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OMB No. 1545-0052

2020

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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
or	caler	ndar year 2020, or tax year beginning 01-01-20)20 , ar	nd ending 12-31-	-2020	
		ındation undation		A Employer id	entification numbe	r
		DA STYRES		23-7279902		
Num	ber and	d street (or P.O. box number if mail is not delivered to street address) hland Colony Pkwy Ste 802	Room/suite	B Telephone nu	ımber (see instruction	าร)
1.	320 TH9	mand colony rawy ste 602		(601) 939-3003	3	
		n, state or province, country, and ZIP or foreign postal code MS 39157	•	C If exemption	application is pendin	g, check here
						• ⊔
G Cł	neck al		former public charity		ganizations, check he	▶ ⊔
		☐ Final return ☐ Amended return☐ Address change ☐ Name change			rganizations meeting ck here and attach co	
1 Ch	neck tv	pe of organization: ✓ Section 501(c)(3) exempt private	foundation		undation status was t	
_		· · · · · · · · · · · · · · · · · · ·	e private foundation	under section	on 507(b)(1)(A), chec	k nere
Fai	r mark	(et value of all assets at end J Accounting method:	☑ Cash ☐ Accru		ation is in a 60-mont	
		rom Part II, col. (c), ▶\$ 19,082,492 ☐ Other (specify) _		under sectio	n 507(b)(1)(B), chec	k here 🕨 🗀
		(Part I, column (d) must	be on cash basis.)			
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	income	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach				(cush busis only)
		schedule)	456,000			
	2	Check ► ☐ if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	139,834	139,834	1	
	4	Dividends and interest from securities	174,896	174,896	5	
	5a	Gross rents				
	b	Net rental income or (loss)	86.1 + 246.440			
ZE	6a	Net gain or (loss) from sale of assets not on line 10	1,346,149			
Revenue	b	Gross sales price for all assets on line 6a 4,945,084				
ž	7	Capital gain net income (from Part IV, line 2)		1,353,027	,	
	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)	44,123	44,123		
	12	Total. Add lines 1 through 11	2,161,002	1,711,880		
	13	Compensation of officers, directors, trustees, etc.	66,523			
	14	Other employee salaries and wages				
ses	15	Pension plans, employee benefits				
Ē	16a b	Accounting fees (attach schedule)	4 ,950	4,950) 0	0
Operating and Administrative Expenses	C	Other professional fees (attach schedule)	202,485			
ΙΛe	17	Interest	22,627			
tra T	18	Taxes (attach schedule) (see instructions)	15,008			
E S	19	Depreciation (attach schedule) and depletion				
Ę	20	Occupancy	6,631			
₹	21	Travel, conferences, and meetings				
e E	22	Printing and publications	591			
Ĕ	23	Other expenses (attach schedule)	87,544	81,187		
era	24	Total operating and administrative expenses. Add lines 13 through 23	406,359	210,166	, o	
o o	25	Contributions, gifts, grants paid	914,750		-	914,750
	26	Total expenses and disbursements. Add lines 24 and				
		25	1,321,109	210,166	0	914,750
	27	Subtract line 26 from line 12:				
	а	Excess of revenue over expenses and disbursements	839,893			
	b	Net investment income (if negative, enter -0-)		1,501,714		
	С	Adjusted net income (if negative, enter -0-)				

For	n 990	-PF (2020)				Page 2	
Pa	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year		End o	of year (c) Fair Market Value	
	1	Cash—non-interest-bearing	(a) Book Value 38,193	-	7,477		
	2	Savings and temporary cash investments	271,921		198,202		
	3	Accounts receivable ► 4,507,504					
		Less: allowance for doubtful accounts ▶	0		4,507,504	4,507,504	
	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 ▶					
ا ۸.	8	Inventories for sale or use					
ete	9	Prepaid expenses and deferred charges					
Assets	10a	Investments—U.S. and state government obligations (attach schedule)					
	b	Investments—corporate stock (attach schedule)					
	c	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)	14,352,086	9	11,137,644	14,187,560	
	14	Land, buildings, and equipment: basis ► 12,224		-			
		Less: accumulated depreciation (attach schedule) ► 7,475	4,749		4,749	4,749	
	15	Other assets (describe	177,000	9	177,000	177,000	
	16	Total assets (to be completed by all filers—see the	_				
		instructions. Also, see page 1, item I)	14,843,949		16,032,576	19,082,492	
	17	Accounts payable and accrued expenses					
	18	Grants payable					
es	19	Deferred revenue					
	20	Loans from officers, directors, trustees, and other disqualified persons					
Liabilities	21	Mortgages and other notes payable (attach schedule)					
_	22	Other liabilities (describe)				1	
	23	Total liabilities(add lines 17 through 22)	0		0		
S		Foundations that follow FASB ASC 958, check here 🕨 🗌					
Fund Balances		and complete lines 24, 25, 29 and 30.					
ia Ia	24	Net assets without donor restrictions					
യ്	25	Net assets with donor restrictions					
핕		Foundations that do not follow FASB ASC 958, check here	7				
Ī		and complete lines 26 through 30.	1				
50	26	Capital stock, trust principal, or current funds					
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund					
Assets	28	Retained earnings, accumulated income, endowment, or other funds	14,843,949		16,032,576		
Net ,	29	Total net assets or fund balances (see instructions)		16,032,576			
Z	30	Total liabilities and net assets/fund balances (see instructions) .	14,843,949		16,032,576		
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances		<u>' </u>			
1		al net assets or fund balances at beginning of year—Part II, column (a), li	ne 29 (must agree with	end-			
		year figure reported on prior year's return)		•	1	14,843,949 839,893	
2		Enter amount from Part I, line 27a					
3 4		ler increases not included in line 2 (itemize) lines 1, 2, and 3		4	348,787 16,032,629		
5		creases not included in line 2 (itemize)		•	5	53	
6		al net assets or fund balances at end of year (line 4 minus line 5)—Part II			6	16,032,576	
_			,			Form 990-PF (2020)	

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		e the kind(s) of property rehouse; or common st			(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a D	TC LT						
b D	TC LT						
c P	ALOMA						
d							
e							
	(e) Gross sales price	Depreciati	f) on allowed owable)	Cost or	(g) other basis ense of sale	Gain o	h) r (loss)) minus (g)
а	1,254	1,525			1,674,490		-419,965
b	991	L,713			922,209		69,504
С	2,407	7,352			952,236		1,455,116
d	•				· · · · · · · · · · · · · · · · · · ·		
e							
				l			
	Complete only for assets	showing gain in column	(h) and owned	by the foundation	on 12/31/69	,	I)
	·		i)	i e	(k)	Gains (Col. (l) h) gain minus
	(i)		ed basis		of col. (i)		less than -0-) or
	F.M.V. as of 12/31/69		2/31/69		. (j), if any	Losses (fr	om col.(h))
а							-419,965
b							69,504
С							1,455,116
d							
e							
				·			
	Capital gain net income		{ If (I	ain, also enter in P oss), enter -0- in F (5) and (6):		2	1,353,027
	If gain, also enter in Pari in Part I, line 8	t I, line 8, column (c) (see instructions)	. If (loss), enter -0	· }	3	
Part \		nder Section 4940				come	
	ON 4940(e) REPEAL	LED ON DECEMBER	20, 2019 - D	O NOT COMPLI	ETE		
1 R	Reserved		ı		ı		
	(a) Reserved	(b) Reserved		(c) Reserved		(d) Reserved	
							-
2 R	eserved				2		
	eserved					<u> </u>	
					-	<u> </u>	
	eserved					L ì	
	eserved				ــــــا	<u> </u>	
6 R	eserved				6		
7 R	eserved				7		
8 R	eserved ,				8		
	•						

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5a	During the year did the foundation p	ау о	r incur any amount to:							Yes	No
	(1) Carry on propaganda, or otherw	ise a	ttempt to influence legisla	ation (section 4945(e))?		Yes	✓	Nο			
	(2) Influence the outcome of any sp			**							
	on, directly or indirectly, any vol		-			Yes	✓	No			
	(3) Provide a grant to an individual			•		☐ Yes		No			
	(4) Provide a grant to an organization						_				
	in section 4945(d)(4)(A)? See instructions										
h	educational purposes, or for the If any answer is "Yes" to $5a(1)-(5)$,	•	•			Yes Line	✓	No			
D	Regulations section 53.4945 or in a					cribed iii			5b		
	•								36		
Organizations relying on a current notice regarding disaster assistance check here											
_	tax because it maintained expenditu			•		П.,					
	If "Yes," attach the statement requir					∐ Yes	Ш	No			
5a	Did the foundation, during the year,		-	* *	ıms on						
	a personal benefit contract?					П.,	. #				
b	Did the foundation, during the year,			lirectly, on a personal be	nefit contract	∵ Yes	. ✓	No	6b		No
	If "Yes" to 6b, file Form 8870.			,, ,							
7a	At any time during the tax year, was	s the	foundation a party to a p	rohibited tax shelter trar	saction?	□ vos	✓	Na			
b	If "Yes", did the foundation receive a	any p	roceeds or have any net	income attributable to th	e transactior	1?		NO	7b		
3	Is the foundation subject to the sect	ion 4	960 tax on payment(s) o	f more than \$1,000,000	in remunerat	tion or					
	excess parachute payment during th	ie ye	ar?			☐ Yes	✓	No			
	Information About C	offic	ers, Directors, Trust	ees, Foundation Ma	nagers, H				yees,		
Pal	and Contractors							-	•		
1	List all officers, directors, trustee	es, fo	oundation managers an	d their compensation.	See instru	ctions					
		(b) Title, and average	(c) Compensation (If		tributions		(e)	Expen	se acc	ount.
	(a) Name and address		hours per week devoted to position	not paid, enter -0-)	employee be	enefit plan compensat				lowanc	
ee A	Additional Data Table		devoted to position		uciciica	отпретов					
2	Compensation of five highest-pai	d en	nployees (other than th	nose included on line 1	.—see instrı	uctions).	If no	ne, e	nter "	NONE.	"
			(b) Title, and average			tributions			_		
(a)	Name and address of each employee more than \$50,000	paid	hours per week	(c) Compensation		/ee benefii nd deferre				se acco owance	
	more than \$55,555		devoted to position			ensation	_	0.	inci un	omanic	
						<u> </u>					
ota	I number of other employees paid over	er \$5	0,000			. ▶					
								For	m 99 0	D-PF (2020)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NO	DNE".
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
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 relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	_
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. 1	Amount
2	_
All other program-related investments. See instructions.	
Total. Add lines 1 through 3	

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign

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

2a |

2b

Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4

organizations check here

and do not complete this part.)

Tax on investment income for 2020 from Part VI, line 5.

Income tax for 2020. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

Distributable amount before adjustments. Subtract line 2c from line 1.

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

income. Enter 1% of Part I, line 27b. See instructions.

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

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

Page 8

256,663

842.712

842,712

25,429

817,283

817.283

817.283

914,750

914,750

914.750

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16.854.236

4

5

6

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

20,874

4.555

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Part X

5

6

1

2a

3

4 5

6

1

2

3

4

5

b

Part XII

Part XI

2020

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817,283

817,283

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Pa	rt XII	1

9	U	-	۲	۲	(2	U	2
							_	

90-PF (2	020)
XIII	Undistributed Income (see instructions)

a From 2015.

b From 2016.

e From 2019.

c From 2017. . . . d From 2018.

Distributable amount for 2020 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2020: a Enter amount for 2019 only. **b** Total for prior years: 2018, 2017, 2016 Excess distributions carryover, if any, to 2020:

f Total of lines 3a through e.

d Applied to 2020 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a).)

5 Excess distributions carryover applied to 2020. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

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

9 Excess distributions carryover to 2021.

10 Analysis of line 9: a Excess from 2016. . .

b Excess from 2017. . c Excess from 2018. . . .

d Excess from 2019. . .

e Excess from 2020. . .

Subtract lines 7 and 8 from line 6a

6 Enter the net total of each column as

b Prior years' undistributed income. Subtract 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. **d** Subtract line 6c from line 6b. Taxable amount —see instructions e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2015 not

indicated below:

4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ a Applied to 2019, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions). (a)

Corpus

344.629

97.467

442,096

96.886

345,210

96.886 209,242

14.297

24,204

209.242 14,297

24,204

97.467

(b)

Years prior to 2019

(c)

2019

	Part XIV Private Operating Found	ations (see instr	uctions and Part V	II-A, question 9)		rage I
	If the foundation has received a ruling or de foundation, and the ruling is effective for 20	20, enter the date of	of the ruling	▶∟_		
b	Check box to indicate whether the organizat	ion is a private oper	ating foundation des	cribed in section $ \Box $] 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) 2020	(b) 2019	(c) 2018	(d) 2017	(6) 10141
	year listed					
	85% of line 2a					
	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					
	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:					
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					
С						
_	(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					
	Supplementary Information	(Complete this	nart only if the f	l foundation had	\$5,000 or more i	in .
Pa	assets at any time during th			oundation nad .	\$5,000 or more	
1	Information Regarding Foundation Man					
а	List any managers of the foundation who have before the close of any tax year (but only if					n
	GLORIA W WALKER					
b	List any managers of the foundation who ow ownership of a partnership or other entity) NONE	n 10% or more of the of which the foundal	ne stock of a corporation has a 10% or gr	tion (or an equally la eater interest.	arge portion of the	
2	Information Regarding Contribution, Gr	ant, Gift, Loan, Sc	holarship, etc., Pro	ograms:		
	Check here ▶ ☐ if the foundation only mak		• • • •	_	does not accent	
	unsolicited requests for funds. If the foundation other conditions, complete items 2a, b, c, a	tion makes gifts, gr	ants, etc. to individua	als or organizations	under	
— а	The name, address, and telephone number	or e-mail address of	the person to whom	applications should	be addressed:	
	Marcie Skelton		,			
	1020 Highland Colony Pky Ste 802 Ridgeland, MS 39157					
	(601) 939-3003					
b	The form in which applications should be su	bmitted and informa	tion and materials th	ney should include:		
_	Any submission deadlines:					
C	Any submission deadlines: none					
d	Any restrictions or limitations on awards, su	ch as by geographic	al areas, charitable f	ields, kinds of institu	utions, or other	
	factors:					
	none					

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Part XV Supplementary Informa	ition (continued)			
3 Grants and Contributions Paid	During the Year or Appro	oved for Future	e Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	914,750
b Approved for future payment				
		1		
		1		
Total			> 2h	

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	er gross	amounts unless otherwise indicated.	Unrelated bu	Unrelated business income		512, 513, or 514	(e) Related or exemp
grees and contracts from government agencies Membership dues and assessments. Interest on savings and temporary cash investments Dividends and interest from securities. Dividends and interest from securities. Security Net rental income or (loss) from real estate: a Debt-financed property. 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. Other revenue: a OTHER REVENUE b C	_						function income (See instructions.)
d d							
de e							
g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities							
g Fees and contracts from government agencies Membership dues and assessments. Interest on savings and temporary cash investments							
Membership dues and assessments	f						
Interest on savings and temporary cash investments							
Dividends and interest from securities	Interest	on savings and temporary cash			14	120 924	
Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property Net rental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory			523000	9,406			
b Not debt-financed property				5,7100		200,100	
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 sales of assets other than inventory Net income or (loss) from special events: Gross profit or (loss) from sales of inventory Other revenue: OTHER REVENUE OTHER REVENUE Subtotal. Add columns (b), (d), and (e). Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). Subtotal. Add line 12, columns (b), (d), and (e). Total. Add line 12 columns (b), (d), and (e). Subtotal. Add line 13 instructions to verify calculations.) Total. Add line 13 instructions to verify calculations.) Total. Add line 15 instructions to verify calculations.) The No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See	a Debt-i	inanced 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 Other revenue: GOTHER REVENUE DOTHER REVENUE DOTH							
Net income or (loss) from special events: Gross profit or (loss) from sales of inventory Other revenue: a OTHER REVENUE 523000 3,037 14 41,086 523000 3,037 14 41,086 523000 522,692 1,682,310 Total. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.) Tt XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See		• /	523000	10 249	18	1 335 900	
Gross profit or (loss) from sales of inventory Other revenue: a OTHER REVENUE 523000 3,037 14 41,086 523000 3,037 14 41,086 523000 3,037 14 41,086 523000 3,037 14 1,682,310 Total. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.) Taxvi-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See			323000	10,249	10	1,555,500	
Other revenue: a OTHER REVENUE 523000 3,037 14 41,086 523000 3,037 14 41,086 523000 3,037 14 41,086 523000 3,037 14 41,086 523000 3,037 14 41,086 523000 3,037 14 41,086 523000 3,037 14 41,086 523000 1,682,310 Total. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.) Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.) Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.) Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.) Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.) Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.) Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.) Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)		. , .					
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.) Tt XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See							
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculations.) TXVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See			523000	3,037	14	41,086	
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). See worksheet in line 13 instructions to verify calculations.) Tt XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See							
Subtotal. Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.) TXVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See							
Subtotal. Add columns (b), (d), and (e)							
Total. Add line 12, columns (b), (d), and (e)				22.692		1.682.310	
(See worksheet in line 13 instructions to verify calculations.) Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See				·			
ne No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See	Total.				1.	3	1,/05,002
	Total. /	rksheet in line 13 instructions to verify calcu	lations.)			3	1,705,00.
	Total. / (See wo rt XVI	rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's expressions.	lations.) ie Accomplish income is reporte	ment of Exemp	pt Purposes Part XVI-A contribu	ted importantly to	
	Total. / (See wo rt XVI	rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's expressions.	lations.) ie Accomplish income is reporte	ment of Exemp	pt Purposes Part XVI-A contribu	ted importantly to	
	Total. / (See wo rt XVI	rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's expressions.	lations.) ie Accomplish income is reporte	ment of Exemp	pt Purposes Part XVI-A contribu	ted importantly to	
	Total. / (See wo rt XVI	rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's expressions.	lations.) ie Accomplish income is reporte	ment of Exemp	pt Purposes Part XVI-A contribu	ted importantly to	
	Total. / (See wo rt XVI	rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's expressions.	lations.) ie Accomplish income is reporte	ment of Exemp	pt Purposes Part XVI-A contribu	ted importantly to	
	Total. / (See wo rt XVI	rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's expressions.	lations.) ie Accomplish income is reporte	ment of Exemp	pt Purposes Part XVI-A contribu	ted importantly to	
	Total. / (See wo rt XVI	rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's expressions.	lations.) ie Accomplish income is reporte	ment of Exemp	pt Purposes Part XVI-A contribu	ted importantly to	
	Total. / (See wo rt XVI	rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's expressions.	lations.) ie Accomplish income is reporte	ment of Exemp	pt Purposes Part XVI-A contribu	ted importantly to	
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	Total. / (See wo rt XVI	rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's expressions.	lations.) ie Accomplish income is reporte	ment of Exemp	pt Purposes Part XVI-A contribu	ted importantly to	
	Total. / (See wo rt XVI	rksheet in line 13 instructions to verify calcu B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's expressions.	lations.) ie Accomplish income is reporte	ment of Exemp	pt Purposes Part XVI-A contribu	ted importantly to	

orm	990-PF (Pa	ge 13
	t XVII	Exempt Organi:	zations					nships With Non			
		ganization directly or in- than section 501(c)(3)							n 501	Yes	No
a Tr	ansfers f	rom the reporting foun	dation to a nonch	naritable exe	empt organization	of:					
(1	L) Cash.								. 1a(1)		No
(2	2) Other	assets							. 1a(2)		No
b 0	ther tran	sactions:									
(1	L) Sales	of assets to a nonchari	table exempt org	janization.					. 1b(1)		No
-	-	ases of assets from a n							. 1b(2)		No
		l of facilities, equipmer							. 1b(3)		No
•	•	oursement arrangemen							1b(4)		No
-	-	or loan guarantees.							. 1b(5)		No
•	•	mance of services or m		-					. 1b(6)		No
	_	facilities, equipment, neer to any of the above	- '	•							No
of in	the good any tran	ds, other assets, or servisaction or sharing arra	vices given by the ngement, show i	e reporting f n column (d	foundation. If the f	foundatio goods, of	n receive ther asse	d less than fair mark ts, or services receive	et value ed.		
(a) Lii	ne No.	(b) Amount involved	(c) Name of nonc	haritable exer	mpt organization	(d) Des	cription of	transfers, transactions, a	and sharing arra	ngemen	its
2a Is	the four	idation directly or indire	L ectly affiliated wit	h. or related	d to, one or more t	tax-exem	int organi	zations			
de	escribed i	n section 501(c) (other	than section 50	,	,				s 🗆 No		
וו נו	165, 00	(a) Name of organization		(h) Type of organizatio	n		(c) Description of	of relationship		
MCBR	AYER FA	MILY FDN		501(C)(3)	, ,,		соммог	N DIRECTORS			
MSW	FOUNDA	TION		501(C)(3)			соммог	N DIRECTORS			
WEW	FOUNDA	TION		501(C)(3))		COMMO	N DIRECTORS			
	of m whic	er penalties of perjury, y knowledge and belief h preparer has any kno	, it is true, correc								
Sig: Her		*****			2021-11-15	*	****		May the IRS di return with the prepa		
	9	Signature of officer or to	rustee		Date		Γitle		below (see instr.)	Yes [□ _{No}
		Print/Type preparer's	name Pre	parer's Sign	nature	Date		Check if self-	TIN P00283	2152	
Paid		Donna W Bruce CP	Α					employed ▶ 🔲	1 00203		
	parer Only	Firm's name ► BKD				•		Fi	irm's EIN ▶		
			00 Meadowbrook		300			D	hone no. (601) 0/10 /	6700
		1 150	lackson MS 392116349							, >+O-	5/00

Jackson, MS 392116349

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 (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans

		-	and deferred compensation	
Belinda Styres	Secretary	0	0	0
1020 Highland Colony Pkwy Ste 802 Ridgeland, MS 39157	0			
W E Walker III	Trustee	0	0	0

66,523

Director

Trustee

Trustee

Trustee

Trustee

1020 Highland Colony Pkwy Ste 802

Ridgeland, MS 39157

Ridgeland, MS 39157

Ridgeland, MS 39157 Merry Dougherty

Ridgeland, MS 39157

Ridgeland, MS 39157 Andrew Mallison

Ridgeland, MS 39157

Katie McBrayer

Marcie Skelton

Gloria Walker

	(5) across to position	,	and deferred compensation	
·		· · · · · · · · · · · · · · · · · · ·	·	

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

KSW Foundation	Common Directors	DE	To support the Foundation	35,000
a Paid during the year				
Name and address (home or business)	any foundation manager or substantial contributor	recipient		

KSW Foundation 2829 Lakeland Drive Suite 1600 Jackson, MS 39232	Common Directors	PF	To support the Foundation.	25,000

ack5011, 143 39232				
1SW Foundation 1829 Lakeland Drive Suite 1600 ackson, MS 39232	Common Directors	PF	To support the Foundation.	

Total .

MSW Foundation 2829 Lakeland Drive Suite 1600 Jackson, MS 39232	Common Directors	PF	To support the Foundation.	25,000
WEW Foundation 2829 Lakeland Drive Suite 1600	Common Directors	PF	To support the Foundation.	25,000

Jackson, MS 39232				
WEW Foundation 2829 Lakeland Drive Suite 1600 Jackson, MS 39232	Common Directors	PF	To support the Foundation.	25,000

914,750

WEW Foundation 2829 Lakeland Drive Suite 1600 Jackson, MS 39232	Common Directors	PF	To support the Foundation.	25,00

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

| Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Contribution | Contribu

a Paid during the year				
Millsaps College1701 North State Street Jackson, MS 392100001	None	PC	To support the mission of the organization.	19,000
New Stage Theatre1100 Carlisle Jackson, MS 39202	None	PC	To support the mission of the organization.	5,000

New Stage Theatre1100 Carlisle Jackson, MS 39202	None	PC	To support the mission of the organization.	5,000
Mississippi Museum of Natural Science Foundation 2148 Riverside Drive Jackson, MS 392021353	None	PC	To support the mission of the organization.	10,000

Total .

914,750

■ 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

Ducks Unlimited 193 Business Park Drive Suite E Ridgeland, MS 391576026	None	PC	To support the mission of the organization.	100,000
a Paid during the year				

Ridgeland, MS 391576026				
Honduras Medical MissionPO Box 23107 Jackson, MS 392253107	None		To support the mission of the organization.	5,000
Mississippi Symphony Orchestra	None	PC	To support the mission of the	5,000

Jackson, MS 392253107		organization.	-,
Mississippi Symphony Orchestra 201 East Pascagoula Street Jackson, MS 39201	None	To support the mission of the organization.	5,000

914,750

■ 3a

Jackson, MS 392253107			organization.	
Mississippi Symphony Orchestra 201 East Pascagoula Street Jackson, MS 39201	None	PC	To support the mission of the organization.	5,0

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

5 ,				
Mississippi Center for Public Policy 201 West Capitol Street 700 Jackson, MS 39201	None	PC	To support the mission of the organization.	55,000
Dixie National Sale of Junior Champions	None	PC	To support the mission of the	1,000

Jackson, MS 39201				
Dixie National Sale of Junior Champions PO Box 9815 MS State University, MS 397629815	None	PC	To support the mission of the organization.	1,00

PO Box 9815 MS State University, MS 397629815	None	PC	organization.	1,000
Young LifePO Box 520 Colorado Springs CO 80901	None	PC	To support the mission of the	50,000

MS State University, MS 397629815			-	
Young LifePO Box 520 Colorado Springs, CO 80901	None	PC	To support the mission of the organization.	50,00

Colorado Springs, CO 80901	Trone	-	organization.	30,00
Total			▶ 3a	914,750

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

recipient

▶ 3a

914,750

any foundation manager

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
Mississippi Museum of Art 380 S Lamar St Jackson, MS 39201	None	PC	To support the mission of the organization.	25,000
The Heritage Foundation 214 Massachusetts Ave NE Washington, DC 200024999	NONE	PC	To support the mission of the organization.	15,000

The Heritage Foundation 214 Massachusetts Ave NE Washington, DC 200024999	NONE	PC	To support the mission of the organization.	15,0
Empower Mississippi Foundation	NONE	PC	To support the mission of the	20,0

The Heritage Foundation 214 Massachusetts Ave NE Washington, DC 200024999	NONE	PC	To support the mission of the organization.	15,0
Empower Mississippi Foundation	NONE	PC	To support the mission of the	20,0

Washington, DC 200024999		or gameation.	
Empower Mississippi Foundation PO Box 4028 Madison, MS 39130	NONE	To support the mission of the organization.	20,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
Mississippi OperaPost Office Box 1551 Jackson, MS 392151551	NONE	PC	To support the mission of the organization.	5,000

10,000

914,750

■ 3a

34CK3011, 115 332131331		organización.
St Andrew's Episcopal School 370 Old Agency Road Ridgeland, MS 391579714	PC	to support the mission of the organization

Total .

370 Old Agency Road Ridgeland, MS 391579714		organization	,
Amerson Music Ministries	PC	To support the mission of the	12,0

370 Old Agency Road Ridgeland, MS 391579714		organization	
Amerson Music Ministries 11856 Balboa Blvd 337	PC	To support the mission of the organization	12,00

			i
Amerson Music Ministries	PC	To support the mission of the	12,000
11856 Balboa Blvd 337		organization	
Granada Hills CA 91344		_	

Amerson Music Ministries .1856 Balboa Blvd 337 Granada Hills, CA 91344	PC	To support the mission of the organization	12,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

1 th and a Toronton to	20	T	35 000
American Cancer Society 1100 Ireland Way Suite 300 Birmingham, AL 35205	PC	To support the mission of the organization.	10,000
a Paid during the year			

American Red ConsessOSE E Charact NW	DC.	To assume the rejector of the	30,000
Liberty Institute 2001 West Plano Parkway Suite 1600 Plano, TX 75075	PC	To support the mission of the organization.	25,000
Birmingham, AL 35205			

2001 West Plano Parkway Suite 1600 Plano, TX 75075		organization.	ı
American Red Cross2025 E Street NW Washington, DC 20006	PC	To support the mission of the organization.	20,000

Plano, TX 75075			
American Red Cross2025 E Street NW	PC	To support the mission of the	20,0

Total .

merican Red Cross2025 E Street NW	PC	To support the mission of the	20,00
ashington, DC 20006		organization.	

▶ 3a

914,750

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
Concerned Women for America 1015 Fifteenth St NW Suite 1100 Washington, DC 20005		To support the mission of the organization.	30,000

Washington, DC 20005		organization.	
The Reedemer's School 640 East Northside Drive Jackson, MS 39206	PC	To support the mission of the organization	10,000

640 East Northside Drive Jackson, MS 39206		organization	,
Baylor UniversityOne Bear Place 97026 Waco, TX 76798		to support the mission of the organization	25,000

914,750

Jackson, MS 39206			
Baylor UniversityOne Bear Place 97026 Waco, TX 76798	PC	to support the mission of the organization	25,0

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

or substantial contributor

Total . .

a Paid during the year			
Mission First Inc275 Roseneath Ave Jackson, MS 39203	PC	to support the mission of the organization	25,000

20,000

914,750

Iniversity of VirginiaPO Box 400331 Charlottesville, VA 229044331		to support the mission of the organization	
oung Americans for Liberty Foundation	PC	to support the mission of the	

Charlottesville, VA 229044331		organization	
Young Americans for Liberty Foundation 500 N Capital of Texas Hwy Bldg 5 Austin.TX 78746		to support the mission of the organization	15,000

Charlottestine, the ELDOTTION		or garnzation	1
Young Americans for Liberty Foundation 500 N Capital of Texas Hwy Bldg 5 Austin, TX 78746	PC	to support the mission of the organization	15,0

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
University of Mississippi Medical Center 2500 North State Street Jackson, MS 39216	PC	to support the mission of the organization	20,250

Jackson, MS 39216			
Stem Advancement IncPO Box 426 Woodville, MS 39669		to support the mission of the organization.	
Community Foundation for MS	PC	to support the mission of the	

Total .

Stem Advancement IncPO Box 426 Woodville, MS 39669		to support the mission of the organization.	10,000
Community Foundation for MS 119 S President St 1st FL		to support the mission of the organization	25,000

*			1
Community Foundation for MS 119 S President St 1st FL Jackson, MS 39201	PC	to support the mission of the organization	25,000

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914,750

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

a raid daring the year				
The First Tee of Central MS 4209 lakeland drive 304 flowood, MS 39232		PC	to support the mission of the organization.	15,000
lackson Pren Foundation	NONE	PC	To support the mission of the	50,000

flowood, MS 39232		-	
Jackson Prep Foundation 3100 Lakeland Drive Flowood, MS 39232	NONE	To support the mission of the organization.	50,000

3100 Lakeland Drive Flowood, MS 39232			organization.	
Pillow Academy69601 Highway 82 West	NONE	PC	To support the mission of the	500

Flowood, MS 39232				
Pillow Academy69601 Highway 82 West	NONE	PC	To support the mission of the	Į.
Greenwood, MS 38930			organization.	

Total .

illow Academy69601 Highway 82 West	NONE	PC	To support the mission of the	
reenwood, MS 38930			organization.	

914,750

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Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
Camp Smile - United Cerebal Palsy of Mobile 3058 Dauphin Sq Conn Mobile, AL 36607	NONE	PC	To Support the mission of the organization	1,000

Mobile, AL 36607				
Old Madison Presbyterian 7717 Old Canton Rd Madison, MS 39110	None	PC	To support the mission of the organization.	1,500

7717 Old Canton Rd Madison, MS 39110	None	PC	organization.	1,500
Episcopal Church of the Advent 401 N Union St Kennett Square, PA 19348	None	PC	To support the mission of the organization.	1,000

3a

914,750

7717 Old Canton Rd Madison, MS 39110		organization.	_,
Episcopal Church of the Advent 401 N Union St Kennett Square, PA 19348	None	To support the mission of the organization.	1,00

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
Saint Paul's Episcopal Church 101 E Vermilion Abbeville, LA 70511	None	PC	To support the mission of the organization.	1,000
MS Alliance of Nonprofits	None	PC	To support the mission of the	50,000

MS Alliance of Nonprofits 175 E Capitol Street Suite 501 Jackson, MS 39201	None	PC	To support the mission of the organization.	50,000
Refill Jackson Initiative	None	PC	To support the mission of the	25,000

Suite 501 Jackson, MS 39201				
Refill Jackson Initiative 136 S Adams Street	None	1	To support the mission of the organization.	25,000

544K35H7 F 10 55252			
Refill Jackson Initiative 136 S Adams Street Jackson, MS 39203	None	To support the mission of the organization.	25,00

Total .

914,750

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business)

or substantial contributor

	or substantial contributor			
a Paid during the year				
Salvation ArmyPO Box 4857	None	PC	To support the mission of the	20,000

ackson, MS 39296			organization.	
oul City Church142 E Bell St ackson, MS 39202	None	PC	To support the mission of the organization.	

Soul City Church142 E Bell St Jackson, MS 39202	None	PC	To support the mission of the organization.	5,000
MS Wildlife Foundation	None	PC	To support the mission of the	7,500

Jackson, MS 39202			organization.	
MS Wildlife Foundation 2630 Ridgewood Road Suite D Jackson, MS 39216	None	PC	To support the mission of the organization.	7,500

MS Wildlife Foundation 2630 Ridgewood Road Suite D Jackson, MS 39216	None	PC	To support the mission of the organization.	7,50
Total			▶ 3a	914,750

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor.

	or substantial continuator			
a Paid during the year				
Delta Waterfowl FoundationPO Box 3128 Bismarck, ND 58502	None	PC	To support the mission of the organization.	10,000
Operation ShoestringPO Box 11223	None	PC	To support the mission of the	25,000

-10.11.01.1, 11.0				
Operation ShoestringPO Box 11223 Jackson, MS 39283	None	PC	To support the mission of the organization.	25,000
Andrew Jackson Council - Boy Scouts of America 855 Riverside Drive Jackson, MS 39202	None	PC	To support the mission of the organization.	25,000

▶ 3a

914,750

Jackson, MS 39283	None	PC	organization.	25,00
Andrew Jackson Council - Boy Scouts of America 855 Riverside Drive	None	PC	To support the mission of the organization.	25,00
Jackson, MS 39202				

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient

If recipient is an individual, show any relationship to status of contribution

Purpose of grant or contribution

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
The Little Light HousePO Box 13662 Jackson, MS 39236	None	PC	To support the mission of the organization.	15,000
Mississippi Children's Museum 2145 Museum Blvd	None	PC	To support the mission of the organization.	15,000

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914,750

Jackson, ME 39202

Total.

efile GRAPHIC print - DO NOT P	ROCESS As Filed Da	ata -	Γ	DLN: 93491315023231		
TY 2020 Accounting Fees Schedule						
	Name: Walker Fo	oundation				
	EIN: 23-7279902					
				1		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
ACCOUNTING FEES	4,950	4,950				

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491315023231 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. TY 2020 Depreciation Schedule

Name: Walker Foundation EIN: 23-7279902

Note: To capture the full content of this	ote: To capture the full content of this document, please select landscape mode (11" $ imes$ 8.5") when printing.				
TY 2020 Gain/Loss from Sale of Other Assets Schedule					
Name:	Walker Foundation				
EIN:	23-7279902				
Gain Loss Sale Other Assets Schedule					

DLN: 93491315023231

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	Gain Loss Sale Ot	iller Assets Sched	iuie							
Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
DTC ST	2019-06		2020-03		43,122	50,000			-6,878	

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TV 2020 Tourselon out - Other (2 ala a de da	
TY 2020 Investments - Other S	scneaule	
Namou	Walker Foundatio	n

Name: Walker Foundation

ETN: 23-7270002

	LIN. 23 /2/3302	-	
Investments Other Schedule 2			
			_

Investments Other Schedule 2			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
DIVERSIFIED TRUST	AT COST	11,102,646	14,152,562
LABRADOR CAPITAL PARTNERS II	AT COST	0	0
PALOMA PARTNERS	AT COST	0	0
GOLDMAN SACHS	AT COST	34,998	34,998
GT ASSET ALLOCATION FUND	AT COST	0	0

		_		
TY	2020	Other	Assets	Schedule

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Name: Walker Foundation

As Filed Data -

ARTWORK

	EIN:	23-72/9902	
Other Assets Schedule			

Description

177,000

End of Year - Fair

177,000

Market Value

177,000

DLN: 93491315023231

End of Year - Book

Value

Beginning of Year -

Book Value

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TY 2020 Other Decreases Scho	edule	
Name:	Walker Foundation	
EIN:	23-7279902	
De	escription	Amount
NONDEDUCTIBLE EXPENSES		53

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	l: 93491315023231
TY 2020 Other Expenses Sche	dule			_
Name:	Walker Foundat	ion		
EIN:	23-7279902			
Other Expenses Schedule	,			
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DIVERSIFED TRUST	24,924	24,924		
OFFICE EXPENSE	865			
ART INSURANCE	270			
DUES	3,940			
GT ASSET ALLOCATION FUND	56,160	56,160		
TELEPHONE	890			
TRAVEL & LODGING	168			
MEETING EXPENSES	40			

103

184

103

LABRADOR II

OTHER DEDUCTIONS

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TY 2020 Other Income Schedule

Name: Walker Foundation

EIN: 23-7279902

Other Income Schedule					
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income		
Diversified Trust Company 1099	4,913	4,913			
Labrador Capital Partner II	-86	-86			
GT Asset Allocation Fund	37,114	37,114			
Short Duration	799	799			
Core Fixed	998	998			
US ACTIVE EQUITY	181	181			
MULTI STRATEGY	180	180			
CORE EQUITY COMMON	24	24			

efile GRAPHIC print - DO NOT PROCESS A	As Filed Data -	DLN: 93491315023231				
TY 2020 Other Increases Schedule						
Name: V	Walker Foundation					
EIN: 2	23-7279902					
Other Increases Schedule		1				
	cription	Amount				
	cription	Amount 44				

efile GRAPHIC print - DO NOT PROC	ESS As Filed Data	-	DL	N: 93491315023231		
TY 2020 Other Professional Fees Schedule						
Name: Walker Foundation EIN: 23-7279902						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
DIVERSIFIED TRUST MGMT FEE	49,754	49,754				
WALKER LANDS ADMIN FEES	109,977					
CONSULTING FEES	42,754	42,754				

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TY 2020 Taxes Schedule				
Name	: Walker Foun	ıdation		
EIN	23-7279902	<u>:</u>		
Taxes Schedule				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL TAXES PAID	6,114		·	
FOREIGN TAXES - DIV TRUST K-1S	8,457	8,457		
FOREIGN TAXES - GT ASSET	437	437		

efile GRAPHIC print - DO	NOT PROCESS As Filed Data	-		DLN: 93491315023231
Schedule B	Sche	dule of Contributors		OMB No. 1545-0047
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		to Form 990, 990-EZ, or 990-PF. .gov/Form990 for the latest infor	mation.	2020
Name of the organization Walker Foundation			Employer i	dentification number
Organization type (check	cone):		23-7279902	<u>'</u>
	,			
Filers of:	Section:			
Form 990 or 990-EZ	☐ 501(c)() (enter number) organization		
	☐ 4947(a)(1) nonexempt ch	naritable trust not treated as a p	orivate foundation	
	☐ 527 political organization			
Form 990-PF	☑ 501(c)(3) exempt private	foundation		
	☐ 4947(a)(1) nonexempt ch	naritable trust treated as a priva	te foundation	
	501(c)(3) taxable private	foundation		
money or other p contributions.	ion filing Form 990, 990-EZ, or 99 property) from any one contributor.			
under sections 509 received from any	n described in section 501(c)(3) fil 9(a)(1) and 170(b)(1)(A)(vi), that c one contributor, during the year, t 1h, or (ii) Form 990-EZ, line 1. Co	hecked Schedule A (Form 990 otal contributions of the greater	or 990-EZ), Part II, line 13	, 16a, or 16b, and that
during the year, to	n described in section 501(c)(7), (tal contributions of more than \$1,0 e prevention of cruelty to children	000 <i>exclusively</i> for religious, cha	aritable, scientific, literary,	
during the year, co If this box is check purpose. Don't cor	n described in section 501(c)(7), (ontributions exclusively for religioused, enter here the total contribution plete any of the parts unless the e, etc., contributions totaling \$5,00	s, charitable, etc., purposes, buns that were received during the General Rule applies to this or	it no such contributions tot ne year for an <i>exclusively</i> r rganization because it rece	aled more than \$1,000. eligious, charitable, etc., eived <i>nonexclusively</i>
990-EZ, or 990-PF), but it	that isn't covered by the General must answer "No" on Part IV, line t I, line 2, to certify that it doesn't I	e 2, of its Form 990; or check th	e box on line H of its Form	
For Paperwork Reduction Ac	t Notice, see the Instructions	Cat. No. 30613X	Schedule B (Form 99	0, 990-EZ, or 990-PF) (2020)

for Form 990, 990-EZ, or 990-PF.