expenditure responsibility for the grant?	IX	I/A Ye	es L No	.	
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 on		es X No		
a personal benefit contract?	araanal hanafit aantrant?	16		ib —	-x -
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u> </u>	טט	<u> </u>
If "Yes" to 6b, file Form 8870	holter transaction?	□ v.	es X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s b if "Yes," did the foundation receive any proceeds or have any net income attributed.	_	1		′ь	 '
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$				-	
excess parachute payment(s) during the year?	1,000,000 in remuneration of		es X No		
Part VIII Information About Officers, Directors, Truste	es. Foundation Mar		,3 <u> 22 </u> 140		<u> </u>
Paid Employees, and Contractors		go.o,g,			
1 List all officers, directors, trustees, and foundation managers and the	neir compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Exp	ense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	ačcount allowa	
MICHAEL L. DUCKER	PRESIDENT/DIR	ECTOR			
5535 CENTER HILL ROAD					
COLLIERVILLE, TN 38017	1.00	0.	0.		<u>0.</u>
	SECRETARY/DIR	ECTOR			
5535 CENTER HILL ROAD					_
COLLIERVILLE, TN 38017	1.00	0.	0.		0.
	DIRECTOR				
5535 CENTER HILL ROAD	4 00		_		•
COLLIERVILLE, TN 38017	1.00	0.	0.		<u>0.</u>
2 Compensation of five highest-paid employees (other than those incl	luded on line 1) If none	nter "NONE "	L		
2 Compensation of tive ingress-paid employees fother than those inc	(b) Title, and average	INCHE! INCHE!	(d) Contributions to	(e) Exp	ense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	account allowa	, other
NONE	devoted to position	-	compensation	anowa	11063
NONE					
		1			
Total number of other employees paid over \$50,000		•	▶		0
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	
Total number of others receiving over \$50,000 for professional services	▶ 0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1N/A	
2	
3	
Part IX-B Summary of Program-Related Investments	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1N/A	
2	
All other program-related investments. See instructions	
3	
	0.
Total. Add lines 1 through 3	Form 990-PF (2019)
	101111 000 1 1 (2013)

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

ĮP.	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, see	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	740,3 <u>6</u> 7.
b	Average of monthly cash balances	1b	1,833.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	742,200.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	742,200.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	11,133.
5	Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here and on Part V, line 4	5	731,067.
6	Minimum investment return Enter 5% of line 5	6	36,553.
IP.	artix Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar	nd certain	
	foreign organizations, check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	36,553.
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)		
C	Add lines 2a and 2b	2c	2,656.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	33,897.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	33,897.
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	33,897.
P	artiXIII Qualifying Distributions (see instructions)		-
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	- 12 V	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	356,000.
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	
3	Amounts set aside for specific charitable 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	356,000.

Adjusted qualifying distributions Subtract line 5 from line 4

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

Form **990-PF** (2019)

2,656.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) ' 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,				
line 7				33,897.
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014	Į			
b From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$ 356,000.			_	
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount				33,897.
e Remaining amount distributed out of corpus	322,103.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	322,103.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2018 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2019 Subtract				
lines 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 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.		-	
8 Excess distributions carryover from 2014				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020				
Subtract lines 7 and 8 from line 6a	322,103.			
0 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019 322,103.				- 000 PE

Form 990-PF (2019) DUCKER	FAMILY FOUND	DATION		83-25	51018 Page 10
Part XIV Private Operating F	oundations (see ins	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo	or 2019, enter the date of t	he ruling	.		
b Check box to indicate whether the foun	d <u>ation is a private operatin</u>	g foundation described	in section	4942(j)(3) or 49	142(J)(8)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
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					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					•
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the			-	· · · · · · · · · · · · · · · · · · ·	
alternative test relied upon:					
"Assets" alternative test - enter (1) Value of all assets					
` '					<u>-</u>
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6, for each year					
listed					
c "Support" alternative test - enter.					
(1) Total support other than gross					
investment income (interest,	1				
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 4842(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization		i	j		
(4) Gross investment income	-				
Part-XV Supplementary Info	rmation (Complet	te this part only i	if the foundation	n had \$5,000 or moi	e in assets
at any time during t	he year-see instru	uctions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh		than 2% of the total cont	ributions received by th	he foundation before the clos	e of any tax
year (but only if they have contributed i	nore than \$5,000) (See se	ection 507(d)(2))			
MICHAEL L. DUCKER					
b List any managers of the foundation wh	io own 10% or more of the	stock of a corporation	(or an equally large por	tion of the ownership of a pa	rtnership or
other entity) of which the foundation ha			, , , , , , , , , , , , , , , , , , , ,		
NONE					
2 Information Regarding Contribut	ion, Grant, Gıft, Loan,	Scholarship, etc., Pr	ograms:		
Check here X if the foundation				s not accept unsolicited requi	ests for funds If
the foundation makes gifts, grants, etc	•	•	•		
a The name, address, and telephone num	ber or email address of th	e person to whom applic	ations should be addre	essed:	
2					
	···-				
b The form in which applications should l	e submitted and informat	ion and materials they s	hould include		
c Any submission deadlines:					
d Any contrictions or limitations on account	le cuch ac hu agographica	l areas charitable fields	kinds of institutions of	or other factors	
d Any restrictions or limitations on award	s, such as by geographica	ii ai cas, ciiai ildule lielus,	, kinus or institutions, t	סו טנווטו ומטנטוס	

Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation status of recipient show any relationship to Amount any foundation manager or substantial contributor Name and address (home or business) a Paid during the year BELLEVUE BAPTIST CHURCH 501(C)(3) RELIGIOUS 2000 APPLING RD 100,000. CORDOVA, TN 38016 501(C)(3) EDUCATION CEO FORUM 15475 GLENEAGLE DR COLORADO SPRINGS, CO 80921 15,000. CRU MINISTRIES 501(C)(3) RELIGIOUS 100 LAKE HART DRIVE 1,000. ORLANDO, FL 32832 DESIRE STREET MINISTRIES 501(C)(3) RELIGIOUS 600 MEANS ST NW, STE 110 ATLANTA, GA 30318 10,000. 501(C)(3) RELIGIOUS EAST-WEST MINISTRIES 2001 W PLANO PKWY, STE 3000 10,000. PLANO, TX 75075 356,000. SEE CONTINUATION SHEET(S) **▶** 3a Total b Approved for future payment NONE ٥. **▶** 3b Total

101111 000 11 (E010)	DOCKLIK TIMILDI I	0011D111 1 011		
Part XVI-A	Analysis of Income-Produci	ng Activities		
Enter aress amounts in	inless otherwise indicated	Unrelated business income	Excluded by section 512, 513, or 514	(e)

Enter gross amounts unless otherwise indicated	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue	code				
a			-	<u> </u>	
b					
c					
d			ļ <u>.</u>		
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities	1		14	7,806.	
5 Net rental income or (loss) from real estate;				,	
a Debt-financed property					· · · · · · · · · · · · · · · · · ·
	_				
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			<u> </u>		
7 Other investment income			-		
8 Gain or (loss) from sales of assets other			1.0	40.461	
than inventory			18	-40,461.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0.		-32,655.	0. -32,655.
13 Total Add line 12, columns (b), (d), and (e)		•		13	-32,655.
(See worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities to	the Acco	molishment of Eve	mnt	Durnoses	
relationship of Activities to	tile Acco	inpusinnent of Exe	mpt	Turposes	
Line No Explain below how each activity for which incom	e is reported	in column (e) of Part XVI-A	contrib	outed importantly to the accom	plishment of
the foundation's exempt purposes (other than by	y providing fui	nds for such purposes)			
N/A					
		··			
					
		-			······································

Firm's address ► 6075 POPLAR AVENUE, SUITE 350

MEMPHIS, TN 38119

		R FAMILY	FOUNDA	TION					83	- <u>255101</u>	8 Pa	age 13
Part X	VII Information Re		sfers to a	nd Tra	insac	ctions	and	Relations	nips With Nor	ncharitable		
	Exempt Organ	nizations							<u> </u>			
1 Did 1	thę organization directly or indi	irectly engage in any	of the following	ng with ar	ny othe	r organiza	ation	described in sec	tion 501(c)		Yes	No
(oth	er than section 501(c)(3) organ	nizations) or in section	on 527, relating	g to politi	ical org	anizations	s?			1		
a Tran	sfers from the reporting found	ation to a noncharita	ble exempt or	ganızatıor	n of:					l	_	
(1)	Cash									1a(n .	X
(2)	Other assets									1a(2)	X
b Othe	r transactions:										_	
(1)	Sales of assets to a noncharita	ible exempt organiza	tion							1b(1)	Х
(2)	Purchases of assets from a no	ncharitable exempt (organization							1b(2)	Х
(3)	Rental of facilities, equipment,	or other assets								1b(3	3)	Х
(4)	Reimbursement arrangements	1								1b(-	s) [Х
(5)	Loans or loan guarantees									1b(5)	Х
(6)	Performance of services or me	embership or fundrai	ising solicitatio	ns						1b(s) [Х
c Shar	ring of facilities, equipment, ma	ailing lists, other assi	ets, or paid em	ployees						10		Х
d If the	e answer to any of the above is	"Yes," complete the	following sche	dule. Col	lumn (i	b) should	alway	ys show the fair	market value of the	goods, other a	ssets,	
	ervices given by the reporting f											
colu	mn (d) the value of the goods,	other assets, or serv	rices received.					-				
a) Line no	(b) Amount involved	(c) Name o	f noncharitable	e exempt	organi	zation		(d) Description	on of transfers, transact	ions, and sharing	rrangemer	nts
	-		N/A								•	
											·	
							ĺ					
		1										
		,										
									•			
									_			
												-
												•
2a Is the	e foundation directly or indirect	tly affiliated with, or	related to, one	or more	tax-exe	empt orga	nızatı	ions described				
	ction 501(c) (other than sectio									Ye	s X	No
	es," complete the following sch											
	(a) Name of org			(b) Typ	e of or	ganization	n		(c) Description of	relationship		
	N/A											
										•		
	Under penalties of perjury, I declare t	hat I have examined this	return, including	accompan	ying sch	nedules and	stater	nents, and to the b	est of my knowledge	May the IRS	discuss t	nie I
Sign	and belief, it is true, correct, and com	nplete Declaration of pre	parer (other than	taxpayer) ı	s based	on all inform	nation	of which preparer I	nas any knowledge	return with	the prepare	er
Here	M Wust	er		lt	74	rlu-		PRESI	DENT	XY		
	Signature of officer or trustee	ļ		Di	ate	1		Title				
4	Print/Type preparer's na	ime	Preparer's sa	gnature		7	D	ate	Check If	PTIN		
)			self- employed			
Paid	JEFFREY R.	WILLS	JEFFR:	EY R	. W	ILLS	7	//11/20		P0037	0767	
Prepai									Firm's EIN ► 8			
Use O	nly		_							_		

DUCKER FAMILY FOUNDATION

3 Grants and Contributions Paid During the Ye	ar (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	COMMIDATION	
FAMILY FIRST		501(C)(3)	HEALTH/WELFARE	
5509 W GRAY ST, STE 100 PAMPA, FL 33609				25,00
FELLOWSHIP OF CHRISTIAN ATHLETES		501(C)(3)	RELIGIOUS	
8701 LEEDS ROAD KANSAS CITY, MO 64129				35,00
FELLOWSHIP OF CHRISTIAN ATHLETES (OLE MISS)		501(C)(3)	RELIGIOUS	
3701 LEEDS ROAD KANSAS CITY, MO 64129				25,00
MEMPHIS CHILD ADVOCACY CENTER		501(C)(3)	HEALTH/WELFARE	
1085 POPLAR AVE MEMPHIS, TN 38105				10,00
DLE MISS ATHLETIC FOUNDATION 100 COLISEUM DR		501(C)(3)	EDUCATION	
DXFORD, MS 38655				25,00
RAVI ZACHARIAS INTERNATIONAL MINISTRIES	,	501(C)(3)	RELIGIOUS	
3755 MANSELL RD ALPHARETTA, GA 30022				100,00

Schedule B

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

Department of the Treasury Internal Revenue Service

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

Name of the organization

DUCKER FAMILY FOUNDATION

Employer identification number

83-2551018

Organiza	tion type (check o	ne)
Filers of:		Section:
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	X 501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
•	· ·	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions
General F	Rule	
	•	filing Form 990, 990-EZ, or 990 PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special F	lules	
	sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 r, 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, line 1 Complete Parts I and II
,	ear, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the ty to children or animals. Complete Parts I, II, and III
	rear, contributions s checked, enter h ourpose Don't con	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., inplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year.
but it mus	st answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 be filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

DUCKER FAMILY FOUNDATION

83-2551018

Part I	Contributors (see instructions) Use duplicate copies of Part I if ac	dditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	N/A	\$2,197,212.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Oncash 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 Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occupate Part II for noncash contributions)

Name of organization

Employer identification number

DUCKER FAMILY FOUNDATION

83-2551018

Part II	Noncash Property (see instructions) Use duplicate copies of P		2331016
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	4,000 SHARES FDX		
_1		\$\ \$\$	02/04/19
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	9,170 SHARES FDX		
		\$\s1,475,132.	12/02/19
(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

٦.		4
ıа	ae	7

Name of o	rganization		Employer identification nui	mber
DUCKE	R FAMILY FOUNDATION		83-2551018	
Part III	Exclusively religious, charitable, etc., contribution from any one contributor Complete columns (a) completing Part III, enter the total of exclusively religious, of	through (e) and the following line er haritable, etc., contributions of \$1,000 or	section 501(c)(7), (8), or (10) that total more than \$1,000 for the	
(a) No.	Use duplicate copies of Part III if additional s	pace is needed	· · · · · · · · · · · · · · · · · · ·	
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	I	(e) Transfer of git	ift	
	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee	
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
		(e) Transfer of git	ft	
	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee	
(a) Ño. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
		(e) Transfer of gif		
	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
		(e) Transfer of gif	ft	
}	Transferee's name, address, and	1 ZIP + 4	Relationship of transferor to transferee	

FORM 990-PF	GAIN OR	(LOSS) F	ROM SA	LE O	F ASSE	TS		STA	ATEMENT 1
(A) DESCRIPTION OF PR	ROPERTY				MANN ACQUI		DA ACQU	TE IRED	DATE SOLD
PUBLICLY TRADED S	SECURITIES				DONAT	ED	09/0	1/05	12/16/19
(B)		2)	(D		_	(E)			(F)
GROSS SALES PR		JE AT OF ACQ.	EXPEN SA			EPRE	c.	GAIN	OR LOSS
	1,964.	2,166.			0.		0.	· · · ·	-202.
(A) DESCRIPTION OF PR	ROPERTY				MANN ACQUI		DA ACQU	TE IRED	DATE SOLD
PUBLICLY TRADED S	SECURITIES			•	DONAT	ED	06/0	8/09	12/16/19
(B) GROSS SALES PR	VALU	C) JE AT OF ACQ.	(D EXPEN SA	SE O		(E) EPRE	a	CATN	(F)
		431,082.			0.		0.		-40,259.
CAPITAL GAINS DIV									-40,461.
FORM 990-PF	DIVIDENDS	S AND INT	EREST	FROM	SECUR	ITIE	S	STA	ATEMENT 2
	GROSS	CAPIT GAIN DIVIDE	S	REV	A) ENUE BOOKS		(B) INVE I INC		(C) ADJUSTED NET INCOME
SOURCE	AMOUNT								
SOURCE DIVIDENDS AND INTEREST FROM SECURITIES	7,806		0.		7,806.		7,8	06.	

FORM '990-PF	CORPORATE STOCK		STATEMENT 3
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CHARLES SCHWAB - FEDI	EX CORP	1,763,964.	1,628,532.
TOTAL TO FORM 990-PF	PART II, LINE 10B	1,763,964.	1,628,532.
FORM 990-PF	LIST OF SUBSTANTIAL CONTRIE PART VII-A, LINE 10	BUTORS	STATEMENT 4
FORM 990-PF NAME OF CONTRIBUTOR		BUTORS	STATEMENT 4

Name Ducker Family Foundation FEIN *****1018 Tax Year 2019

Reject Date 07/15/2020

Reject(s) applied to this return are as follows

Form 990-PF Code F990PF-905-01 Taxing Authority Federal

Explanation

If Form 990-PF, Item G, "initial return of a former public charity" checkbox is not checked, then the EIN in the return must have been established as a private foundation return filer in the IRS e-file database

Solution

Contact IRS help desk at 866 255-0654 to resolve database issues

Form 990PF Code SB-F990-015 Taxing Authority Federal

Explanation

If Schedule B (Form 990,990-EZ, 990-PF), Part I col (b) "Address" contains a value " AddressNotApplicableCd", then 'Organization501cInd" checkbox must be checked and 'Organization501cTypeTxt' must not equal "3"

Solution

Worksheet View

Enter a "3" in General > Basic data > Line 26 if you are filing a 990PF return

Form 990PF Code SB-F990-014 Taxing Authority Federal

Explanation

If Schedule B (Form 990,990-Z, 990-PF), Part I col (b) "Name" contains a value " NameNotApplicableCd", then 'Organization501cInd" checkbox must be checked and 'Organization501cTypeTxt" must not equal "3"

Solution

Worksheet View

Enter a "3" in General > Basic data > Line 26 if you are filing a 990PF return

Form 990-PF Code R0000-937-01 Taxing Authority Federal

Explanation

If Form 990-PF, Item G, "Initial return of a former public charity" is not checked, then the type of return indicated in the Return Header must match the return type established with the IRS for the EIN

Solution

, Interview Form

Go to Interview Form PF-1 and make an entry in Box 45 if the organization is filing its first Form 900-PF due to loss of public support status. Otherwise contact IRS help desk

Worksheet View

Go to the Form 990-PF worksheet, General Information section and make an entry in the "Filing first Form 990-PF due to loss of public support status. Otherwise contact IRS help desk