Return of Private Foundation

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

2019

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

For calendar year 2019 or tax year beginning , 2019, and ending December 31 Name of foundation A Employer identification number 94-6098400 Armey-Harvey Foundation, Inc. Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) P. O. Box 7934 559-291-9724 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ Fresno, CA 93747-7934 ☐ Initial return ☐ Initial return of a former public charity G Check all that apply: D 1. Foreign organizations, check here ▶□ Amended return Final return 2. Foreign organizations meeting the 85% test ☐ Address change Name change check here and attach computation H Check type of organization: ✓ Section 501(c)(3) exempt private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here ightharpoonupFair market value of all assets at J Accounting method: ☑ Cash ☐ Accrual If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here line 16) ▶ \$ · (Part I, column (d), must be on cash basis.) 103522.77 Part 1 Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily equal expenses per income income purposes books the amounts in column (a) (see instructions).) (cash basis only) ANTHONY MARKET Contributions, gifts, grants, etc., received (attach schedule) THE REAL PROPERTY. E WAY SELECTION OF THE PARTY. 48890.00 MENT JOYETH 2. 14人が確認されて MANAGE WY, N 2 Check ► ☐ if the foundation is not required to attach Sch. B **一种的人们的** 3 Interest on savings and temporary cash investments -0 n No Sun William 4 Dividends and interest from securities 15685.39 THE PROPERTY OF 15685.39 5a Gross rents S. C. T. N. S. G. THE TANKS IN b Net rental income or (loss) THECORREST BUCKETT'S RESE STATE. Net gain or (loss) from sale of assets not on line 10 THE THE REPORT OF ₹15% Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) **强攻在"走"(1**11) 8 The Back of a Sunday **"如果是"科别**数 9 Income modifications APPENDED בנים אבא מון ביצי בווא THE PROPERTY OF THE PARTY OF TH STARTED H 10a Gross sales less returns and allowances 30700% 新期。 OG. b Less: Cost of goods sold Il was been there AN PLANT C Gross profit or (loss) (attach schedule) **和我们是不是** 11 Other income (attach schedule) Transfer to the total 12 Total. Add lines 1 through 11 . 76.20 14 11 11 64575.39 13 Compensation of officers, directors, trustees, etc. RECEIVE Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 2020 16a Legal fees (attach schedule) b Accounting fees (attach schedule) 750.00 OGDEN Other professional fees (attach schedule) . . 17 18 Taxes (attach schedule) (see instructions) . . . 20.00 19 Depreciation (attach schedule) and depletion . TOTAL STATE OF THE 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 78.75 23 Other expenses (attach schedule) 25.00 24 Total operating and administrative expenses. Add lines 13 through 23 42500.00 25 Contributions, gifts, grants paid . . \. . . . 26 Total expenses and disbursements. Add lines 24 and 25 43373.75 43373.75 27 Subtract line 26 from line 12: Ċ Excess of revenue over expenses and disbursements 21201.64 AND PLANT HE AVE ब्दुब्र हर हराहर पुरु **Net investment income** (if negative, enter -0-) 15685.39

For Paperwork Reduction Act Notice, see instructions.

Adjusted net income (if negative, enter -0-) .

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Form 990-PF (2019)

Pa	art II	. Balance Sheets 'Attached schedules and amounts in the description column	Beginning of year		End o	f year
		should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Valu		(c) Fair Market Value
	1	Cash—non-interest-bearing	3337.62	62	298.87	6298.87
	2	Savings and temporary cash investments	78983.51	972	23.90	97223.90
	3	Accounts receivable ►			, .	<u> </u>
]	Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶	I	• • •		
		Less: allowance for doubtful accounts ▶				-
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
	_	disqualified persons (attach schedule) (see instructions)	* * * * * * * * * * * * * * * * * * * *	y age & n. W belling		
	7	Other notes and loans receivable (attach schedule) ▶				
۰,		Less: allowance for doubtful accounts ▶				,
Assets	8	Inventories for sale or use				
SSI	9	Prepaid expenses and deferred charges				
⋖	10a	Investments—U.S. and state government obligations (attach schedule)				<u> </u>
	b	Investments—corporate stock (attach schedule)				
	C	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment: basis ▶	·			
	1.0	Less. accumulated depreciation (attach schedule) ▶				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				- 1
	14	Land, buildings, and equipment: basis				
	45	Less: accumulated depreciation (attach schedule) ▶				
	15	Other assets (describe)				
	16	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	82321.13	1035	22.77	103522.77
	17	Accounts payable and accrued expenses				
(A)	18	Grants payable				
Liabilities	19	Deferred revenue				٦
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons				1
ā	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ►)		349-	5	1
	23	Total liabilities (add lines 17 through 22)		1113	WI	
es		Foundations that follow FASB ASC 958, check here ▶ □		- <u> </u>		
Š		and complete lines 24, 25, 29, and 30.				
<u>=</u>	24	Net assets without donor restrictions				
ä	25	Net assets with donor restrictions				
pu		Foundations that do not follow FASB ASC 958, check here ▶ □				
교	[and complete lines 26 through 30.				Ì
ō	26	Capital stock, trust principal, or current funds				
ş	27	Paid-in or capital surplus, or land, bldg., and equipment fund				
še	28	Retained earnings, accumulated income, endowment, or other funds		14250	1	
As	29	Total net assets or fund balances (see instructions)		110011	· 1	•
Net Assets or Fund Balances	30	Total liabilities and net assets/fund balances (see				
	23.00	Instructions)				
	rt III	Analysis of Changes in Net Assets or Fund Balances				
1		I net assets or fund balances at beginning of year—Part II, colur				_
_		of-year figure reported on prior year's return)			1	82321.13
2	: ⊏nte	r amount from Part I, line 27a			2	21201.64
3	Otne	er increases not included in line 2 (itemize)	***************************************		3	-0-
4 5		lines 1, 2, and 3			4	103522.77
_		reases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—I	Part II. column (b) lie	ne 20	5 6	-0-
	· ivia	. Hot accord or land balances at end of year (line 4 Hillius line 5)—I	_aren, column (D), III	1623	ו סו	103522.77

Part	W Canital Gains and	Losses for Tax on Investm	ent Income			· · · · · · · · · · · · · · · · · · ·	
i ai t				(b) How acquired	(4) 0-		(d) Data cold
•		d(s) of property sold (for example, real e: e; or common stock, 200 shs. MLC Co)		P—Purchase D—Donation		te acquired , day, yr)	(d) Date sold (mo , day, yr)
10				D-Donation	· · · · ·		
<u>1a</u>							
<u>b</u>					-		
<u>c</u>					<u> </u>		
d					 -		
<u>e</u>					 		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale			n or (loss) f) minus (g))
а							
b			· ·				
<u>c</u>					ļ		· · · · · · · · · · · · · · · · · · ·
<u>d</u>							
е							
	Complete only for assets show	ving gain in column (h) and owned	by the foundation	on on 12/31/69.]	(I) Gains (Co	(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i) col. (j), if any	,		t less than -0-) or from col (h))
а				-		 	
b							
C							
d							- · · · · · · · · · · · · · · · · · · ·
e							
2	Capital gain net income or		also enter in F		2	-	
_		- , ,	, enter -0- in F		-		
3	Net short-term capital gain	or (loss) as defined in sections	1222(5) and ((6):			
		l, line 8, column (c). See instru	ctions. If (los	ss), enter -U- in j			
				Ned Incompany	3		
Pari		er Section 4940(e) for Redu	_				
(For o	ptional use by domestic priv	ate foundations subject to the	section 4940(a) tax on net inves	ıment ii	ncome.)	
If sec	tion 4940(d)(2) applies, leave	this part blank					
		section 4942 tax on the distribu		, ,	base pe	eriod?	☐ Yes ☐ No
		ualify under section 4940(e). Do			okupa a	nu ontro	
	Enter the appropriate amo	unt in each column for each ye	ar; see the ins	tructions before in	aking a	iny entries.	(ch)
	Base period years	(b) Adjusted qualifying distribution	s Netvalue	(c) e of nonchantable-use a	seete		(d) tribution ratio
Cal	endar year (or tax year beginning in)					(col (b)	divided by col (c))
	2018		41196		83237		0.49492
	2017		39746		80030		0.49664
	2016		38135		72316		0.52734
	2015		27151		72649		0.37373
	2014		29039		79088	· · · · · · · · · · · · · · · · · · ·	0.36717
2	Total of line 1, column (d)				· L	2	2.26
3	Average distribution ratio	for the 5-year base period—div	ide the total	on line 2 by 5.0, o	r by		
	the number of years the fo	undation has been in existence	if less than 5	years	. L	3	.45
4	Enter the net value of nonc	charitable-use assets for 2019 f	rom Part X, lir	ne5	.	4	91528.12
5	Multiply line 4 by line 3 .					5	41187.66
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)		·	6	156.85
7	Add lines 5 and 6				. [7	41344.51
•	والمراجع وال	no from Dort VII lime 4			Γ		
8		ns from Part XII, line 4				8	43373.75
		ter than line 7, check the box ii	n Part VI, line	ib, and complete	ınat pa	irt using a	1% tax rate. See the
	Part VI instructions.						

Form 990-PF (2019)

Part	VI . Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instruc	ctions	s)					
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.)								
•	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			i					
b	\								
	here ► 🗹 and enter 1% of Part I, line 27b								
С									
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)								
3									
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			-0-					
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		15	6.85					
6	Credits/Payments:								
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a -o-								
b	Exempt foreign organizations—tax withheld at source								
C	Tax paid with application for extension of time to file (Form 8868) 6c			- 1					
d	Backup withholding erroneously withheld								
7	Total credits and payments. Add lines 6a through 6d			-0-					
8	Enter any penalty for underpayment of estimated tax. Check here								
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		15	6.85					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10								
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11								
Part	VII-A Statements Regarding Activities	11-							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No_					
	participate or intervene in any political campaign?	1a		<u>✓</u>					
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		✓_					
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials								
	published or distributed by the foundation in connection with the activities.	-	-						
С	Did the foundation file Form 1120-POL for this year?	1c		<u>√</u>					
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			1					
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$								
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed								
•	on foundation managers. • \$		-						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2	-	-					
3	I las 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	-	_					
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		✓					
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b							
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u>/</u>					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		}						
	By language in the governing instrument, or			- 1					
	• 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	<u> </u>						
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	1						
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶	-		1					
	Callfornia								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation	8b	_						
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	9		√ l					
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	1						

Form 990-PF (2019)

Dari	VII-A Statements Regarding Activities (continued)		···	age o
3 r ai i	Statements negariting Activities (continued)		Yes	No
11 .	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		.03	
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		✓
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		-
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
	Website address ▶ armeyus@earthlink.net			<u> </u>
14	The books are in care of ▶ Jennifer Armey Telephone no. ▶ 55	9-291-	9724	
	Located at ▶ 6786 E. Clinton Ave. ZIP+4 ▶ 9	3727-1	413	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here		. 1	
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		<u>√</u> ,
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Parl	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
1a	During the year, did the foundation (either directly or indirectly):			Ī
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			1
	disqualified person?			
	(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 V. No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available 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		ļ	1
	termination of government service, if terminating within 90 days.)			İ
b	and the state of t			
	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		-	1
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?			
2	were not corrected before the first day of the tax year beginning in 2019? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1c	-	✓
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			į
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			1
	6d and 6e) for tax year(s) beginning before 2019?			j
b	If "Yes," list the years ▶ 20 , 20 , 20 , 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	1 1		1
b	(relating to incorrect 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.)	2b		-
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			}
	▶ 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1		
	at any time during the year?			1
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or	1		
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the	1		
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019.)	3b		7
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1
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 tay year beginning in 20102			

,Form 990-PF (2019)

Part	VII-B Statements Regarding Activi	ties for V	Vhich Form	4720	May Be R	equire	d (contii	nued)			
5a	9 , ,	-								Yes	No
•	, , , , , ,	Inda, or otherwise attempt to influence legislation (section 4945(e))? . Yes No come of any specific public election (see section 4955); or to carry on,									
	directly or indirectly, any voter registration				•	•	☐Yes	✓ No			
	(3) Provide a grant to an individual for travel,	study, or	other similar	purpose	es?		☐ Yes	☑ No			
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions										
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational										
_	If any answer is "Yes" to 5a(1)–(5), did any of						∐Yes	No <u>√</u>			ŀ
b	in Regulations section 53.4945 or in a curren							scribed	5b		
	Organizations relying on a current notice reg		-						70	,	
С	If the answer is "Yes" to question 5a(4), do	_									ļ
	because it maintained expenditure responsib	ility for the	grant?				☐ Yes	☐ No			J
_	If "Yes," attach the statement required by Re	_		, ,							l
6a	Did the foundation, during the year, receive a	=	•	directly	, to pay pre	emiums	_				ļ
h	on a personal benefit contract?		otly or indus	otka on		honof:	Yes	. ✓ No			
b	If "Yes" to 6b, file Form 8870.	nums, une	ctly or maire	Cily, On	a personai	benen	Comraci	. f .	6b		
7a		tion a part	to a prohibit	ed tax s	helter trans	action?	Yes	✓ No		}	l
b	If "Yes," did the foundation receive any process	eds or ha	ve any net inc	come a	ttributable t	to the t	ransactioi		7b		
8	Is the foundation subject to the section 496									,	1
	remuneration or excess parachute payment(✓ No			
Pari	Information About Officers, Di	rectors,	frustees, F	ounda	tion Mana	agers,	Highly I	Paid E	mploy	ees,	
1	and Contractors List all officers, directors, trustees, and fo	undation	managers ar	nd their	compens	ation !	See instri	uctions			
			na lagoro al		00111p0110		JOO MIGUI	400000			
	(-) No d - dd		e, and average		mpensation		Contribution		(e) Expe	nse acc	count
	(a) Name and address	hou	e, and average irs per week ed to position	i (lf r	mpensation not paid, ter -0-)	emple	Contribution byee benefit erred compe	plans	(e) Expe	nse acc allowan	
Dougla	(a) Name and address	hou	rs per week ed to position	i (lf r	ot paid,	emple	yee benefit	plans			
3786 E	as Armey Clinton Ave., Fresno, CA 93727	hou devot	ent	i (lf r	ot paid,	emple	yee benefit	plans			
3786 E Jennif	as Armey Clinton Ave., Fresno, CA 93727 er Armey	President Ti	rs per week red to position ent me	i (lf r	ot paid, ter -0-)	emple	yee benefit	plans ensation -0-			ces
3786 E Jennif	as Armey Clinton Ave., Fresno, CA 93727	President Ti	rs per week red to position ent me	i (lf r	ot paid, ter -0-)	emple	yee benefit	plans ensation			ces
3786 E Jennif	as Armey Clinton Ave., Fresno, CA 93727 er Armey	President Ti	rs per week red to position ent me	i (lf r	ot paid, ter -0-)	emple	yee benefit	plans ensation -0-			ces
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3786 E Jennif	as Armey Clinton Ave., Fresno, CA 93727 er Armey	President Ti	rs per week red to position ent me	i (lf r	ot paid, ter -0-)	emple	yee benefit	plans ensation -0-			ces
3786 E Jennif	as Armey Clinton Ave., Fresno, CA 93727 er Armey	Preside Part Ti	rs per week ed to position ent me reas. me	(Iff r	ot paid, ter -0-) -0-	emplo and def	oyee benefit erred compe	plans ensation -0-	other	allowan	-0-
2	as Armey Compensation of five highest-paid emplo	Preside Part Ti Part Ti Part Ti Poyees (other	reas. me (b) Title, and a	se inclusiverage	-0- uded on li	emplo and def	see instr	-00- ructions	s). If n	one, e	-0-
2	as Armey Clinton Ave., Fresno, CA 93727 er Armey Clinton Ave., Fresno, CA 93727 Compensation of five highest-paid emple	Preside Part Ti Part Ti Part Ti Poyees (other	ent me reas. me er than thos	se inclusive seek	ot paid, ter -0-) -0-	emplo and def	see instr	-00uction:	s). If n	one, (-0-
2	as Armey Compensation of five highest-paid emplo	Preside Part Ti Part Ti Part Ti Poyees (other	rs per week ed to position ent me reas. me (b) Title, and a hours per v	se inclusive seek	-0- uded on li	emplo and def	see instr	-00uction:	s). If n	one, e	-0-
2	as Armey Compensation of five highest-paid emplo	Preside Part Ti Part Ti Part Ti Poyees (other	rs per week ed to position ent me reas. me (b) Title, and a hours per v	se inclusive seek	-0- uded on li	emplo and def	see instr	-00uction:	s). If n	one, e	-0-
2	as Armey Compensation of five highest-paid emplo	Preside Part Ti Part Ti Part Ti Poyees (other	rs per week ed to position ent me reas. me (b) Title, and a hours per v	se inclusive seek	-0- uded on li	emplo and def	see instr	-00uction:	s). If n	one, e	-0-
2	as Armey Compensation of five highest-paid emplo	Preside Part Ti Part Ti Part Ti Poyees (other	rs per week ed to position ent me reas. me (b) Title, and a hours per v	se inclusive seek	-0- uded on li	emple and def	see instr	-00uction:	s). If n	one, e	-0- -0- enter
2	as Armey Compensation of five highest-paid emplo	Preside Part Ti Part Ti Part Ti Poyees (other	rs per week ed to position ent me reas. me (b) Title, and a hours per v	se inclusive seek	-0- uded on li	emple and def	see instr	-00uction:	s). If n	one, e	-0- -0- enter
2	as Armey Compensation of five highest-paid emplo	Preside Part Ti Part Ti Part Ti Poyees (other	rs per week ed to position ent me reas. me (b) Title, and a hours per v	se inclusive seek	-0- uded on li	emple and def	see instr	-00uctions to benefit deferred	s). If n	one, e	-0- -0- enter
2	as Armey Compensation of five highest-paid emplo	Preside Part Ti Part Ti Part Ti Poyees (other	rs per week ed to position ent me reas. me (b) Title, and a hours per v	se inclusive seek	-0- uded on li	emple and def	see instr	-00uctions to benefit deferred	s). If n	one, e	-0- -0- enter

Page **7**

Form 990 PF (2019)

Part VIII	. Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I and Contractors (continued)	Employees,
3 Fiv	e highest-paid independent contractors for professional services. See instructions. If none, enter "NO	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
		NONE
	ber of others receiving over \$50,000 for professional services	•
Part IX-	A Summary of Direct Charitable Activities	
	oundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of ions and other beneficianes served, conferences convened, research papers produced, etc	Expenses
1		
		NONE
2		
3		
		··
4		
Part IX-		
1	the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
2		NONE
All other	program-related investments See instructions	
3		
Tatal Ad	d lines 1 through 3	

Form 990₇PF (2019)

Part	. Minimum Investment Return (All domestic foundations must complete this part. Foreit see instructions.)	ign found	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	88092.96
b	Average of monthly cash balances	1b	4829.70
С	Fair market value of all other assets (see instructions)	1c	-0-
d	Total (add lines 1a, b, and c)	1d	92921.95
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	-0-
3	Subtract line 2 from line 1d	3	92921.95
4	Cash deemed held for chantable activities. Enter 11/2% of line 3 (for greater amount, see		<u> </u>
	ınstructions)	4	1393.83
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	91528.12
6	Minimum investment return. Enter 5% of line 5	6	4576.41
Part		oundation	
1	Mınimum investment return from Part X, line 6	1	4576.41
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b -0-	_	
С	Add lines 2a and 2b	2c	-0-
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4576.41
4	Recoveries of amounts treated as qualifying distributions	4	-0-
5	Add lines 3 and 4	5	4576.41
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	4576.41
Part	XII Qualifying Distributions (see instructions)	<u>-l-</u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	43373.75
b	Program-related investments—total from Part IX-B	1b	-0-
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	-0-
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	-0-
b	Cash distribution test (attach the required schedule)	3b	-0-
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	43373.75
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	-	400, 0.73
	Enter 1% of Part I, line 27b. See instructions	5	156.85
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	43216.90
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years.	ig witetitet	the location

	•	(a) Corpus	(b) Years pnor to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				4576.41
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only				
b	Total for pnor years: 20, 20, 20			<u> </u>	
3	Excess distributions carryover, if any, to 2019:	, ,			
a	From 2014				
b	From 2015				
c d	From 2016				
e	From 2018				
f	Total of lines 3a through e				,
4	Qualifying distributions for 2019 from Part XII, line 4: ► \$43373.75				
а	Applied to 2018, but not more than line 2a .				
b	Applied to undistributed income of prior years (Election required—see instructions)	-		-	
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2019 distributable amount				
е	Remaining amount distributed out of corpus	38797	. = ,		
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)	-0-			
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	38797			
b	Prior years' undistributed income. Subtract line 4b from line 2b	, , , , ,			
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	-			
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions				
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				-
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).		- , 54 4 - 7		
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	38797			
10	Analysis of line 9:	,			
a	Excess from 2015	i l			
b	Excess from 2016	1			
C	Excess from 2017		Į.		
d	Excess from 2018	ł 1			

THE ARMEY- HARVEY FOUNDATION, INC. 94-6098400 Form 990+PF (2019) Page 10-Private Operating Foundations (see instructions and Part VII-A, question 9) Part XIV If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(1)(3) or 4942(1)(5) Enter the lesser of the adjusted net 2a Tax year Prior 3 years (e) Total income from Part I or the minimum (**d**) 2016 (a) 2019 **(b)** 2018 (c) 2017 investment return from Part X for each year listed . . 85% of line 2a Qualifying distributions from Part XII. line 4, for each year listed Amounts included in line 2c not used directly for active conduct of exempt activities 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: "Assets" alternative test-enter. (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) "Endowment" alternative test-enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed "Support" alternative test-enter: (1) Total support other than gross investment ıncome (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . (2) Support from general public and 5 or more exempt 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 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: 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).) Douglas & Jennifer Armey List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. N/A Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here \(\bar{\sigma} \) If the foundation only makes contributions to preselected charitable organizations and do

	unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.
а	The name, address, and telephone number or email address of the person to whom applications should be addressed:
N/A	
b	The form in which applications should be submitted and information and materials they should include:
N/A	
С	Any submission deadlines:
N/A	
d	Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:
N/A	

3	Grants and Contributions Paid During	Management of a second and and	Ca IOI FULU	ne rayment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year				
See A	ttached Schedule				42500.00
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			1		
			,		
					1
			}		
	•				1
	Tabel				
b	Total	 		<u> ▶ 3</u>	a
J	Approved for fature payment				
			}		
					1
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			1 1		
	Total		<u> </u>		3b -0

nter g	oss amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by section	on 512, 513, or 514	(e)
•		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.
1 Pr	ogram service revenue:				. .	(CCC WIGHT CHOILS.
а				ļ		
b				<u> </u>		
C						
d						· -
е						
f						
g	Fees and contracts from government agencies					
	embership dues and assessments				. <u></u>	
	erest on savings and temporary cash investments	<u> </u>				
	vidends and interest from securities			14	-0-	
5 N	et rental income or (loss) from real estate:		·			
а	Debt-financed property					
b	Not debt-financed property					
	et rental income or (loss) from personal property			1		
	ther investment income					
	ain or (loss) from sales of assets other than inventory					
	et income or (loss) from special events				· ···	
	ross profit or (loss) from sales of inventory					
11 0	ther revenue: a					
b						
С						
d						
е						
12 S	ubtotal. Add columns (b), (d), and (e)			,	-0-	
		·	<u> </u>		13	
13 T	otal. Add line 12, columns (b), (d), and (e)				10	(
13 To	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculation					
13 To See w		ıs.)			10	
i3 To See wo	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	ot Purposes		
ia To See wo Part Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	ot Purposes		
i3 To See wo Part Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) .ccomplishm	ent of Exemp	ot Purposes		
i3 To See wo Part Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) .ccomplishm	ent of Exemp	ot Purposes		
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13 To See wo Part Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) .ccomplishm	ent of Exemp	ot Purposes		
13 To See wo Part Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) .ccomplishm	ent of Exemp	ot Purposes		
13 To See wo Part Line N	orksheet in line 13 instructions to verify calculation (VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) .ccomplishm	ent of Exemp	ot Purposes		

Date

PTIN

559-291-9724

Form **990-PF** (2019)

Check ___ if self-employed

Firm's EIN ▶

Phone no

Form 990	PF (20	19)		94	-6098400		Pa	age 13
Part >				nsfers to and Transaction	ns and Relationships With No	oncharitab		
1 1	Did th	e organization o	directly or indirectly	engage in any of the followin	g with any other organization des	cribed	Yes	No
ı	n se				in section 527, relating to p			
а	Trans	fers from the rep	porting foundation to	o a noncharitable exempt org	ganization of:			
((1) Ca	ash				1a(1)	✓
((2) Ot	her assets .				1a(2)	1
b	Other	transactions:						
((1) Sa	les of assets to	a noncharitable exe	empt organization		1b(1)	-
((2) Pu	rchases of asse	ets from a noncharit	able exempt organization .		1b(2)	1
				er assets		1b(3)	1
((4) Re	eimbursement a	rrangements			1b(4)	1
((5) Lo	ans or loan gua	rantees			1b(5)	1
((6) Pe	erformance of se	ervices or membersh	hip or fundraising solicitations	s	1b(6)	1
					ployees			1
d I	If the	answer to any	of the above is "Ye	s," complete the following s	chedule. Column (b) should alwa	vs show the	fair m	arket
,	value	of the goods, o	ther assets, or servi	ices given by the reporting for	oundation. If the foundation receiving the value of the goods, other asset	ved less than	fair m	narket
(a) Line) Amount involved		hantable exempt organization	(d) Description of transfers, transactions			
(a) One	10 (1) Amount involved	(c) Name of floric	mantable exempt organization	(d) Description of transfers, transactions	s, and snanng a	rangem	ents
	-	 -	· · · · · · · · · · · · · · · · · · ·					
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0-	م مالم م	formalation also		Williated with an interest to			_	
				ection 501(c)(3)) or in section	one or more tax-exempt organiz	_	,	٦
				, , ,	J27 :	· · 🗀 ۱	es L] NO
<u> </u>	ii re		e following schedule		(-) D	-6 -1-1 - 1		
		(a) Name of organ	lization	(b) Type of organization	(c) Description	of relationship		
								
			 					
	l lada	popultion of popular	declare that I have ever	and thus coturn uncluding accompany	cohodulos and statements, and to the best of	ny kaouladaa	l bali-t	4 .a. 4 : -
Sian				ied this retum, including accompanying : nan taxpayer) is based on all information	schedules and statements, and to the best of r of which preparer has any knowledge			
Sign Here		Mm flu fluid ature of officer or tru	Dones -	13-1-2021 SEC	C/TREAS	May the IRS disc with the preparer See instructions	shown I	pelow?
	الایات ا	ature opposition of the	3100 /	Date Title	,			

Preparer's signature

Original Signed 11-12-20

Print/Type preparer's name

Preparer JENNIFER ARMEY

Firm's name

Paid

Use Only

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

Employer identification number Name of the organization Armey-Harvey Foundation, inc. 94-6098400 Organization type (check one): 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 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number 94-6098400

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	Jennifer & Douglas Armey 6786 E. Clinton Ave. Fresno, CA 93727	\$ 48890.00	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$ 	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		 \$	Person Payroli Moncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		s	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		

Name of organization Employer identification number
Armey-Harvey Foundation. Inc 94-6098400

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Name of organization **Employer identification number** Armey-Harvey Foundation. Inc. 94-6098400 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part ! (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (b) Purpose of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

THE ARMEY-HARVEY FOUNDATION, INC. FEDERAL FORM 990-PF F.E.I.N. 94-6098400 TAX YEAR ENDING 12/31/19

PART I - ANALYSIS OF REVENUE AND EXPENSES

Contributions - Line 1:

<u>Date</u>	<u>Donor</u>	<u>Address</u>	Amount
Various	Douglas & Jennifer Armey	6786 E. Clinton Ave. Fresno, CA 93727	\$48,890.00
Preparation of 2019 Fe	ederal and State tax retu	<u>ırns - line 16a</u>	\$750.00
Taxes - line 18:			
11-15-19 Franchise	Tax Board, State of Cali	ifornia	\$10.00
01-30-19 Refund F	ranchise Tax Board		-15.00
Government Fees to S	tate Attorney General, (Califormia	<u>\$25.00</u>
			\$20.00
Printing and Publicati	ons - line 22:		
Publication Req	uirement		\$78.75
Other Expenses - line	23:		
Bank Charges			\$25.00
Total Expenses			<u>\$873.75</u>

FEDERAL FORM 990-PF

F.E.I.N. 94-6098400

TAX YEAR ENDING 12/31/19

PART XV - SUPPLEMENTARY INFORMATION

Contributions Paid During the Year - line 3a, page 1 of 2

Donee's Name and Address	- <u>Relationshi</u>	Statement p of Purpose	<u>Amount</u>	
Break the Barriers	None	General	\$2,500.00	
8555 N Cedar Ave, Fresno, CA 93720				
Carmel Presbyterian Church	None	General	5000.00	
P. O. Box 846, Carmel, CA 93921	N.T	<i>C</i> 1	1000.00	
CBMC	None	General	1000.00	
P. O. Box 3308, Chattanooga, TN 37404	None	General	250.00	
<u>CSUF Foundation</u> 5241 N. Maple, fresno, CA,93740	none	General	250.00	
Center for Moslem Ministries	None	General	500.00	
P. O. Box 2730, Springfield, MO 65801	Hone	Ocherai	300.00	
Evangel Home	None	General	1250.00	
137 N. YOSEMITE, FRESNO, CA.,93701-1639				
Evangelical for Social Action	None	General	500.00	
1300 East Shaw Ave. #136, Fresno, CA	93710-7903			
Fresno Pacific University	None	General	2000.00	
1717 South Chestnut Ave., Fresno, CA937	702			
Fresno Rescue Mission	None	General	5000.00	
P. O. Box 1422, Fresno, CA. 93716-1422				
Fuller Seminary	None	General	2000.00	
135 N. Oakland Ave., Pasadena, CA. 91101-9781				
Fuller Seminary - School of World Miss		General	2000.00	
135 N. Oakland Ave., Pasadena, CA. 91101		<i>C</i> 1	2000.00	
FUND	None	General	3000.00	
1401 Divisadero, Fresno, CA. 93721	None	General	1000.00	
Haggai Institute P. O. Box 13, Atlanta, Georgia 30370-9901		General	1000.00	
Joyce Meyer Ministries	None	General	\$1,250.00	
P. O. Box 655, Fenton, MO, 63026-0655	TVOTIC	General	Ψ1,200.00	
1. 0. 200 000, 100000, 1110, 00020 0000				

THE ARMEY-HARVEY FOUNDATION, INC.			
Donee's Name and Address	Relationship	Statement of <u>Purpose</u>	Amount
K-Love Radio	None	General	\$500.00
P. O. Box 2098, Omaha, NE 68103-2098			
Link Care Center	None	General	2000.00
1734 W. Shaw Ave., Fresno, CA 93711			
Montage Health Foundation	None	General	5000.00
40 ryan Court, Suite 200, Monterey, CA, 939	940		
<u>Nami</u>	None	General	250.00
c/o Gail Hart, PO Box 295, Shaver Lake, CA	93664		
National Assoc. of Evangelicals	None	General	250.00
P. O. Box 28, Wheaton, IL. 60189-9974			
Ray of Hope	None	General	2500.00
2610 W. Shaw Lane, Suite 105, Fresno, CA S	93711-2775		
Right to Life Central California	None	General	500.00
1742 E. Griffith Way, Fresno, CA. 93726			
San Joaquin River Pkwy. Conservation T	None	General	500.00
11605 Old Friant Rd., Fresno, CA 93730-97	/01 None	General	1000.00
The Salvation Army 1854 Fulton St., Fresno, CA. 93721	None	General	1000.00
Valley PBS	None	General	250.00
1544 Van Ness Ave., Fresno, CA 93721	110210	General	200.00
Youth for Christ, Fresno/Madera	None	General	\$2,500.00
P. O. Box 4117, Fresno, CA. 93744			
Total			\$ 42,500.00