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2019

OMB No. 1545-0052

Return of Private Foundation

Form 990-PF

Department of the Treasury

Internal Revenue Service

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

		ndar year 2019, or tax year beginning 10-01-20)19 , aı	nd ending 09			
		Indation SOUTHEAST ALABAMA INC				lentification numbe	r
				63-12084	32		
Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone no (334) 793-778				umber (see instruction	ns)		
				(334) 793	-778	9	
		n, state or province, country, and ZIP or foreign postal code L 36302		C If exem	ption	application is pending	g, check here
G Ch	eck al	l that apply:	former public charity	D 1. Fore	ign oı	ganizations, check he	re
		\square Final return \square Amended return				rganizations meeting	
		\square Address change \square Name change				ck here and attach cor	· _
l Ch	eck ty	$ \nabla$ pe of organization: $ \nabla$ Section 501(c)(3) exempt private	foundation			undation status was t on 507(b)(1)(A), chec	
	Section	1 4947(a)(1) nonexempt charitable trust	e private foundation				
of '	year (f	xet value of all assets at end from Part II, col. (c), ▶\$ 425,977 Accounting method: □ Other (specify) (Part I, column (d) must	☑ Cash ☐ Accru			ation is in a 60-month on 507(b)(1)(B), checl	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	(b) Net investm income	ent	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check ► ✓ if the foundation is not required to attach					
	3	Sch. B Interest on savings and temporary cash investments	4,385		4,385	4,385	
	4	Dividends and interest from securities					
	5a	Gross rents	10,000	1	0,000	10,000	
	b	Net rental income or (loss) -16,031					
Ж	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	b	Gross sales price for all assets on line 6a					
ă	7	Capital gain net income (from Part IV, line 2)					
	8	Net short-term capital gain					
	9 10a	Income modifications					
	b	Gross sales less returns and allowances Less: Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	72,116			72,116	
	12	Total. Add lines 1 through 11	86,501	1	4,385	86,501	
	13	Compensation of officers, directors, trustees, etc.					
	14	Other employee salaries and wages					
es	15	Pension plans, employee benefits					
ens	16a	Legal fees (attach schedule)					
ă ×	b	Accounting fees (attach schedule)					
Operating and Administrative Expenses	С	Other professional fees (attach schedule)	3,482				
a E	17	Interest					
<u> </u>	18	Taxes (attach schedule) (see instructions)	1,699			ļ	
	19	Depreciation (attach schedule) and depletion	7,783		4,812	4,812	
AG	20	Occupancy	110				
ב ב	21 22	Travel, conferences, and meetings	110				
ਰ ਹ	23	Other expenses (attach schedule)	54,403	2	1,219	21,219	28,232
E	24	Total operating and administrative expenses.	2.,100	_	,	,	
ě		Add lines 13 through 23	67,477	2	6,031	26,031	28,232
5	25	Contributions, gifts, grants paid	30,000			<u> </u>	30,000
	26	Total expenses and disbursements. Add lines 24 and					
		25	97,477	2	6,031	. 26,031	58,232
	27	Subtract line 26 from line 12: Excess of revenue over expenses and					
	а	disbursements	-10,976				
	b	Net investment income (if negative, enter -0-)			C		
	С	Adjusted net income (if negative, enter -0-)				60,470	

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29 30

Part III

2

3

4

5

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Analysis of Changes in Net Assets or Fund Balances

		should be for end-or-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	83,247	75,671	75,671
	2	Savings and temporary cash investments	345,921	350,306	350,306
	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 (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		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 (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶261,128			
		Less: accumulated depreciation (attach schedule) ▶ 128,187	140,726	132,941	
	15	Other assets (describe >)			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	569,894	558,918	425,977
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
api	21	Mortgages and other notes payable (attach schedule)			
ן⊏	22	Other liabilities (describe >)			
	23	Total liabilities (add lines 17 through 22)		0	
-					
se s		Foundations that follow FASB ASC 958, check here ▶ ☐			
ances		and complete lines 24, 25, 29 and 30.			
<u> </u>	24	Net assets without donor restrictions			
핕	25	Net assets with donor restrictions			
or Fund Bal		Foundations that do not follow FASB ASC 958, check here V			
-		and complete lines 26 through 30.			
	26	Capital stock, trust principal, or current funds			
set	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
A}	28	Retained earnings, accumulated income, endowment, or other funds	569,894	558,918	
Net Assets	29	Total net assets or fund balances (see instructions)	569,894	558,918	
2	20	Tatal liabilities and not associately and halamans (assignment in the continue of the continue	FC0 804	FF0.010	

569,894

558,918

569,894

-10,976

558,918

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	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item I)	569,894	558,918	
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			
ΙΞ̈́	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			

	pe the kind(s) of property sold (e.g., arehouse; or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
-					
-					
-					
	(f)		(g)	(1	h)
(e) Gross sales price	Depreciation allowed		other basis	Gain o	r (loss)
	(or allowable)	plus exp	ense of sale	(e) plus (f) minus (g)
a					
b					
С					
d					
e					
Complete only for asset	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(I)
(i)	(i)		(k)		h) gain minus
F.M.V. as of 12/31/69	Adjusted basis as of 12/31/69		s of col. (i) ·l. (j), if any		less than -0-) or om col.(h))
	as 01 12/31/09	Over co	i. (j), ii aliy	203303 (110	5111 601.(11))
a b					
d d					
e					
	(If gain, also enter in F	Part I line 7		
·	gain or (loss) as defined in sections : art I, line 8, column (c) (see instructi	. ,	o- }	3	
2 110			,		
_	Under Section 4940(e) for Re				
(For optional use by domestic I	private foundations subject to the sec	ction 4940(a) tax on n	et investment incom	e.)	
	eave this part blank. ne section 4942 tax on the distributal ot qualify under section 4940(e). Do			. Ye	es 🗸 No
	mount in each column for each year;				
(a)				(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharital		Distribution rati (col. (b) divided by c	ol. (c))
2018	58,220		421,061		0.138270
2017	80,370		377,777		0.212745
2016	72,018		370,566		0.194346
2015	66,310		362,610		0.182869
2014	39,311		324,327	I	0.121208
2 Total of line 1, column (•		2		0.849438
	o for the 5-year base period—divide t ndation has been in existence if less		6.0, or by the 3		0.169888
	oncharitable-use assets for 2019 from		4		423,319
		•	5		71,917
	ent income (1% of Part I, line 27b)		6		
			7		71,917
	ions from Part XII, line 4 ,				58,232
	eater than line 7, check the box in Pa			g a 1% tax rate. Se	

Page **6**

Ба	During the year did the foundation p	ay or incur any amount to:					Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?							
	(2) Influence the outcome of any specific public election (see section 4955); or to carry							
	on, directly or indirectly, any voter registration drive? Yes V							
	(3) Provide a grant to an individual	* * * * * * * * * * * * * * * * * * * *		Yes	✓ N	0		
	(4) Provide a grant to an organization in section 4945(d)(4)(A)? See in		· -					
	(5) Provide for any purpose other th			· · L Yes	✓ N	О		
	educational purposes, or for the	•		· · 🗌 Yes	✓ N			
b	If any answer is "Yes" to $5a(1)-(5)$,							
	Regulations section 53.4945 or in a			uctions	•	5b		
_	Organizations relying on a current no							
С	If the answer is "Yes" to question 5a tax because it maintained expenditu	` ''	•					
	If "Yes," attach the statement requir	· · · · · · · · · · · · · · · · · · ·		· · L Yes	L N₁	0		
5a	Did the foundation, during the year,	· -		ime on				
Ju	a personal benefit contract?			. —				
b	Did the foundation, during the year,			res	_ ✓ №	0 6b		No
	If "Yes" to 6b, file Form 8870.	, , ,	,, ,					
7a	At any time during the tax year, was	the foundation a party to a p	prohibited tax shelter trai	nsaction?	✓ N	_		
b	If "Yes", did the foundation receive a	any proceeds or have any net	income attributable to the	ne transaction?	· N	7b		
3	Is the foundation subject to the sect	ion 4960 tax on payment(s) o	of more than \$1,000,000	in remuneration or				
	excess parachute payment during th	e year?		· · 🔲 Yes	✓ №	ا		
	Information About C	officers, Directors, Trust	tees, Foundation Ma				,	
Pal	and Contractors							
1	List all officers, directors, trustee	s, foundation managers ar	nd their compensation	See instructions				
	(-) Name and address	(b) Title, and average	(c) Compensation (If	(d) Contributions t		e) Exper	nse acc	ount,
	(a) Name and address	hours per week devoted to position	not paid, enter -0-)	employee benefit plans deferred compensati		other a	llowane	ces
ee /	Additional Data Table		,	'				
2	Compensation of five highest-pai	d employees (other than t	hose included on line 1			enter "	NONE	."
'a \	Name and address of each employee	(b) Title, and average		(d) Contributions t employee benefit		e) Expen	50 3000	ount
,	more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		other al		
		devoted to position		compensation				
ON	<u> </u>							
ota	I number of other employees paid over	 er \$50,000 .						
		, -,				orm 99	0-PF	(2019
								,

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Part VIII Information About Officers, Directors, Trustees and Contractors (continued)	s, Foundation Managers, Highly Paid E	imployees,
3 Five highest-paid independent contractors for professional serv	vices (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		
Total number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include r organizations and other beneficiaries served, conferences convened, research papers pro		Expenses
1 ASSIST IN FURTHERING THE DEVELOPMENT AND IMPROVEMENT OF EM		
EDUCATIONAL ACTIVITIES SUCH AS FIRST AID TRAINING, BASIC AND AND OTHER PUBLIC EDUCATION PROGRAMS PROMOTING PREVENTION		23,818
2	OF ILLNESS AND INJURIES.	23,010
3		
4		
Part IX-B Summary of Program-Related Investments (See Describe the two largest program-related investments made by the foundation during	<u> </u>	Amount
1 N/A	g the tax year on lines I and 2.	Amount
2		
		-
All other program-related investments. See instructions.		
3		_
		-
Total. Add lines 1 through 3		
		Form 990-PF (2019)

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

6

1

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5

b

Part XII

6

7

1a

1b

2

3a 3b

4

5

58,232

58,232

58,232

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	n 990-PF (2019)	ctions)			Page 9
ľ	art XIII Undistributed Income (see instruc	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7	'	1		
2	Undistributed income, if any, as of the end of 2019:				-
	Enter amount for 2018 only				
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2019:				_
а	From 2014				
b	From 2015				
C	From 2016				
d	From 2017				
е	From 2018				
f	Total of lines 3a through e				
4	Qualifying distributions for 2019 from Part				
	XII, line 4: ► \$ 58,232				
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.				
	Remaining amount distributed out of corpus	58,232			
	Excess distributions carryover applied to 2019.	,			
-	(If an amount appears in column (d), the				
	same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	58,232			
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				
۵	—see instructions				
-	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				
/	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				

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applied on line 5 or line 7 (see instructions). . .

9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a

10 Analysis of line 9: a Excess from 2015. **b** Excess from 2016. c Excess from 2017. d Excess from 2018. e Excess from 2019.

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F	Part XIV Private Operating Found	lations (see instruc	ctions and Part VI	I-A, question 9)		
1a	If the foundation has received a ruling or de foundation, and the ruling is effective for 20			ating		2004-01-05
b	Check box to indicate whether the organizat	ion is a private operat	ing foundation desc	ribed in section 🗹	4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Iotai
	year listed	21,166	21,053	18,889	18,528	79,636
	85% of line 2a	17,991	17,895	16,056	15,749	67,691
	Qualifying distributions from Part XII, line 4 for each year listed	58,232	58,220	80,370	72,030	268,852
a	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	58,232	58,220	80,370	72,030	268,852
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test—enter: (1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	14,111	14,035	12,593	12,352	53,091
С	"Support" alternative test—enter:	,	,	,	,-	
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income	/C				
Pa	rt XV Supplementary Information assets at any time during th			oundation had \$	5,000 or more i	n
	Information Regarding Foundation Man List any managers of the foundation who have before the close of any tax year (but only if List any managers of the foundation who ow	agers: ve contributed more the they have contributed n 10% or more of the	nan 2% of the total d more than \$5,000 stock of a corporati). (See section 507(ion (or an equally la	d)(2).)	1
2	ownership of a partnership or other entity) Information Regarding Contribution, Gr					
_	Check here ► ☑ if the foundation only mak unsolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, a	kes contributions to pr ition makes gifts, gran	eselected charitable its, etc. to individua	organizations and o	does not accept under	
a	The name, address, and telephone number of DENISE LOUTHAIN PO BOX 913 DOTHAN, AL 36302 (334) 793-7789	or e-mail address of tl	he person to whom	applications should	be addressed:	
ь 	The form in which applications should be su ANY FORMAT IS ACCEPTABLE	bmitted and informati	on and materials the	ey should include:		
С	Any submission deadlines: AS ANNOUNCED					

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

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30,000 **b** Approved for future payment

Total .

Form 990-F	` '					Page 12
Part XV	I-A Analysis of Income-Producing	Activities				
Enter gross	s amounts unless otherwise indicated.	Unrelated business income			on 512, 513, or 514	(e) Related or exempt function income
_	n service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See instructions.)
a <u>CTC</u> b SQU	CARDS ARE CREDITS	-				26,847 5,269
	THE GREETIS	-				3,203
d						
	and contracts from government agencies					
	ership dues and assessments					
	t on savings and temporary cash					4,385
	nds and interest from securities					Í
	ntal income or (loss) from real estate:					
	financed property					16.021
	lebt-financed property					-16,031
	nvestment income.					
	(loss) from sales of assets other than					
invento	<i>'</i>					
	ome or (loss) from special events: profit or (loss) from sales of inventory					
11 Other i	,					
a MANA	GEMENT FEES					40,000
b						
	al. Add columns (b), (d), and (e).					60,470
	Add line 12, columns (b), (d), and (e)			. :	13	60,470
(See we	orksheet in line 13 instructions to verify calcu	ılations.)				
Part XV	-			· · · · · · · · · · · · · · · · · · ·		
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's explanation instructions.)					
11A	TO ASSIST SOUTHEAST ALABAMA EMERGEN AND IMPROVEMENT OF EMERGENCY MEDICA					
1A	EDUCATIONAL ACTIVITIES INCLUDE, BUT A CARDIAC LIFE SUPPORT; ADVANCED TRAUN FIRST AID, BTLS, ACLS, AND PALS; AND PU PROGRAMS INCLUDE, BUT ARE NOT LIMITE AND OTHER SAFETY RELATED PROGRAMS.	MA LIFE SUPPOR BLIC EDUCATIO	T; PEDIATRIC ADV N PROGRAMS PRO	ANCED LIFE SUPPO MOTING PREVENTION	RT; INSTRUCTOR (ON OF ILLNESS ANI	COURSES IN CPR, D INJURIES. THESE
						_

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Part X	Information Re Exempt Organi		ions and Relationships With Nonchari	table		
		ndirectly engage in any of the following with a organizations) or in section 527, relating to	any other organization described in section 501 political organizations?		Yes	No
a Transf	ers from the reporting four	ndation to a noncharitable exempt organization	on of:			
(1)	Cash			1a(1)		No
				1a(2)		No
b Other	transactions:					
(1) 5	Sales of assets to a nonchar	itable exempt organization		1b(1)		No
(2) F	urchases of assets from a	noncharitable exempt organization		1b(2)		No
(3) F	tental of facilities, equipme	nt, or other assets		1b(3)		No
(4) F	leimbursement arrangemer	nts		1b(4)		No
(5) L	oans or loan guarantees.			1b(5)		No
(6) Pe	erformance of services or m	nembership or fundraising solicitations		1b(6)		No
c Sharir	ng of facilities, equipment, i	nailing lists, other assets, or paid employees		1c		No
of the	goods, other assets, or ser		folumn (b) should always show the fair market was foundation received less than fair market valuate foundation received less than fair market valuate foundation for services received.			
(a) Line No	b. (b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sha	ıring arra	ngemen	its
-						
	1					

Is the fo	oundation directly or indire	ectly affiliated with, or related to, one or mo	re tax-exempt organizations
		r than section $501(c)(3)$) or in section 527 ?	

described in section 501(c) (other than section 50	1(c)(3) or in section 527?	∟Yes 🛂 No
b If "Yes," complete the following schedule.		
(a) Name of organization	(b) Type of organization	(c) Description of relationship
		companying schedules and statements, and to the best rer (other than taxpayer) is based on all information of

which preparer has any knowledge. May the IRS discuss this return with the preparer shown 2021-02-02 Signature of officer or trustee Date Title

'		Here	
Paid Prepar Use Or	•	Prepa	

Sign (see instr.) 🗹 Yes 🗆 No Print/Type preparer's name Preparer's Signature Date PTIN Check if self-P00207912 employed ightharpoonupR BLAINE STEWART 2021-02-02 er BEVIS EBERHART BROWNING WALKER & STEWART Firm's EIN ▶63-1241501 nly Firm's address ▶ 1521 WEST MAIN STREET Phone no. (334) 793-4883 DOTHAN, AL 363011313

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If Expense account, (d) not paid, enter (e) other allowances hours per week Contributions to (b) devoted to position -0-) employee benefit plans and deferred compensation WES ETHEREDGE PRESIDENT O O O 000.00 50 TAR HILL ROAD DALEVILLE, AL 36322 WAYNE BLACKMON 0 V.PRESIDENT 0 000.00 PO BOX 358 BRANTLEY, AL 36009 ANNITTA LOVE SEC/TREAS 000.00 134 CANTABURY LANE MILLBROOK, AL 36054 KITTY HARRIS **TRUSTEE** 0 0 000.00 120 WEST ROSEMARY RD MONTGOMERY, AL 36109 **BOBBY BROOKS** TRUSTEE n 000.00 PO BOX 3811 PHENIX CITY, AL 36868 SEAN GIBSON **TRUSTEE** 0 0 000.00 600 COLUMBIA HIGHWAY DOTHAN, AL 36301 DAN GOSLIN TRUSTEE 000.00 2606 WAVERLY PKWY OPELIKA, AL 36830 BRUCE MCNEAL TRUSTEE 000.00 601 ROYAL PKWY DOTHAN, AL 36305 CHAD PHILLIPS TRUSTEE 000.00 2445 W STATE HWY 106 LETOHATCHEE, AL 36047 FRED PICH MD TRUSTEE O 000.00 100 CARNEGIE CT DOTHAN, AL 36305

LOIS PRIBULICK TRUSTEE 0

000.00 105 GUNTER AVE

WETUMPKA, AL 36092

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2019 Depreciation Schedule

Name: EMPACT SOUTHEAST ALABAMA INC

EIN: 63-1208432

	Deprecia	ation Schedule							
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
BUILDING	2002-10-10	125,353	54,507	S/L	39.0000	3,214	3,214	3,214	
AC UNITS (JACKSON GAS & AIR)	2011-02-18	13,584	13,584	S/L	15.0000				
BUILDING - SUITE 219	2012-12-07	45,288	7,887	S/L	39.0000	1,161	1,161	1,161	
IMPROVEMENTS - SUITE 219	2013-06-17	17,057	2,752	S/L	39.0000	437	437	437	
COMPUTER	1998-10-15	2,150	2,150	200DB	5.0000				
STORAGE SHED	2003-12-31	891	891	S/L	10.0000				
STORAGE SHED	2004-09-28	1,100	1,100	S/L	10.0000				
COPY MACHINE	2009-06-08	1,999	1,999	S/L	5.0000				
2014 FORD EXPLORER	2014-08-12	36,420	20,735	200DB	5.0000	1,975			
VEHICLE - ED SHERLING FORD	2017-04-20	17,286	14,796	200DB	5.0000	996			

TY 2019 Land, Etc. Schedule		
	Name:	EMPACT SOUTHEAST ALABAMA INC

DLN: 93491036006081

EIN: 63-1208432							
Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value			
	261,128	128,187	132,941				

CO 4000400

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TY 2019 Other Expenses Sche	dule			
Name:	EMPACT SOUTH	IEAST ALABAMA I	INC	
EIN:	63-1208432			
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RENTAL BUILDING				

4,202

17,017

1,077

2,000

23,818

4,952

750

ASSOCIATION DUES/RESERVE

REPAIRS & MAINTENANCE

INSURANCE

EXPENSES
BANK FEES

CONTRACT LABOR

CTC MATERIALS

OFFICE EXPENSE

INSURANCE

4,202

17,017

1,077

2,000

23,818

750

4,202

17,017

Description
Revenue and Expenses per Books
Revenue and Expenses per Books
Revenue and Expenses per Income
Revenue and Expenses

359

359

PO BOX RENT	148		
UNIFORMS	80		

Other Expenses Schedule

MISCELLANEOUS

TY	2019	Other	Income	Schedule

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DLN: 93491036006081

Name: EMPACT SOUTHEAST ALABAMA INC EIN: 63-1208432

Other Income Schedule					
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income		
CTC CARDS	26,847		26,847		
SQUARE CREDITS	5,269		5,269		
MANAGEMENT FEES	40,000		40,000		

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TY 2019 Other Professional	Fees Schedu	le	<u> </u>				
Name: EMPACT SOUTHEAST ALABAMA INC EIN: 63-1208432							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			

3,482

Category	Amount	Net Investment Income	Adj:
			_

INDIRECT OTHER PROFESSIONAL FEES

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TY 2019 Taxes Schedule				_
Name:	: EMPACT SOL	JTHEAST ALABAM	A INC	
EIN:	63-1208432			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INDIRECT TAXES/LICENSES	1,699			