EXTENDED TO NOVEMBER 16, 2020

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.

				irs.gov/Form990PF for inst				Open to Public Inspection
		ndar year 2019 or tax year beginning	NOV	18, 2019	, and en	ding	DEC 31, 201	
		f foundation					A Employer identificati	on number
		SMITH BROTHERS FAM	ТГХ				84-372636	_
	FOUNDATION , INC . Number and street (or P O box number if mail is not delivered to street address) Room/suite							<u>6</u>
			B Telephone number					
_		7 NELSON MILLER PAR	207	859-494-0	523			
		own, state or province, country, and ZIP or t		C If exemption application is	pending, check here			
_ <u>L</u>	OU	ISVILLE, KY 40223]	
G C	heck	call that apply. 🖳 Initial return		Initial return of a fo	ormer public ch	arity	D 1. Foreign organizatio	ns, check here
		Final return		Amended return			2 Consum avandantions	manting the OFN/ test
		Address change		Name change			Foreign organizations r check here and attach	computation
H C	heck	k type of organization: 🔣 Section 501	(c) <u>(3)</u> e	rempt private foundation		$\aleph I$	E If private foundation s	tatus was terminated
	_ Se	ection 4947(a)(1) nonexempt charitable trus		Other taxable private founda	ation	<u> </u>	under section 507(b)(1)(A), check here
I Fa	ır ma	arket value of all assets at end of year J /	\ccount	ng method. 🔼 Cash	Accru	al	F If the foundation is in	a 60-month termination
(fr	om f	Part II, col. (c), line 16)		ther (specify)			under section 507(b)(1)(B), check here
	\$	34,632,048. (Par	l, colur	nn (d), must be on cash bas	IS.)			
Pa	<u>rt l</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) in	av not	(a) Revenue and	(b) Net inv	estment	(c) Adjusted net	(d) Disbursements
		necessarily equal the amounts in column (a))	ay not	expenses per books	incor	ne	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received		32,825,830.			N/A	
•	2	Check It the foundation is not required to attach	Sch B					<u> </u>
	3	Interest on savings and temporary cash investments						
	4	Dividends and interest from securities		60.		60.		STATEMENT 1
	5a	Gross rents						
	b	Net rental income or (loss)						1
41	6a	Net gain or (loss) from sale of assets not on line 10		3,888,611.				i
Revenue	b	Gross sales price for all assets on line 6a 5,038,3	31.	·				
eve		Capital gain net income (from Part IV, line 2)			3,888	3,611.		
č	8	Net short-term capital gain						1
	9	Income modifications						
	10a	Gross sales less returns and allowances						
		Less Cost of goods sold						i
	C	Gross profit or (loss)						
	11	Other income						
	12	Total. Add lines 1 through 11		36,714,501.	3,888	671.		
	13	Compensation of officers, directors, trustees, etc		0.		0.		0.
	14	Other employee salaries and wages						
	15	Pension plans, employee benefits						
nses	16a	Legal fees STMT	2	5,285.		0.		0.
ë		Accounting fees		- · ·				
Expe		Other professional fees				REC	EIVED	
ě	17	Interest			m			
り	18	Taxes			809	NOV	() U	1
ng and Administra	19	Depreciation and depletion			52	NOV	[3] 2020 	
> 퉅	20	Occupancy						
\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		Travel, conferences, and meetings				OGD	FN III	
	22	Printing and publications			<u> </u>	<u>vvu</u>		
	23	Other expenses STMT	3	109.		0.		0.
ا ڪ		Total operating and administrative						
Opera		expenses Add lines 13 through 23		5,394.		0.		0.
· 0	25	Contributions, gifts, grants paid	,	50,000.				50,000.
.		Total expenses and disbursements.						
٠	-	Add lines 24 and 25		55,394.		0.		50,000.
	27	Subtract line 26 from line 12:						1
; [Excess of revenue over expenses and disbursemen	ts	36,659,107.				
		Net investment income (if negative, enter -0-)		, , , , , , , , ,	3,888	,671.		†
		Adjusted net income (if negative, enter -0-)					N/A	†
92350	_	-17-19 LHA For Paperwork Reduction A	ct Notice	e, see instructions.	•		· · · · · · · · · · · · · · · · · · ·	Form 990-PF (2019)

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Fo	rm 99	90-PF (2019) FOUNDATION, INC.		84-	3726366 Page 2
<u></u>	art	Balance Sheets Affached schedules and amounts in the description	Beginning of year	End (of year
<u></u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
		Savings and temporary cash investments		1,478,963.	1,478,963.
	3	Accounts receivable >			
		Less; allowance for doubtful accounts			
	4	Pledges receivable ►	<u> </u>		<u></u>
		Less: allowance for doubtful accounts			<u> </u>
	5	Grants receivable			_
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable	-		
		Less; allowance for doubtful accounts			
ş	8	Inventories for sale or use		·	
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock	-		
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 4	0.	33,153,085.	33,153,085.
	14	Land, buildings, and equipment; basis			
		Less accumulated depreciation			
	15	Other assets (describe)			
	1	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	0.	34,632,048.	34,632,048.
	17	Accounts payable and accrued expenses			
		Grants payable			
s	19	Deferred revenue			i
Liabilities	l	Loans from officers, directors, trustees, and other disqualified persons		_	i
Ē	21				·
ت		Other liabilities (describe)	-		
	23	Total liabilities (add lines 17 through 22)	0.	0.	1
_		Foundations that follow FASB ASC 958, check here	-		`-
Ś		and complete lines 24, 25, 29, and 30.			
ဥ	24	Net assets without donor restrictions			'
ajai	ı	Net assets with donor restrictions			١,٠
Net Assets or Fund Balances		Foundations that do not follow FASB ASC 958, check here			E.
Ē		and complete lines 26 through 30.			. 1
ř	26	Capital stock, trust principal, or current funds	0.	0.	-
ţ	27	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
SSe	28	Retained earnings, accumulated income, endowment, or other funds	0.	34,632,048.	
Ϋ́	29	Total net assets or fund balances	0.	34,632,048.	
ž					
	30	Total liabilities and net assets/fund balances	0.	34,632,048.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		<u> </u>
=			20	· · · · · · · · · · · · · · · · · · ·	·
		net assets or fund balances at beginning of year - Part II, column (a), line	43		<u></u>
	•	at agree with end-of-year figure reported on prior year's return)	1	36,659,107.	
		amount from Part I, line 27a		2	
		r increases not included in line 2 (itemize)	 "	3	36,659,107.
		lines 1, 2, and 3 eases not included in line 2 (itemize) ▶ UNREALIZED GAI	M//T.OGG\	4	2,027,059.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		5	34,632,048.
<u>6</u>	ı Uldi	net assets of fund balances at end of year (fine 4 finitus line 5) - Part II, Co	חמווווו (ט), וווופ צש		

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	(d) Date sold mo., day, yr.)
1a 773 SHARES OF AMZN D 1	2/27/19
b 12326 SHARES OF APPL D 1	2/20/19
<u>c</u>	
<u>d</u>	
<u>e</u>	
(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (cor allowable) plus expense of sale ((e) plus (f) minus (g))	
	003,514.
	885,097.
<u>c</u>	
d	
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (I) Gains (Col. (h) gain minuted by the foundation of 12/31/69.	
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (j) Adjusted basis (k) Excess of col. (i) (l) Gains (Col. (h) gain minu coll. (k), but not less than -0-)	
(i) FMV as of 12/31/69 as of 12/31/69 over col (j), if any Losses (from col. (h))	
	003,514.
a 1, 1	885,097.
c Z,	303,037
d	
e	
	-
2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	888,611.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):	
If gain, also enter in Part I, line 8, column (c).	
If (loss), enter -0- in Part I, line 8	
Partiva Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income	
(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)	N/A
. Management 40.40/dV(0) and less less this part blank.	
If section 4940(d)(2) applies, leave this part blank	
Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?	Yes No
If "Yes," the foundation doesn't qualify under section 4940(e) Do not complete this part.	
1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.	
(a) Base period years (b) (c) Distribution	ratio
Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value of noncharitable-use assets (col (b) divided to	oy col (c))
2018	
2017	
2016	_
2015	
2014	
2 Total of line 1, column (d)	
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years	
the foundation has been in existence if less than 5 years	
A. F. day the materials of a section to the control of the control	
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	
F M II d to Abole 0	
5 Multiply line 4 by line 3	
6 Enter 1% of net investment income (1% of Part I, line 27b)	
7 Addison Food 6	
7 Add lines 5 and 6	
8 Enter qualifying distributions from Part XII, line 4	
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions	

THE SMITH BROTHERS FAMILY

Form 990-PF (2019) FOUNDATION, INC.		4-3726366 Page 4
Part VI Excise Tax Based on Investment Income (Section		48 - see instructions)
1a Exempt operating foundations described in section 4940(d)(2), check here		
` · · · · ·	er if necessary-see instructions)	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check h	iere ▶ 🔲 and enter 1% 📗	1 77,773.
of Part I, line 27b		
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, e	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-)	2 0.
3 Add lines 1 and 2	Ļ	3 77,773.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations		4 0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter-	·0-	5 77,773.
6 Credits/Payments:		,
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a 0.	
b Exempt foreign organizations - tax withheld at source	6b 0.	
c Tax paid with application for extension of time to file (Form 8868)	6c 0.	
d Backup withholding erroneously withheld	6d 0.	
7 Total credits and payments Add lines 6a through 6d	L	7 0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220		8 0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	SEE STATEMENT 5 ▶ _	9 77,773.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount over	·	10
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 loc	cal legislation or did it participate or intervene in	
any political campaign?	•	1a X
b Did it spend more than \$100 during the year (either directly or indirectly) for political		on 1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and of	copies of any materials published or	'
distributed by the foundation in connection with the activities.		ا حــا
c Did the foundation file Form 1120-POL for this year?		1c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed du	_	'
(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation ma		` /
e Enter the reimbursement (if any) paid by the foundation during the year for political	expenditure tax imposed on foundation	
managers.▶\$		فيدادداب ا
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.		. '
3 Has the foundation made any changes, not previously reported to the IRS, in its gove		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chang		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?	_	N/A 4b
5 Was there a liquidation, termination, dissolution, or substantial contraction during the	e year?	5 X
If "Yes," attach the statement required by General Instruction T		' • 4
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) sati	isfied either:	
By language in the governing instrument, or		: , '
By state legislation that effectively amends the governing instrument so that no ma	andatory directions that conflict with the state la	w
remain in the governing instrument?	Haranaka Badda ada (2000)	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 ins	structions.	
FL		: ' _
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF t	o the Attorney General (or designate)	
of each state as required by General Instruction G? If "No," attach explanation		8b X
9 Is the foundation claiming status as a private operating foundation within the meaning		
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Ye		9 X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a	a schedule listing their names and addresses STI	MT 6 10 X

P	art 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		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	i		
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► BARRY BRAUCH Telephone no. ► 859-49		<u>523</u>	
	Located at ▶ 2527 NELSON MILLER PARKWAY SUITE 207, LOUISVILLE, ZIP+4 ▶40	223		,
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			لـــا
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		٠,	
_	foreign country	<u></u>		
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		1	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1:	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?		ĺ	•
	(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? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	ļ		·
	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.)	-		
	o 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		ļ	•
(Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	<u> </u>		
	before the first day of the tax year beginning in 2019?	- 1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			i
	defined in section 4942(j)(3) or 4942(j)(5))	ļ, [*]	٠	
í	a 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?	*	_ , •]	.
	If "Yes," list the years , , , ,			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	'	٠ .	.
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	<u> </u>		
	statement - see instructions) N/A	2b		. 7
(If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	- <u> </u>	-	•]
	Oddy for data had now the a COV down to a down		أخيو	
38	t Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	, ,	· [, ,
	during the year? Yes X No	,	+-	
t	of "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after	a.	.	
	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	**		A.
	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,	 -	<u></u>	
	Schedule C, to determine if the foundation had excess business holdings in 2019) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			 X
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	DE	
	Foi	m 990	-PF (2019)

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IIII BIIIIII BIOIIIIIO IIIIII	•					
Form 990-PF (2019) FOUNDATION, INC.	Form 4700 May Bo		84-37263	66	Page 6	
Part VII-B Statements Regarding Activities for Which I	-orm 4/20 Iviay be	nequired (contin	uea)	Yes	No	
5a During the year, did the foundation pay or incur any amount to:(1) Carry on propaganda, or otherwise attempt to influence legislation (section)	1/0/5/6)\2		es 🗓 No 📙	- 100	. 140	
(2) Influence the outcome of any specific public election (see section 4955); o			L3 L82 140 ,			
any voter registration drive?	r to outry on, amount or man		es X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		es X No		-	
(4) Provide a grant to an organization other than a charitable, etc., organizatio						
4945(d)(4)(A)? See instructions		Y	es X 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?		Y	es X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	in Regulations	_		_		
section 53.4945 or in a current notice regarding disaster assistance? See instri	section 53.4945 or in a current notice regarding disaster assistance? See instructions					
Organizations relying on a current notice regarding disaster assistance, check t			, , ,			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ained		.	<u> </u>	
expenditure responsibility for the grant?]	N/A 🔲 Y	es 🔲 No			
If "Yes," attach the statement required by Regulations section 53.4945-5(d)					`l l	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			ĺ	-	
a personal benefit contract?		Y	es 🗶 No 📙	_		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		L	6b	Х	
If "Yes" to 6b, file Form 8870						
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y	es 🗶 No 💄	, ,		
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration of		[
excess parachute payment(s) during the year?			es X No	ł		
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	anagers, Highly	У			
Paid Employees, and Contractors						
1 List all officers, directors, trustees, and foundation managers and t		(c) Compensation	(d) Contributions to	I (-) Ev		
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) EX	pense t, other	
(4)	to position	enter -0-)	compensation	allow	ances	
CTT CM3 MTWTYM O		0.	0.		0.	
SEE STATEMENT 9		0.	0.		<u> </u>	
·						
				<u> </u>		
	1					
			_			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none	. enter "NONE."				
	(b) Title, and average hours per week		(d) Contributions to	(e) Ex accoun	pense	
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	accoun allow	t, other ances	
NONE	TOTAL TO POSITION		Compensation			
		1				
·						
Total number of other employees paid over \$50,000			>		0	
			Form	990-PF	(2019)	

FOUNDATION, INC.

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

Paid Employees, and Contractors (continued)		<u> </u>
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		
	1	
	7	İ
	i i	
	<u> </u>	
	-{	
	┪	
Total number of others receiving over \$50,000 for professional services	<u> </u>	▶ 0
Part IX-A Summary of Direct Charitable Activities		<u> </u>
	cal information such as the	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced.	iced, etc.	Expenses
1 NOT APPLICABLE	,	
NOT ATTECABLE		
		0.
		<u> </u>
2		
3		
4		
Part IX-B Summary of Program-Related Investments		··
Describe the two largest program-related investments made by the foundation during the tax year on li	nes 1 and 2	Amount
27.12	103 1 4110 2.	741100111
1N/A		
•		
2		
All other program-related investments. See instructions.		
• •		
3		
A 40***		
	-	0.
Total. Add lines 1 through 3		V •

Form 990-PF (2019)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes. 10,601,277. a Average monthly fair market value of securities 1a 15 472,924. b Average of monthly cash balances c Fair market value of all other assets 1c 11,074,201. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 4 166*.*113. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 10,908,088. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 65,743. Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD 6 Part/XII Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here
and do not complete this part.) 65,743. Minimum investment return from Part X, line 6 77,773. 2a Tax on investment income for 2019 from Part VI, line 5 2a b Income tax for 2019 (This does not include the tax from Part VI.) 2b c Add lines 2a and 2b 2ε 77.773. 3 Distributable amount before adjustments. Subtract line 2c from line 1 Ō. 4 Recoveries of amounts treated as qualifying distributions 0. 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 0. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 [Part/XII] Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 50,000. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 16 b Program-related investments - total from Part IX-B 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. 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 50,000. 4 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 50,000. Adjusted qualifying distributions. Subtract line 5 from line 4 6 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

Form **990-PF** (2019)

4940(e) reduction of tax in those years.

THE SMITH BROTHERS FAMILY

Form 990-PF (2019)

FOUNDATION, INC.

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2 line 7	2019 from Part XI,				. 0.
2 Undistributed income, if any, a	as of the end of 2019	·			<u>. </u>
a Enter amount for 2018 on	ıly			0.	
b Total for prior years:		·			
,			0.		
3 Excess distributions carry	over, if any, to 2019:				
a From 2014					
b From 2015	· . -				
c From 2016					
d From 2017					
e From 2018					
f Total of lines 3a through 6		0.		······································	
4 Qualifying distributions fo					
Part XII, line 4: ►\$	50,000.			•	
a Applied to 2018, but not r				0.	
b Applied to undistributed in	'		_		ļ
years (Election required -	′ 1		0.		
c Treated as distributions of	'	,			
(Election required - see in		0.			
d Applied to 2019 distributa		50 000			0.
e Remaining amount distrib	· •	50,000.			
5 Excess distributions carryover (If an amount appears in column must be shown in column (a))	nn (d), the same amount	0.			0.
6 Enter the net total of each indicated below:	h column as				
a Corpus Add lines 3f, 4c, and 4	4e Subtract line 5	50,000.			
b Prior years' undistributed	income Subtract				
line 4b from line 2b			0.		
c Enter the amount of prior undistributed income for v deficiency has been issue the section 4942(a) tax ha assessed	which a notice of d, or on which		0.		
d Subtract line 6c from line	6b. Taxable				
amount - see instructions			0.	,	
e Undistributed income for t	ŀ				
4a from line 2a. Taxable a	mount - see instr			0.	}
f Undistributed income for 3	2019 Subtract				
lines 4d and 5 from line 1.	. This amount must				
be distributed in 2020					0.
7 Amounts treated as distrit	outions out of				
corpus to satisfy requirem	ents imposed by				
section 170(b)(1)(F) or 49	942(g)(3) (Election				
may be required - see inst	ructions)	0.			
8 Excess distributions carry					
not applied on line 5 or line 7		0.			
9 Excess distributions carryover to 2020.		E 2 2 2 2 2			
Subtract lines 7 and 8 from line 6a		50,000.	_		
10 Analysis of line 9;					
a Excess from 2015				1	
b Excess from 2016					
c Excess from 2017					
d Excess from 2018	<u> </u>				
e Excess from 2019	50,000.				<u>1</u>

THE SMITH BROTHERS FAMILY 84-3726366 Form 990-PF (2019) FOUNDATION, INC. Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling 4942(j)(3) or A942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (a) 2019 (b) 2018 (c) 2017 (d) 2016 (e) Total income from Part I or the minimum 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 Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter. (1) Value of all assets (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 c "Support" alternative test - enter: (1) Total support other than gross investment income (interest dividends, rents, payments on securities loans (section 512(a)(5)), or royafties) (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 (4) Gross investment income Part XV | Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) SEE STATEMENT 10 b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest SEE STATEMENT 11 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here Luly if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d a The name, address, and telephone number or email address of the person to whom applications should be addressed. SCOTT S. & SEAN S. SMITH, 859-4940-523 2527 NELSON MILLER PKWY SUITE 207, LOUISVILLE, KY 40223 b The form in which applications should be submitted and information and materials they should include. THE CORPORATION DOES NOT HAVE A DETERMINED SELECTION PROCESS. c Any submission deadlines. NONE d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors,

NONE

Page 11

FOUNDATION, INC.

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation status of Purpose of grant or contribution **Amount** Name and address (home or business) recipient a Paid during the year PALM BEACH COMMUNITY FOUNDATION TO SUPPORT PALM BEACH COMMUNITY FOUNDATION 700 S DIXIE HWY #200 50,000. WEST PALM BEACH, FL 33401 50,000. **▶** 3a Total **b** Approved for future payment NONE Total **▶** 3b

Analysis of Income-Producing Activities Part XVI-A

FOUNDATION, INC.

Enter gross amounts unless otherwise indicated.	Unrelated	business income		led by section 512, 513, or 514	(e)
·	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	711100111	141101101111111111111111111111111111111
a	-		++		
b			++		
c	_		+ +		
d	_	· · · · · · · · · · · · · · · · · · ·	+		
e	_		+		
f	_		+		
g Fees and contracts from government agencies	<u> </u>	·····			 :-
2 Membership dues and assessments	ļ				
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	60.	
5 Net rental income or (loss) from real estate:			T T		
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property	`				
7 Other investment income			1 1		, , , , , , , , , , , , , , , , , , ,
8 Gain or (loss) from sales of assets other than inventory			18	3,888,611.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
c			i i		
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0		3,888,671.	0.
13 Total. Add line 12, columns (b), (d), and (e)			-	13	3,888,671.
(See worksheet in line 13 instructions to verify calculations)			_	
					·· ·

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

Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)
	NOT APPLICABLE

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)

Yes No

Form 990-PF (2019)	FOUNDATION, INC.	84-3726366 Page 1
	mation Regarding Transfers to and Tran upt Organizations	sactions and Relationships With Noncharitable

(othe	er than section 501(c)(3) organ	nizations) or in secti	ion 527, relatini	g to political organizations	?			
a Transfers from the reporting foundation to a noncharitable exempt organization of:								
(1)	Cash						1a(1)	X
(2)	Other assets						1a(2)	X
b Other	r transactions:							
(1)	Sales of assets to a noncharita	ble exempt organiza	ation				1b(1)	Х
(2)	Purchases of assets from a no	ncharitable exempt	organization				1b(2)	X
	Rental of facilities, equipment,		•				1b(3)	X
	Reimbursement arrangements						1b(4)	X
	Loans or loan guarantees						1b(5)	X
	Performance of services or me	embership or fundra	nsına solıcıtatıo	οπs			1b(6)	X
• •	ing of facilities, equipment, ma	·	-				1c	X
	answer to any of the above is	• ,		• •	always show the fair r	market value of the goods, o	ther assets	
	rvices given by the reporting fo	, .	_	• •	*	•		•
	nn (d) the value of the goods,				-			
a)Line no	(b) Amount involved	(c) Name o	of noncharitable	e exempt organization	(d) Description	n of transfers, transactions, and	sharing arrang	jements
	·		N/A					
			· · · · · · · · · · · · · · · · · · ·					
								
		·				·		
						 		
		-			1			
				· · · · · · · · · · · · · · · · · · ·				
			· · · · · · · · · · · · · · · · · · ·					
			_					
						- -		

2a Is the	e foundation directly or indirect	tlv affiliated with, or	related to, one	or more tax-exempt organ	nizations described			
	ction 501(c) (other than section	•	•	, , ,			Yes	X No
	s," complete the following sch							
	(a) Name of org			(b) Type of organization		(c) Description of relations	ıp	
	N/A							
	<u> </u>					-		
					1	· · · · · · · · · · · · · · · · · · ·		
								
			-					
	Under penalties of perjury, I declare						the IRS discu	iss this
Sign	and belief, it is true, correct, and con	nplete Declaration of p	reparer other than	n taxpayer) is based on all infor	rmation of which prepare	retu	rn with the pre wn below? Se	eparer
Here	15m	B	\mathcal{A}	11/13/20	PRESI		Yes	□ No
	Signature of officer or trustee			Date /	Title			
	Print/Type preparer's na	ime	Preparer's si	ignature	Date	Check if PTIN		
			Suc	Hen, CAA		self- employed		
Paid	STEVEN G.	HORN	STEVEN	G HORN	11/11/20	P00	29403	32
Prepar					<u> </u>	Firm's EIN ▶ 58-14		
Use O				•				
	•	40 CROWN	POINTE	PKWY, #400				
		LANTA, GA		, 3 -		Phone no. 770-53	12-050	0
							rm 990-F	

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

	THE SMITH BROTHERS FAMILY	04 2726266
Organization type (chec	FOUNDATION, INC.	84-3726366
Organization type (cried	in Orley	
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	
Check if your arganization	on is covered by the General Rule or a Special Rule.	
, ,	1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special F	lule See instructions
General Rule		
•	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling any one contributor. Complete Parts I and II. See instructions for determining a contributor.	•
Special Rules		
sections 509(a) any one contrib	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supporting the section 501(c)(3) filing Form 990 or 990-EZ, Part II, line 13, 16a butor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amodeZ, line 1 Complete Parts I and II	a, or 16b, and that received from
year, total cont	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fron ributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or edurulity to children or animals. Complete Parts I, II, and III	
year, contributi is checked, ent purpose Don't	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ons exclusively for religious, charitable, etc., purposes, but no such contributions totaled refer the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it table, etc., contributions totaling \$5,000 or more during the year	more than \$1,000 If this box is, charitable, etc ,
but it must answer "No"	n that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its lead the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PE)	

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Name of organization
THE SMITH BROTHERS FAMILY
FOUNDATION, INC.

Employer identification number

84-3726366

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SCOTT & SHANDRALYN SMITH 2527 NELSON MILLER PKWY SUITE 207 LOUISVILLE, KY 40223	\$ 2,491,200.	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
2	SEAN & VICTORIA SMITH 2527 NELSON MILLER PKWY SUITE 207 LOUISVILLE, KY 40223	\$ <u>30,334,630</u> .	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)	(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 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)

Name of organization
THE SMITH BROTHERS FAMILY
FOUNDATION, INC.

Employer identification number

84-3726366

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if a	dditional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	4,000 SHARES OF AAPL AND 773 SHARES OF AMZN	2 401 200	12/21/10
		\$ 2,491,200.	12/31/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	109,200 SHARES OF AAPL		
		\$ 30,334,630.	12/27/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
		9	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	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
		\$	
022452 11 05			000 000 E7 at 000 BE) (2040)

Name of organization

THE SMITH BROTHERS FAMILY

FOUNDATION, INC.

Employer identification number

84-3726366 at total more than \$1,000 for the

Part III	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	s for the year (Enter this info once) > \$			
	Use duplicate copies of Part III if additional	space is needed				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
			_			
		(e) Transfer of gift				
	Transferee's name, address, a	nd 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 gift				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(a) Na						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
	Transferee's name, address, a	nd 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			
ſ		(e) Transfer of gift				
}	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			

FORM 990-PF DIVI	ENDS	AND	INTER	EST FRO	M SECUR	ITIES	STATEMENT	1	
GROS SOURCE AMOU		CAPITAI GAINS DIVIDENI		RE	(A) EVENUE BOOKS	(B) NET INVE MENT INC	ST- ADJUST	STED	
DIVIDEND INCOME	60.			0.	60.		60.		
TO PART I, LINE 4	60.	. (0. 60.		-	60.	·-	
FORM 990-PF			LEGAL	FEES			STATEMENT	2	
DESCRIPTION		EXPEN		NET IN) IVEST- INCOME		D CHARITA		
LEGAL FEES		5	,285.		0.			0.	
TO FM 990-PF, PG 1, LN 16A	<u> </u>	5	,285.	0.				0.	
FORM 990-PF		OT	HER E	XPENSES	<u></u>		STATEMENT	3	
DESCRIPTION		(A EXPEN PER B		NET IN) VEST- NCOME	(C) ADJUSTEI NET INCOM			
REGISTRATION FEES TRANSACTION COSTS	_	62. 47.			0.			0.	
			109.		0.			0.	
FORM 990-PF		OTHE	R INV	ESTMENT	'S		STATEMENT	4	
FORM 990-PF DESCRIPTION		OTHE	VA	ESTMENT LUATION ETHOD		K VALUE	STATEMENT FAIR MARKE VALUE		
		OTHE	VA: M:	LUATION	B00	K VALUE ,153,085.	FAIR MARKE	T	

TOTAL LATE PAYMENT PENALTY

FORM 990-PF	INTEREST A	AND PENALTIES		STATEMENT	5
TAX DUE FROM FORM 990- LATE PAYMENT INTERES LATE PAYMENT PENALTY	T			77,7 7 1,5	88.
TOTAL AMOUNT DUE				80,1	16.
FORM 990-PF L		ANTIAL CONTRIB	UTORS	STATEMENT	6
NAME OF CONTRIBUTOR		ADDRESS			
SEAN SMITH		2527 NELSON M LOUISVILLE, K		ITE 207	
VICTORIA SMITH		2527 NELSON M LOUISVILLE, K		ITE 207	
SCOTT SMITH		2527 NELSON M LOUISVILLE, K		ITE 207	
SHANDRALYN SMITH		2527 NELSON M LOUISVILLE, K		ITE 207	
FORM 990-PF	LATE F	PAYMENT PENALT	Y	STATEMENT	7
DESCRIPTION	DATE	AMOUNT	BALANCE I	MONTHS PENAL	TY
TAX DUE DATE FILED	07/15/20 11/15/20	77,773.	77,773. 77,773.	4 1,5	55.

1,555.

FORM 990-PF	LATE	PAYMENT I	NTERES	ST		STAT	EMENT	8
DESCRIPTION DATE		AMOUNT	BALA	NCE	RATE	DAYS	INTER	EST
TAX DUE 07/15/2 DATE FILED 11/15/2		77,773.		77,773.	.0300	123	71	88.
TOTAL LATE PAYMENT INTEREST						=	78	88.
FORM 990-PF PART VIII - TRUSTEES		OF OFFICE FOUNDATION				STAT	EMENT	9
NAME AND ADDRESS		TITLE A			- BE	IPLOYEE IN PLAN ONTRIB	EXPENS	
SCOTT S. SMITH 2527 NELSON MILLER PKWY SUITE LOUISVILLE, KY 40223	207	PRESIDENT 1.00			0.	0.		0.
SEAN S. SMITH 2527 NELSON MILLER PKWY SUITE LOUISVILLE, KY 40223	207	VICE-PRES	IDENT		0.	0.		0.
SHANDRALYN D. SMITH 2527 NELSON MILLER PKWY SUITE LOUISVILLE, KY 40223	207	TREASURER 1.00			0.	0.		0.
VICTORIA A. SMITH 2527 NELSON MILLER PKWY SUITE LOUISVILLE, KY 40223		SECRETARY- 1.00			0.	0.		0.
BARRY C. BRAUCH 2527 NELSON MILLER PKWY SUITE LOUISVILLE, KY 40223	207	DIRECTOR 1.00			' 0.	0.		0.
TOTALS INCLUDED ON 990-PF, PA	GE 6,	PART VIII	_		0.	0.		0.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

NAME OF MANAGER

SCOTT S. SMITH SEAN S. SMITH SHANDRALYN D. SMITH VICTORIA A. SMITH

FORM 990-PF

PART XV - LINE 1B LIST OF FOUNDATION MANAGERS STATEMENT 11

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NAME OF MANAGER

SCOTT S. SMITH SEAN S. SMITH SHANDRALYN D. SMITH VICTORIA A. SMITH

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