Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as 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.

2000

2019

	Fore	calendar year 2019 or tax year beginning DEC	1, 2019	, and ending	JUN 30, 2020		
	Nar	ame of foundation			A Employer identification	number	
$\ddot{\tilde{c}}$	B	BAUCHIERO FAMILY FOUNDATION	Ι		84-3866918		
202		mber and street (or P O box number if mail is not delivered to street ad	dress)	Room/suite	B Telephone number 615-476-5462		
63		506 WAXWOOD DR					
0		ty or town, state or province, country, and ZIP or foreign po BRENTWOOD, TN 37027	C If exemption application is p	ending, check here			
N 0 N		Check all that apply: X Initial return Final return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here	
		Address change	Name change		2. Foreign organizations me check here and attach co	eting the 85% test,	
ANNED	H 0	Check type of organization: X Section 501(c)(3) exe			1		
Z	Γ		Other taxable private founda	ition	E If private foundation sta under section 507(b)(1)		
1	ı Fa	air market value of all assets at end of year J Accountin		Accrual	F If the foundation is in a	. ,,	
V		· I ===	ner (specify)		under section 507(b)(1)	. —	
S		▶\$ 4,041. (Part I, colum	n (d), must be on cash bas	ıs.)	, , , ,		
0./	Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
MA	_	1 Contributions, gifts, grants, etc., received	1,541,572.		N/A	1	
		2 Check I if the foundation is not required to attach Sch. B					
		Interest on savings and temporary cash investments				-	
		4 Dividends and interest from securities	3,248.	3,248.		STATEMENT 1	
		5a Gross rents			10.00		
		h Net rental income or (loss)			120	1000 1	
	a	68 Net gain or (loss) from sale of assets not on line 10					
	Ž	b assets on line 6a		· · · · · · · · · · · · · · · · · · ·	S 0202 9 2	1730 5	
	Revenue	7 Capital gain net income (from Part IV, line 2)		0.	100		
	-	o Net Short-term capital gain			MAVI	134	
		9 Income modifications Gross sales less returns				270	
		10a and allowances					
		b Less Cost of goods sold c Gross profit or (loss)					
		11 Other income					
		12 Total. Add lines 1 through 11	1,544,820.	3,248.		i i	
		13 Compensation of officers, directors, trustees, etc	0.	0.		0.	
		14 Other employee salaries and wages					
		15 Pension plans, employee benefits					
	es	16a Legal fees STMT 2	2,872.	0.		0.	
	penses	b Accounting fees		· · · · · · · · · · · · · · · · · · ·			
				-			
	Administrative Ex	17 Interest					
	тat	a 18 Taxes					
,	nis	19 Depreciation and depletion				<u> </u>	
	Ę	20 Occupancy				_	
					· · · · · · · · · · · · · · · · · · ·	·	
	and	22 Printing and publications					
	Operating	23 Other expenses 24 Total operating and administrative					
	era	expenses. Add lines 13 through 23	2,872.	0.		0.	
	ô	25 Contributions, gifts, grants paid	1,537,907.			1,537,907.	
		26 Total expenses and disbursements.	_,,				
		Add lines 24 and 25	1,540,779.	0.		1,537,907.	
		27 Subtract line 26 from line 12:					
		a Excess of revenue over expenses and disbursements	4,041.	· · · · · · · · · · · · · · · · · · ·			
		b Net investment income (if negative, enter -0-)		3,248.			
		c Adjusted net income (if negative, enter -0-)			N/A	<u> </u>	

D	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
	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		4,041.	4,041.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts			
s	8	Inventories for sale or use	_		
Assets	9	Prepaid expenses and deferred charges	·		
As	10a	Investments - U.S. and state government obligations			
		Investments - corporate stock			
	1	Investments - corporate bonds			
		Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			<u> </u>
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe			
		Total assets (to be completed by all filers - see the			-
		instructions. Also, see page 1, item I)	0.	4,041.	4,041.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
s	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			[
abil	21	Mortgages and other notes payable			<u></u>
Ξ	22	Other liabilities (describe 🕨)			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	!
		Foundations that follow FASB ASC 958, check here			
S		and complete lines 24, 25, 29, and 30.			
alances	24	Net assets without donor restrictions			
	25	Net assets with donor restrictions			
ᅙ		Foundations that do not follow FASB ASC 958, check here			
Ē		and complete lines 26 through 30.	0.	0.	
ō	26	Capital stock, trust principal, or current funds	0.	0.	
sets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	4,041.	
Ass	28	Retained earnings, accumulated income, endowment, or other funds	0.	4,041.	<u> </u>
Net Assets or Fund B	29	Total net assets or fund balances	<u> </u>	4,041.	<u>'</u>
_	20	Total liabilities and net assets/fund balances	0.	4,041.	ļ
_			**		<u>-</u>
P	art	Analysis of Changes in Net Assets or Fund Ba	liances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	29		
		st agree with end-of-year figure reported on prior year's return)		[1]	0.
2	Ente	r amount from Part I, line 27a		2	4,041.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	4,041.
5	Decr	eases not included in line 2 (itemize)		5_	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 29		4,041.
					Form 990-PF (2019)

Form **990-PF** (2019)

09450928 152366 080440

Except personal foundations section 4940(e), check here = and enter **UNA** on the 1.		990-PF (2019) BAUCHIERO FAMILY FOUNDATION	/-\ 4040/E\ 4		84-386		Page 4	
Dates for fulling or determination letter: A content of the production shat meet the section 4940(e) requirements in Part V, check here				940(e), or 49	48 - See	instructio	ns)	;
D Domestic foundations that meet the section 4940(e) requirements in Part V, check here)				
of Part I, Inne 27b (• All other domestic foundations enter 2% of Inne 27b. Exempt foreign organizations, enter 4% of Part I, Inne 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 Add lines 1 and 2 5 Subitle 4, (income) lax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 5 Tax based on investment leneme. Subtract line 4 from line 3, if zero or less, enter -0- 5 Tax based on investment leneme. Subtract line 4 from line 3, if zero or less, enter -0- 5 Exempt foreign organizations: ax withheld at source 5 Exempt foreign organizations: ax withheld at source 6 B 0 0. 6 Exempt organizations are withheld at source 6 B 0 0. 7 Total credits and payments. Add lines 5a through 64 8 Eiter any penalty for underpayment of stimated tax. Check hare		Date of ruling or determination letter' (attach copy of letter if nec	es <u>sary</u> -see instruct	ions)				
and Nother domestic foundations enter 2% of the 27b, Exempt foreign organizations, sinter 4% of Part I, Ihm e12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 Add lines 1 and 2 4 Substite A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-) 5 Cerdeds/Payments: 5 Concept and the section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 6 Cerdeds/Payments. 5 Concept and the section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 6 Cerdeds/Payments. 7 Cerdeds/Payments. 8 Cerdeds/Payments. 7 Cerdeds/Payments/Payments/Payments/Payments/Payments/Payments/Payments/Pay	Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1°	%	_1		65.	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 6 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 6 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 6 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 6 Tax based on investment programment or sections of the following or conceuts withheld at source 6 b 0. 6 D 0- 6 D		of Part I, line 27b						
3 65. 4 Subtite A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment faceme. Subtract line 4 from line 3. If zero or less, enter -0- 5 Cordist/Payments: 6 Cordist/Payments: 7 Subtite A (income) tax withheld at source 8 Do	C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4%	of Part I, line 12, c	ol. (b) 丿				
Subtitlé A (nocme) bax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments: a 2019 estimated tax payments and 2018 overpayment credited to 2019 5 Exempt foreign organizations: tax withheld at source 6 a 0 . 6 a 0 . 6 a 0 . 6 Backup withholding erroscously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 G 5. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount ower if the compayment of the total of the side of	2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, oth	ers, enter -0-)		2			
Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 C credits/Payments: 2019 estimated tax payments and 2018 overpayment credited to 2019 Exempt foreign organizations - tax withheld at source C Tax pad with application for extension of time to this (Form 8888) B ackup withholding erroneously withheld C Total credits and payments, Add lines 8a through 6d B ackup withholding erroneously withheld C Total credits and payments, Add lines 8a through 6d B ackup withholding for underpayment of estimated tax. Check here if Form 2220 is attached C Total credits and payments, Add lines 8a through 6d B ackup withholding erroneously withheld C Total credits and payments, Add lines 8a through 6d B ackup withholding erroneously withhold C Total credits and payments, Add lines 8a through 6d B ackup withholding erroneously withhold C Total credits and payments, Add lines 8a through 6d B ackup withholding erroneously withhold C Total credits and payments, Add lines 8a through 6d B ackup withholding erroneously withhold C Total credits and payments, Add lines 8a through 6d B ackup withholding erroneously erroneously be a form 2220 is attached C Total credits and payments, Add lines 8a through 6d B ackup withholding erroneously be a form 2220 is attached C Part VII-A Statements Regarding Activities 1a During the lax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the lax year, did the foundation attempt to mifluence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the lax year, did the foundation attempt to mifluence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the lax year, did the foundation attempt to mifluence any national, state, or local legislation or did it participate or intervene in any or local legislation attended to the activates. 2	3	Add lines 1 and 2			3			
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a 2019 estimated tax payments and 2018 overpayment credited to 2019 b Exempt foreign organizations - tax withheld at source c fax paid with application for extension of time to file (Form 8868) d Backup withholding errorizously withheld d Backup withholding errorizously withheld c Fax paid with application for extension of time to file (Form 8868) d Backup withholding errorizously withheld T Total credits and payments. Add lines 6a through 65 Effect any penalty for underpayment of estimated fax. Check here I if Form 2220 is attached T Tax due. If the total of lines 5 and 8 is more than the 7, enter amount owed T Tax due. If the total of lines 5 and 8 is more than the total of lines 5 and 8, enter the amount owed T Tax due. If the total of lines 5 and 8 is more than the total of lines 5 and 8, enter the amount overpaid T Inter 1 is more than the total of lines 5 and 8, enter the amount overpaid T Inter 1 is more than the total of lines 5 and 8, enter the amount overpaid T Inter 1 is more than 10 to be; Credited to 2020 estimated tax ► Refunded Inter the amount of line 10 to be; Credited to 2020 estimated tax ► Refunded Inter the amount of line 10 to be; Credited to 2020 estimated tax ► Refunded Inter the amount of line 10 to be; Credited to 2020 estimated tax Lex the amount overpaid Enter the amount of line 10 to be; Credited to 2020 estimated tax Lex the amount overpaid Line and the specific tax the second of the activities of line and the analyses of the activities of line and the activities of line and the analyses of the foundation of the activities of line and the activities of	5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5		65.	:
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Tax paid with application for extension of time to file (Form 8868) ### Backup withholding erroneously withheld ### Total credits and payments. Add lines 5a through 60 ### Tax due. If the total of lines 5 and 8 is more than time 7, enter amount owed ### To voice than 10 to 10	а	2019 estimated tax payments and 2018 overpayment credited to 2019	6a					
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8 Enter any penalty for underpayment of estimated tax. Check here	d	Backup withholding erroneously withheld	6d	0.				
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owerpaid 11 Finet the amount of line 10 to be. Credited to 2020 estimated tax \(\) Refunded \(\) 11 Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 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. c Did the foundation State S	7	Total credits and payments. Add lines 6a through 6d			7			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of hie 10 to be; Credited to 2020 estimated tax Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1b Did it spend more than \$100 during the year (either directly) for political purposes? See the instructions for the definition if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 1c Did the foundation in Connection with the activities. 2 Did the foundation in Connection with the activities. 3 C. (2) On foundation managers. ★ \$ O. ■ 2 Has the foundation managers A \$ O. ■ (2) On foundation managers. ★ \$ O. ■ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 11 Yes, "attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If Yes, "attach a conformed copy of the changes 3 A X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 10 Yes, "has it flied a tax return on Form 990-T for this year? 11 Yes, "attach the statement required by General Instruction 7 2 A By Istale legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument, or 2 By Istale legislation that effectively amends the go	8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attac	ched		8			
11 Enter the amount of time 10 to be; Credited to 2020 estimated tax	9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		▶	9		<u>65.</u>	
Part VII-A Statements Regarding Activities	10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		. ▶	10			,
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition is the definition of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation in Connection with the activities. c Did the foundation fle Form 1120-PDL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$				Refunded -	11			
any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 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. c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0. e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0. 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. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4 Did the foundation have instaled business gross income of \$1,000 or more during the year? b If "Yes," attach a detailed description of the activities. 1 If "Yes," attach a detailed description of the activities. 1 If "Yes," attach a detailed description of the activities. 2 X If "Yes," attach a detailed description of the activities. 3 X 4 But the foundation harmalized business gross income of \$1,000 or more during the year? N/A 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? STMT 3 If "Yes," attach the statement required by General Instruction T A re the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or 9 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, or	L							
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 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. c Did the foundation file Form 1120-PDL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ► \$	1a	During the tax year, did the foundation attempt to influence any national, state, or local legisla	lation or did it partic	ipate or intervene	ın	Y		
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. c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year; (1) On the foundation. \$\Bigs \ 0. (2) On foundation managers. \$\Bigs \ 0. \ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$\Bigs \ 0. \ 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. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4 Did the foundation have unrelated business gross income of \$1,000 or more during the year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 8 If "Yes," attach the statement required by *General Instruction T\$ 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 X 8a Enter the states to which the foundation reports or with which it is registered. See instructions. TN b) If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by *General Instruction Ge? If "No," attach explanation 9 Is the foundation claiming status as a priva		any political campaign?				1a		
distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-P0L for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ 0. (2) On foundation managers. \$ 0. e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0. 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. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? b If 'Yes,' has if filed a tax return on Form 990-T for this year? b If Yes,' attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 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 furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation 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.	b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses? See the instruc	tions for the defini	tion	1b	X	
c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$		If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies o	if any materials pub	lished or				
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 . e Enter the reimbursement (if any) pad by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0 . 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. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated busness gross income of \$1,000 or more during the year? b If "Yes," has it filed a tax return on Form 990-T for this year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 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 furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation of each state as required by General Instruction G? If "No," attach explanation is 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		distributed by the foundation in connection with the activities.				_		
(1) On the foundation. ▶ \$	C	Did the foundation file Form 1120-POL for this year?				10	X	
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year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV		of each state as required by General Instruction G? If "No," attach explanation				8b X	<u> </u>	
	9	Is the foundation claiming status as a private operating foundation within the meaning of sec	ction 4942(j)(3) or 4	1942(j)(5) for caler	ıdar	_]	(1)
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 4 10 X		year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," comp	plete Part XIV				X	_
Form 990-PF (2010)	10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedul	le listing their names an	d addresses S			_	

BAUCHIERO FAMILY FOUNDATION 84-3866918 Form 990-PF (2019) Page 5 Part VII-A Statements Regarding Activities (continued) Yes No 11. At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? SEE STATEMENT 5 SEE STATEMENT 6 If "Yes." attach statement, See instructions 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? X 13 Website address N/A Telephone no. $\triangleright 615 - 476 - 5462$ 14 The books are in care of JAMES BAUCHIERO Located at ▶ 506 WAXWOOD DRIVE, BRENTWOOD, ZIP+4 ▶37027 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here N/A and enter the amount of tax-exempt interest received or accrued during the year Yes No 16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 16 See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly): Yes X No (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) Yes X No a 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? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No 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 Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations N/A 1b section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected X before the first day of the tax year beginning in 2019? 10 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines Yes X No 6d and 6e) for tax year(s) beginning before 2019? If "Yes," list the years b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach N/A statement - see instructions.) 2b c if the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year? b If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, N/A Schedule C, to determine if the foundation had excess business holdings in 2019.) 3b 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a

Form 990-PF (2019)

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

had not been removed from jeopardy before the first day of the tax year beginning in 2019?

Form 990-PF (2019) BAUCHIERO FAMILY FOUNDAT			84-38669	18	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4/20 May Be R	equirea _{(contin}	ued)	IV-	-1 11-
5a During the year, did the foundation pay or incur any amount to:				Ye	s No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	es X No	-	
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire]	
any voter registration drive?			es 🗓 No	-	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	,	Y6	es 🛣 No	-	
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section			- 1	
4945(d)(4)(A)? See instructions	Y6	es 🗓 No	-		
(5) Provide for any purpose other than religious, charitable, scientific, literary,			}		
the prevention of cruelty to children or animals?		Ye	es 🗶 No	l	1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ier the exceptions described i	n Regulations	_	_	_
section 53.4945 or in a current notice regarding disaster assistance? See instru	ctions		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check h	ere				1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ned			
expenditure responsibility for the grant?	N	/A 🔲 Ye	es 🔲 No	- 1	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to g	pay premiums on				
a personal benefit contract?	•	Ye	s X No	1	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.					1
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			/-	7b	\top
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$					\top
excess parachute payment(s) during the year?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		es X No		1 1
Part VIII Information About Officers, Directors, Truste	es. Foundation Mar		, ,		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, and foundation managers and th	eir compensation.	•			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E:	xpense nt, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	accour	nt, other vances
1 1					
SEE STATEMENT 7		0.	0.		0.
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2 Compensation of five highest-paid employees (other than those incl	uded on line 1). If none, o	enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(e) E:	xpense nt, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	accour	nt, other vances
NONE	devoted to position		compensation	unov	ranoco
1,0113					
		<u> </u>			
		-			
]		
T 4 1 must be a father and a second accordance (Arc) 200		1			0
Total number of other employees paid over \$50,000			<u> </u>	000 0	
			Form	330-21	F (2019)

Form **990-PF** (2019)

ĮŖ.	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions.)
1 ,	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	511,000. 3,620.
b	Average of monthly cash balances	1b	3,620.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	514,620.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	514,620.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	7,719.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	506,901.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	14,750.
ĮP.	art·XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations, check here ■ and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	14,750.
2a	Tax on investment income for 2019 from Part VI, line 5	933	
b	Income tax for 2019. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	65.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	14,685.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5 .	14,685.
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	14,685.
P	art:XIII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	971	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,537,907.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	1,537,907.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,537,907.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	ualifies for	the section

Form **990-PF** (2019)

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7	·		-	14,685.
				14,000.
2 Undistributed income, if any, as of the end of 2019 a Enter amount for 2018 only			0.	
b Total for prior years:			<u> </u>	
g rotal for prior years.		0.		
3 Excess distributions carryover, if any, to 2019		0.		
a From 2014				
b From 2015				
¢ From 2016				
d From 2017				
e From 2018	•			
f Total of lines 3a through e	0.			-
4 Qualifying distributions for 2019 from				
Part XII, line 4 ▶ \$ 1,537,907.				
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior	******			
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	·			
(Election required - see instructions)	0.			1
d Applied to 2019 distributable amount				14,685.
e Remaining amount distributed out of corpus	1,523,222.			
5 Excess distributions carryover applied to 2019	2,020,2220			
(If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,523,222.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable		·	-	
amount - see instructions		0.		Ì
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				0.
7 Amounts treated as distributions out of				•
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020.				1
Subtract lines 7 and 8 from line 6a	1,523,222.			ĺ
O Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019 1,523,222.				
6 LAUGSS HUIH 2019 1, 323, 222 .		<u> </u>		F 990-PE (0010)

	RO FAMILY F				866918 Page 10
Part XIV Private Operating F			A, question 9)	N/A	
1 a if the foundation has received a ruling of					
foundation, and the ruling is effective for			. ▶ ∟_	<u></u>	
b Check box to indicate whether the foun		ng foundation described i		4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(5) 0010	Prior 3 years	(4) 0040	- / / / / / / / / / / / / / / / / / / /
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed					4
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		l			
e Qualifying distributions made directly				/	
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon; 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			1		
2/3 of minimum investment return		/	1		
shown in Part X, line 6, for each year					
listed					
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 royalties)					-
(2) Support from general public and 5 or more exempt					
organizations as provided in					,
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	<u> </u>	<u> </u>			1
Part XV Supplementary Info			f the foundatio	n had \$5,000 or mo	re in assets
at any time during	ine year-see instr	uctions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wi			ibutions received by t	the foundation before the clo	se of any tax
year (but only if they have contributed	more than \$5,000). (See s	ection 507(d)(2).)			
SEE STATEMENT 8					
b List any managers of the foundation wi			or an equally large po	rtion of the ownership of a p	artnership or
other entity) of which the foundation ha	is a 10% or greater interes	st.			
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	Scholarship, etc., Pro	ograms:		
Check here 🕨 🗶 if the foundation	only makes contributions (to preselected charitable	organizations and doe	s not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.	, to individuals or organiza	ations under other conditi	ons, complete items 2	2a, b, c, and d.	
a The name, address, and telephone num	iber or email address of th	e person to whom applic	ations should be addr	essed:	
				<u>, ,</u>	
b The form in which applications should	be submitted and informat	tion and materials they sh	ould include.		
c Any submission deadlines:	1				
Anu vootsietene en landetene en e	do quab oo bu assessess	al areas aboutable feel-	kinds of institutions	or other featers:	
d Any restrictions or limitations on award	is, such as by geographica	n areas, charitable fields,	kinas oi institutions,	or other factors;	

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year CATHOLIC COMMUNITY FOUNDATION OF LOS NONE PUB. CHARITY DONATION ANGELES 3440 WILSHIRE BLVD, STE 530 LOS ANGELES, CA 90010 1,533,000. NONE PUB. CHARITY DONATION ALIVE HOSPICE 1718 PATTERSON ST NASHVILLE, TN 37203 2,000. PREDATORS FOUNDATION NONE PUB. CHARITY DONATION 501 BROADWAY 663. NASHVILLE, TN 37203 NONE PUB. CHARITY DONATION FATHER RYAN HIGH SCHOOL 700 NORWOOD DR 1,900. NASHVILLE, TN 37204 FOOD FOR THE HUNGRY NOITANO NONE PUB. CHARITY 206 BRIDGE ST 210. FRANKLIN, TN 37064 SEE CONTINUATION SHEET(S) 1,537,907. **▶** 3a Total b Approved for future payment NONE 0. **▶** 3b Total Form 990-PF (2019)

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Yo	ear (Continuation)			
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	Contribution	
ST JUDE CHILDREN'S RESEARCH HOSPITAL	NONE	PUB. CHARITY	DONATION	
262 DANNY THOMAS PLACE				
MEMPHIS, TN 38105				134.
				1
		İ		
	1			
				ļ
	<u> </u>	 		+
	 			
	-			
	<u> </u>		<u> </u>	124
Total from continuation sheets				134.

BAUCHIERO	FAMILY	FOUNDATIO

nter gross amounts unless otherwise indicated.	Unrelated t	ousiness income		d by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
Program service revenue:	Code		-		
a b	-				
d					
			1 1		
e	_	*		-	
g Fees and contracts from government agencies				-	
Membership dues and assessments		··· = ••			
Interest on savings and temporary cash			1	-	
investments					
Dividends and interest from securities			14	3,248.	
Net rental income or (loss) from real estate:				.,	
a Debt-financed property			 		
b Not debt-financed property	<u> </u>			†	
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events				-	
Gross profit or (loss) from sales of inventory	-		1	1	
Other revenue:	<u> </u>			1	
Other revenue.					
4	1				
a	_ _		+ +		
b					
b	_				
b	_				
b	_	0		3.248.	
b	_	0	•	3,248.	
b		0	•	:	3,24
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations	3.)			13	
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie	s to the Accom	plishment of E	xempt P	13 Purposes	3,24
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which	s to the Accom	plishment of E	xempt P	13 Purposes	3,24
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie	s to the Accom	plishment of E	xempt P	13 Purposes	3,24
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which	s to the Accom	plishment of E	xempt P	13 Purposes	3,24
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which	s to the Accom	plishment of E	xempt P	13 Purposes	3,24
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which	s to the Accom	plishment of E	xempt P	13 Purposes	3,24
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which	s to the Accom	plishment of E	xempt P	13 Purposes	3,24
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which	s to the Accom	plishment of E	xempt P	13 Purposes	3,24
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b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which	s to the Accom	plishment of E	xempt P	13 Purposes	3,24
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which	s to the Accom	plishment of E	xempt P	13 Purposes	3,24
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which	s to the Accom	plishment of E	xempt P	13 Purposes	3,24
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which	s to the Accom	plishment of E	xempt P	13	3,24
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which	s to the Accom	plishment of E	xempt P	13	3,24
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which	s to the Accom	plishment of E	xempt P	13	3,24
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which	s to the Accom	plishment of E	xempt P	13	3,24
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which	s to the Accom	plishment of E	xempt P	13	3,24
b c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which	s to the Accom	plishment of E	xempt P	13	3,24

Form 990-PF (2019) BAUCHIERO FAMILY FOUNDATION 84-3866918 Page 13 [Part;XVIII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1. Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets 1a(1) (2) Other transactions. (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (6) It the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.							
(a) Lir		(b) Amount involved	(c) Name of noncharitable		(d) Description of	of transfers, transactions, and sharing arrangements	
3-,-"		1-1	N/A		\-/		
			IV/A		+		
					+		
					 		
					 		
						<u> </u>	
			<u> </u>				
	_				_		
		·····			+		
							
					 		
					-		
					1		
		•	tly affiliated with, or related to, one	e or more tax-exempt organiza	ations described		
			n 501(c)(3)) or in section 527?			Yes X No	
<u> </u>	If "Yes," co	omplete the following sch					
		(a) Name of org	ganization	(b) Type of organization	(0	c) Description of relationship	
		N/A					
		-					
Sig He	and be		that I have examined this return, including inplete Declaration of preparer (other than			s any knowledge May the IHS discuss this return with the preparer shown below? See instr	
		Print/Type preparer's na	ame Preparer's s	signature	Date	Check If PTIN	
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Wood	- ' '	self- employed	
Pai	id	RONALD WOO	D, CPA RONALD		09/28/20	P00082166	
	parer		•			Firm's EIN ▶ 62-0788068	
	e Only	Firm's name PUK	YEAR & NOONAN,	CLVO		FIRM S EIN - 02-0/00000	
US	e Oilly	<u> </u>	D				
			BURTON HILLS B				
		<u>NA</u>	SHVILLE, TN 372	15		Phone no. 615-296-0500	
						Form 990-PF (2019)	

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

BAUCHIERO FAMILY FOUNDATION

Employer identification number

84-3866918

Organiza	ation type (check or	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 99)-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	
		s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions	
General	Rule		
X	-	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in more) one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions	ney or
Special	Rules		
	sections 509(a)(1) a any one contributor	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations u and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that receive or, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part I, line 1 Complete Parts I and II	d from
	year, total contribut	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, dur utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for elty to children or animals Complete Parts I, II, and III	
	year, contributions is checked, enter he purpose Don't com	n described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, dures exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this like the total contributions that were received during the year for an exclusively religious, charitable, etc., implete any of the parts unless the General Rule applies to this organization because it received nonexclusively le, etc., contributions totaling \$5,000 or more during the year.	оох
but it mu	ıst answer "No" on	hat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990 n 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 the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

Name of organization

Employer identification number

BAUCHIERO FAMILY FOUNDATION

84-3866918

Part I	Contributors (see instructions). Use duplicate copies of Part I if ac	dditional space is needed	_
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAMES BAUCHIERO 506 WAXWOOD DRIVE BRENTWOOD, TN 37027	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	NANCI BAUCHIERO 506 WAXWOOD DRIVE BRENTWOOD, TN 37027	\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

BAUCHIERO FAMILY FOUNDATION

84-3866918

art II	Noncash Property (see instructions). Use duplicate copies of Pa	rt 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	
_				
a) lo. om art l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
_		\$		
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		s		
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	

Employer identification number

BAUCHT	ERO FAMILY FOUNDATION			84-3866918
Part III	Exclusively religious, charitable, etc., contributi from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious. Course duplicate copies of Part III if additional states.	through (e) and the following line entry charitable, etc., contributions of \$1,000 or less	For organizations	hat total more than \$1,000 for the year
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of gift		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
-		(e) Transfer of gift		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of gift		
_	Transferee's name, address, an	Relationship of tra	nsferor to transferee	
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
Part I				
-		(e) Transfer of gift		
-	Transferee's name, address, and ZIP + 4		Relationship of tra	nsferor to transferee
				4

FORM 990-PF	DIVIDENDS	AND INTERE	EST FROM SECUR	ITIES S	PATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
WATSON LAND CO	3,248.	(3,248.	3,248.	
TO PART I, LINE 4	3,248.	(3,248.	3,248.	
FORM 990-PF		LEGAL	FEES	S	FATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C). ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES		2,872.	0.		0.
			· · · · · · · · · · · · · · · · · · ·		0.

FORM 990-PF	STATEMENT	CONCERNING LIQUIDATION,	STATEMENT 3
	TERMINATION,	ETC PART VII-A, LINE 5	

EXPLANATION

^{2,800} SHARES OF WATSON LAND COMPANY STOCK WITH A COST & FMV OF \$1,533,000 WAS DISTRIBUTED TO CATHOLIC COMMUNITY FOUNDATION OF LA ON FEBURARY 4, 2020. CATHOLIC COMMUNITY FOUNDATION OF LA IS LOCATED AT 3440 WILSHIRE BLVD., STE. 530, LOS ANGELES, CA 90010.

LIST OF SUBSTANTIAL CONTRIBUTORS STATEMENT 4 FORM 990-PF PART VII-A, LINE 10 NAME OF CONTRIBUTOR ADDRESS 506 WAXWOOD DRIVE JAMES BAUCHIERO BRENTWOOD, TN 37027 506 WAXWOOD DRIVE NANCI C. BAUCHIERO BRENTWOOD, TN 37027

FORM 990-PF

EXPLANATION CONCERNING PART VII-A, LINE 12 QUALIFYING DISTRIBUTION STATEMENT

STATEMENT 5

EXPLANATION

THE FOUNDATION TREATED THE \$1,533,000 DISTRIBUTION TO CATHOLIC COMMUNITY FOUNDATION OF LOS ANGELES AS A QUALIFIED DISTRIBUTION.

FORM 990-PF

EXPLANATION CONCERNING PART VII-A, LINE 12 SECTION 170(C)(2)(B) STATEMENT

STATEMENT 6

EXPLANATION

CATHOLIC COMMUNITY FOUNDATION OF LOS ANGELES IS EXEMPT FROM FEDERAL TAX UNDER SECTION 501(C)(3). A DONOR-ADVISED FUND WITH THE ORGANIZATION ALLOWS FOR THE DEVELOPMENT AND SUSTAINMENT OF PHILANTHROPY IN SUPPORT OF CATHOLIC VALUES. SUPPORTED CAUSES INCLUDE: EDUCATION IN THE FAITH, PROMOTING VOCATIONS, FOSTERING CULTURAL DIVERSITY AND CATHOLIC IDENTITY, BUILDING A CULTURE OF LIFE AND STRENGTHENING MARRIAGES AND FAMILIES.

FORM 990-PF PART VIII - LIST TRUSTEES AND	RT VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			STATEMENT 7	
NAME AND ADDRESS	TITLE AND COM	IPEN- 'ION	EMPLOYEE BEN PLAN CONTRIB		
JAMES BAUCHIERO 506 WAXWOOD DRIVE BRENTWOOD, TN 37027	PRESIDENT & DIRECTO	OR 0.	0.	0.	
NANCI BAUCHIERO 506 WAXWOOD DRIVE BRENTWOOD, TN 37027	SECRETARY & DIRECTO	OR 0.	0.	0.	
GINA SCOTT 524 DEKEMONT LANE BRENTWOOD, TN 37027	DIRECTOR 2.00	0.	0.	0.	
DANIEL BAUCHIERO 502 ABBEY DRIVE BRENTWOOD, TN 37027	DIRECTOR 2.00	0.	0.	0.	
RYAN BAUCHIERO 514 DEKEMONT LANE BRENTWOOD, TN 37027	DIRECTOR 2.00	0.	0.	0.	
ROBERT BAUCHIERO 1601 GARTLAND STREET NASHVILLE, TN 37206	DIRECTOR 2.00	0.	0.	0.	
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.	

FORM 990-PF	PART XV - LINE 1A	STATEMENT	8
	LIST OF FOUNDATION MANAGERS		

NAME OF MANAGER

JAMES BAUCHIERO NANCI BAUCHIERO