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2020

OMB No. 1545-0052

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

		ndar year 2020, or tax year beginning 01-01-20	20 , aı	nd ending 12-31-		
A١	1ERICAN	indation N SNUFF CHARITABLE TRUST BANK TRUSTEE		62-6036034	entification numbe	r
		l street (or P.O. box number if mail is not delivered to street address) AVENUE NORTH NO 1500	Room/suite	B Telephone nu (901) 580-5700	ımber (see instruction	ns)
		, state or province, country, and ZIP or foreign postal code TN 37219		, ,	application is pendin	g, check here
H Ch	neck ty Section	(et value of all assets at end		2. Foreign of test, check F If private for under section IT If the foundary is a second test.	ganizations, check herganizations meeting k here and attach co undation status was to 507(b)(1)(A), checation is in a 60-month of 507(b)(1)(B), checation is in a 607(b)(1)(B), checation is in a 607(b)(1)(B)	the 85% mputation terminated ck here
		►\$ 3,683,245	be on cash basis.)			
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach				
	2	schedule) Check ▶ ☑ if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments				
Reversie	4 5a	Dividends and interest from securities Gross rents	64,075	64,075		
	b 6a	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10	58,819			
	ь 7 8	Gross sales price for all assets on line 6a 64,802 Capital gain net income (from Part IV, line 2) Net short-term capital gain		58,819		
	9 10a b	Income modifications				
	c 11	Gross profit or (loss) (attach schedule) Other income (attach schedule)				
	12	Total. Add lines 1 through 11	122,894 30,434			15,217
ses	14 15 16a	Other employee salaries and wages	50,131	15,217		15/21/
xber	ь	Accounting fees (attach schedule)	1,093	1,093		C
ve E	_ c	Other professional fees (attach schedule)	5,645	5,645		C
inistrati	17 18 19	Interest	9 890	890		C
Operating and Administrative Expenses	20 21 22	Occupancy				
perating	23 24	Other expenses (attach schedule)	38,062	22,845		15,217
0	25 26	Contributions, gifts, grants paid	300,000			300,000
	27	Subtract line 26 from line 12:	338,062	22,845		315,217
	a b	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	-215,168	100,049		
-or	c Paner	Adjusted net income (if negative, enter -0-)		Cat No. 11289)	/ Fa:	m 990-PF (2020)

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Decreases not included in line 2 (itemize) ▶.

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

		should be for the or year amounts only. (See instructions.)	(a) book value (D) BOOK	value	(C) Fall	Market value
	1	Cash—non-interest-bearing					
	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 (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule) ▶					
		Less: allowance for doubtful accounts ▶					
<u>s</u>	8	Inventories for sale or use					
4ssets	9	Prepaid expenses and deferred charges					
As	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)	2,848,271		2,631,402		3,683,245
	14	Land, buildings, and equipment: basis ▶					
		Less: accumulated depreciation (attach schedule)					
	15	Other assets (describe >)					
	16	Total assets (to be completed by all filers—see the					
		instructions. Also, see page 1, item I)	2,848,271		2,631,402		3,683,245
	17	Accounts payable and accrued expenses					
	18	Grants payable					
es	19	Deferred revenue					
abilities	20	Loans from officers, directors, trustees, and other disqualified persons					
g e	21	Mortgages and other notes payable (attach schedule)					
ا ت	22	Other liabilities (describe •)					
	23	Total liabilities(add lines 17 through 22)	0		0		
٠,		Farm dations that fallow FACD ACC OFD about home					
ances		Foundations that follow FASB ASC 958, check here ▶ ☐ and complete lines 24, 25, 29 and 30.					
	24	Net assets without donor restrictions					
8	24 25	Net assets with donor restrictions					
Fund Ba	25						
=		Foundations that do not follow FASB ASC 958, check here					
5		and complete lines 26 through 30.					
	26	Capital stock, trust principal, or current funds	761,419		761,419		
Assets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0		0		
	28	Retained earnings, accumulated income, endowment, or other funds	2,086,852		1,869,983		
Net	29	Total net assets or fund balances (see instructions)	2,848,271		2,631,402		
	30	Total liabilities and net assets/fund balances (see instructions) .	2,848,271		2,631,402		
	rt III	· · · · · · · · · · · · · · · · · · ·			I		
1		l net assets or fund balances at beginning of year—Part II, column (a), line ear figure reported on prior year's return)	29 (must agree with end-	1		2.8	348,271
2	-	r amount from Part I, line 27a		2			15,168
3		er increases not included in line 2 (itemize)		3			0
		lines 1. 2. and 3		4		2.6	33.103

1,701

2,631,402

5

6

Page **3**

		kind(s) of property sold (e.g., se; or common stock, 200 sh			(b) How acqu P—Purch D—Donat	ase		(c) se acquired o., day, yr.)	(d) Date sold (mo., day, yr.)
1 a SHORT-TERM SALES FR		2 20.114.		20	20-01-01	2020-12-31			
b LONG-TERM SALES FRO				19-12-30	2020-12-31				
c L/T CAPITAL GAIN DIVIDEND								19-12-30	2020-12-31
d CLASS ACTION SETTLEMENTS								19-12-30	2020-12-31
e	12.11.0							15 12 50	2020 12 31
		(f)			(g)			(1	h)
(e)		Depreciation allowed			other basis				r (loss)
Gross sales price		(or allowable)			ense of sale) minus (g)
						5,983			-5,983
b	58,309								58,309
	6,167								6,167
d	326								326
	320								320
e									
Complete only for asset	s show	ing gain in column (h) and ov	wned by						l)
(i)		(j)			(k)		ا دما		h) gain minus less than -0-) or
F.M.V. as of 12/31/69	∍	Adjusted basis as of 12/31/69			of col. (i) . (j), if any		0		om col.(h))
		us 01 12/31/05		0 7 6 7 6 0 1	. (j), ii aiiy				-5,983
a									58,309
b									
<u> </u>									6,167
d									326
e									
If gain, also enter in Pa in Part I, line 8	gain or art I, lir	et capital loss) (loss) as defined in sections ne 8, column (c) (see instruct	If (los 1222(5 tions). I	f (loss), enter -0	Part İ, line 7	. }	2 3 come		58,819
SECTION 4940(e) REPEA	ALED (ON DECEMBER 20, 2019	9 - DC	NOT COMPLI	ETE				
1 Reserved									
(a)		(b)		(c)				(d)	
Reserved		Reserved		Reserved				Reserved	
	<u> </u>								
	-								
						<u> </u>			
2 Reserved						2			
3 Reserved						3			
4 Reserved						4]		
						5	ì		
						<u> </u>	<u> </u>		
						6	<u> </u>		
7 Reserved						7	<u> </u>		
8 Reserved ,						8			

Form 990-PF (2020)	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NO	ONE".
(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	0
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.	Amount
1	
2	
-	
All other program-related investments. See instructions.	
3	4
	\dashv
Total. Add lines 1 through 3	0
	5 000 PE (2020)

5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,364,401
6	Minimum investment return. Enter 5% of line 5	6	168,220
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations at	nd cer	tain foreign
Par	organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	168,220
2a	Tax on investment income for 2020 from Part VI, line 5 2a 1,391		
ь	Income tax for 2020. (This does not include the tax from Part VI.) 2b		

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

2c

3

4

5

6

7

1a

1b

2

За 3h

4

5

1.391

166,829

166.829

166.829

315,217

315.217

315.217

Form 990-PF (2020)

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

3

4 5

6

1

2

3

4

5

b

Part XII

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

2020

Page 9

166,829

166,829

Form **990-PF** (2020)

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7	Ш	ī	ı	ī	ı

orm 990-PF (20	020)	
Part XIII	Undistributed Income	(see instructions)

From 2015.

b From 2016.

e From 2019.

c From 2017. . . d From 2018.

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) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2021.

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

b Excess from 2017. .

d Excess from 2019. .

e Excess from 2020. .

c Excess from 2018. . . .

6 Enter the net total of each column as

b Prior years' undistributed income. Subtract line 4b from line 2b 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).

- 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.

288.307 110,430

157,513

171.288 144,785

110.430 157,513

171.288

144,785

148.388

- - Corpus

872.323

148.388

1,020,711

288.307

732,404

(a)

(b)

Years prior to 2019

(c)

2019

2	art XIV Private Operating Found	l ations (see instri	uctions and Part V	'II-A, question 9)					
La	If the foundation has received a ruling or defoundation, and the ruling is effective for 20								
b	Check box to indicate whether the organizati	ion is a private oper	in is a private operating foundation described in section \Box 4942(j)(3) or \Box 4942(j)(5)						
2a	Enter the lesser of the adjusted net	Tax year Prior 3 years							
	income from Part I or the minimum	(a) 2020	(b) 2019	(c) 2018	(d) 2017	(e) Total			
	investment return from Part X for each year listed	, ,	. ,	` '	. ,				
b	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								
е	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	"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	(0		<u> </u>	<u> </u>	<u> </u>			
Pa	rt XV Supplementary Information assets at any time during th			roundation had s	\$5,000 or more	ın			
1	Information Regarding Foundation Man		i uccions. j						
а	List any managers of the foundation who have	e contributed more				n			
	before the close of any tax year (but only if	they have contribut	ed more than \$5,000	0). (See section 507	(d)(2).)				
h	List any managers of the foundation who own	n 10% or more of th	e stock of a corpora	tion (or an equally la	arge portion of the				
_	ownership of a partnership or other entity)				inge portion of the				
<u> </u>	Information Regarding Contribution, Gr		•• •	2					
	Check here $ ightharpoonup$ if the foundation only mak								
	unsolicited requests for funds. If the founda			als or organizations	under				
	other conditions, complete items 2a, b, c, a	nu u. see mstructior	15						
а	The name, address, and telephone number of	or e-mail address of	the person to whom	applications should	be addressed:				
	ED ROBERSON AMERICAN SNUFF CO								
	813 RIDGELAKE BLVD								
	MEMPHIS, TN 38119 (901) 761-2050								
h	The form in which applications should be sul	hmitted and informa	tion and materials th	nev should include:					
U	EXPLANATION AND DESCRIPTION OF PURPO		don and materials ti	icy should include.					
		<i>)</i> <u> </u>							
С	Any submission deadlines:								
	NONE								
d	Any restrictions or limitations on awards, su factors:	, , , , , ,	·	·	,				
_	EXCLUSIVELY FOR RELIGIOUS, CHARITABLE CHILDREN.	, SCIENTIFIC, LITER	RARY OR EDUCATION	NAL PURPOSES OR F	OR THE PREVENTIO	N OF CRUELTY TO			

Form 990-PF (2020)				Page 11
Part XV Supplementary Informa	ation (continued)			
3 Grants and Contributions Paid	d During the Year or Appro	oved for Futur	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 Paid during the year See Additional Data Table				
Total	<u> </u>		▶ 3a	300,000
b Approved for future payment				
Total			▶ 3b	0

Part XVI-A Analysis of Income-Producing	Activities				rage LL
Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income	·	n 512, 513, or 514	(e) Related or exempt
1 Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
a					
b					
d					
e					
f g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	64,075	
5 Net rental income or (loss) from real estate: a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property 7 Other investment income					
8 Gain or (loss) from sales of assets other than					
inventory			18	58,819	
9 Net income or (loss) from special events:					
10 Gross profit or (loss) from sales of inventory 11 Other revenue: a					
b					
c					
e					
12 Subtotal. Add columns (b), (d), and (e)		0		122,894	0
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculated.			1	.3	122,894
Part XVI-B Relationship of Activities to the	ne Accomplisi	hment of Exem	pt Purposes		
Line No. Explain below how each activity for which the accomplishment of the foundation's exinstructions.)					

O1	onn 990-F1 (2020)							
		Information Regarding Transfers To and Transactions and Relationships With Noncharit	abla					
Ŀ	Part XVII	Exempt Organizations	abic					
1		nization directly or indirectly engage in any of the following with any other organization described in section 501		V				

		organization directly or in er than section 501(c)(3)							on 501	Yes	No
а⊤	ransfer	s from the reporting foun	dation to a n	oncha	ritable exe	empt organization	of:				
(1) Cas	h							. 1a(1)		No
(2) Other assets								. 1a(2)		No	
b C	ther tra	ansactions:									
(1) Sale	es of assets to a nonchari	itable exemp	t orgai	nization.				1b(1)		No
(2) Pur	chases of assets from a n	oncharitable	exem	pt organiz	ation			1b(2)		No
(3) Ren	ital of facilities, equipmer	nt, or other a	ssets.					1b(3)		No
(4) Rei	mbursement arrangemen	ts						. 1b(4)		No
(5) Loa	ns or loan guarantees.							. 1b(5)		No
(6) Perfo	ormance of services or m	embership or	r fundr	aising soli	icitations			. 1b(6)		No
	_	of facilities, equipment, n							. <u>1c</u>		No
o ir	f the go	swer to any of the above ods, other assets, or ser- ansaction or sharing arra	vices given b ngement, sh	y the r ow in o	reporting f column (d	foundation. If the i) the value of the	foundation receive goods, other asse	ed less than fair mar ets, or services recei	ket value ved.		
(a) L	ine No.	(b) Amount involved	(c) Name of	noncha	ritable exer	mpt organization	(d) Description of	transfers, transactions	, and sharing arra	ngemen	ts
						+					
						-					
						-					
2a Is	s the fo	undation directly or indire	ectly affiliated	d with.	or related	d to, one or more	tax-exempt organ	izations			
		d in section 501(c) (other	•						es 🔽 No		
		complete the following so		(-/(-//						
	,	(a) Name of organization		П	(b) Type of organizati	on	(c) Description	n of relationship		
		.,			•	· /.		, , , ,	·		
cia.	of wh	der penalties of perjury, my knowledge and belief iich preparer has any kno	, it is true, co						ased on all info	mation	of
Sig Hei		*****				2021-03-29	*****		May the IRS di return with the prepa below		
		Signature of officer or to	rustee			Date	, Title		(see instr.)	'] _{Yes} □] No
		Brint/Type prepared	namo	Draw-	ror's Cis-	aturo	Ī.,		DTIN		
		Print/Type preparer's	name	Prepa	arer's Sign	iature	Date	Check if self-	PTIN		
								employed ▶ □	P01750	233	
Pai	d	BRYAN D GRISSON	1 JR				2021-03-29				
	pare	r	WINC LUDED	\	1.0						
	Onl		KINS UIBERA	ALL PLI	LC				Firm's EIN ▶62	-18042	52
J 3 C	. U III	-	61 AARON B	RENNE	R DR STE	300					
									Phone no. (901	761-2	2720
		ME	EMPHIS, TN	38120						,	
		I							Form OO	O-DE /	2020

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

or substantial contributor

Total .

	or substantial contributor			
a Paid during the year				
AGAPE3160 DIRECTORS ROW	NONE	501(C)3	CHARITABLE DONATIONS	8,000

		===(=)=		
AGAPE501 JOHNSON STREET RUSSELLVILLE, KY 42276	NONE	501(C)3	CHARITABLE DONATIONS	
MEMPHIS, IN 30131				

П	AGAPE501 JOHNSON STREET RUSSELLVILLE, KY 42276	NONE	501(C)3	CHARITABLE DONATIONS	12,000
П	AMERICAN RED CROSS 1400 CENTRAL AVENUE MEMPHIS IN 38104	NONE	501(C)3	CHARITABLE DONATIONS	8,000

RUSSELLVILLE, NT 42276				
AMERICAN RED CROSS 1400 CENTRAL AVENUE MEMPHIS,TN 38104	NONE	501(C)3	CHARITABLE DONATIONS	8,000

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				
ARC OF THE MID-SOUTH 3485 POPLAR AVENUE 210	NONE	501(C)3	CHARITABLE DONATIONS	3,500

EMPHIS, TN 38111				
VE MARIA2805 CHARLES BRYAN ROAD ARTLETT, TN 38134	NONE	501(C)3	CHARITABLE DONATIONS	

Total .

AVE MARIA2805 CHARLES BRYAN ROAD BARTLETT, TN 38134	NONE	501(C)3	CHARITABLE DONATIONS	5,000
BADDOUR CENTER PO BOX 97 3297 HWY 51 STREET	NONE	501(C)3	CHARITABLE DONATIONS	7,500

BARTLETT, TN 38134				
BADDOUR CENTER PO BOX 97 3297 HWY 51 STREET SENATOBIA, MS 38688	NONE	501(C)3	CHARITABLE DONATIONS	7,500

300,000

■ 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

a Paid during the year				
BETHESDA CENTER 930 PATTERSON AVENUE WINSTONSALEM, NC 27101	NONE	501(C)3	CHARITABLE DONATIONS	3,000

WINSTONS/REETI, NC 27101				
BIG BROTHERSBIG SISTERS PO BOX 21646 WINSTONSALEM, NC 27120	NONE	501(C)3	CHARITABLE DONATIONS	1,000

PO BOX 21646 WINSTONSALEM, NC 27120		,		ŕ
BIG BROTHERSBIG SISTERS OF CLARKSVILLE TN 430 MADISON STREET B-4	NONE	501(C)3	CHARITABLE DONATIONS	2,500

WINSTONSALEM, NC 27120				
BIG BROTHERSBIG SISTERS OF CLARKSVILLE TN 430 MADISON STREET B-4 CLARKSVILLE, TN 37040	NONE	501(C)3	CHARITABLE DONATIONS	2,500

	BIG BROTHERSBIG SISTERS OF CLARKSVILLE TN 430 MADISON STREET B-4 CLARKSVILLE, TN 37040	NONE	501(C)3	CHARITABLE DONATIONS	2,500
Total				300,000	

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)

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
BIG BROTHERSBIG SISTERS OF MIDDLE TN	NONE	501(C)3	CHARITABLE DONATIONS	2,000

NASHVILLE, TN 37203				
BRINKLEY HEIGHTS 3275 ROSAMOND AVENUE	NONE	501(C)3	CHARITABLE DONATIONS	

Total .

BRINKLEY HEIGHTS 3275 ROSAMOND AVENUE MEMPHIS, TN 38122	NONE	501(C)3	CHARITABLE DONATIONS	8,000
CHURCH HEALTH CENTER	NONE	501(C)3	CHARITABLE DONATIONS	7,500

3275 ROSAMOND AVENUE MEMPHIS, TN 38122		(-)-		2,111
CHURCH HEALTH CENTER 1350 CONCOURSE AVENUE SUITE 142	NONE	501(C)3	CHARITABLE DONATIONS	7,500

MEMPHIS, TN 38122				
CHURCH HEALTH CENTER 1350 CONCOURSE AVENUE SUITE 142 MEMPHIS, TN 38104	NONE	501(C)3	CHARITABLE DONATIONS	7,500

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

a Paid during the year				
CLARKSVILLE 50 ACTIVITY CENTER 953 CLARK STREET CLARKSVILLE, TN 37040	NONE	501(C)3	CHARITABLE DONATIONS	4,000

,				
CLARKSVILLE ASSOCIATION FOR DOWN SYNDROME 1317 SUN VALLEY ROAD CLARKSVILLE, TN 37040	NONE	501(C)3	CHARITABLE DONATIONS	2,500
CRICIC CONTROL MINISTRY	NONE	E01/C\2	CHARITARI E DONATIONO	2,000

SYNDROME 1317 SUN VALLEY ROAD CLARKSVILLE, TN 37040				
CRISIS CONTROL MINISTRY 200 EAST 101H STREET WINSTONSALEM, NC 27101	NONE	501(C)3	CHARITABLE DONATIONS	3,000

3a

300,000

1317 SUN VALLEY ROAD CLARKSVILLE, TN 37040				
CRISIS CONTROL MINISTRY 200 EAST 101H STREET WINSTONSALEM, NC 27101	NONE	501(C)3	CHARITABLE DONATIONS	3,00

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				
EAST STOKES OUTREACH MINISTRY PO BOX 973 WALNUT COVE, NC 27052	NONE	501(C)3	CHARITABLE DONATIONS	5,000

WALNUT COVE, NC 27052				
GREATER THINGS OUTREACHPO BOX 37 WELCOME, NC 27374	NONE	501(C)3	CHARITABLE DONATIONS	5,000
HARITAT FOR HUMANITY	NONE	501(C)3	CHADITABLE DONATIONS	3 000

GREATER THINGS OUTREACHPO BOX 37 WELCOME, NC 27374	NONE	501(C)3	CHARITABLE DONATIONS	5,000
HABITAT FOR HUMANITY 404 MADISON STREET	NONE	501(C)3	CHARITABLE DONATIONS	3,000

WELCOME, NC 27374				
HABITAT FOR HUMANITY 404 MADISON STREET CLARKSVILLE, TN 37040	NONE	501(C)3	CHARITABLE DONATIONS	3,000

Total .

▶ 3a

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

recipient

300,000

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

any foundation manager

or substantial contributor

Name and address (home or business)

	Or Substantial Contributor			
a Paid during the year				
HARWOOD TRAINING CENTER 711 JEFFERSON AVENUE MEMPHIS TN 38105	NONE	501(C)3	CHARITABLE DONATIONS	10,000

HOLY ROSARY CATHOLIC CHURCH 4841 PARK AVENUE MEMPHIS, TN 38117	NONE	501(C)3	CHARITABLE DONATIONS	30,000
·				

4841 PARK AVENUE MEMPHIS, TN 38117		,		·
KING OUTREACH MINISTRIES PO BOX 1450	NONE	501(C)3	CHARITABLE DONATIONS	7,000

4841 PARK AVENUE MEMPHIS,TN 38117				
KING OUTREACH MINISTRIES PO BOX 1450 KING NC 27021	NONE	501(C)3	CHARITABLE DONATIONS	7,00

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 Faid during the year				
LE BONHEUR CHILDREN'S PO BOX 41817 850 POPLAR AVENUE MEMPHIS, TN 38105	NONE	501(C)3	CHARITABLE DONATIONS	5,000
LOAVES & ETCHESDO BOY 2241	NONE	501(C)3	CHARITARI E DONATIONS	3 000

MEMPHIS,TN 38105				
LOAVES & FISHESPO BOX 3241 CLARKSVILLE, TN 37043	NONE	501(C)3	CHARITABLE DONATIONS	3,000
MAKE-A-WISH 1780 MORIAH WOODS BLVD SUITE 10	NONE	501(C)3	CHARITABLE DONATIONS	8,000

CLARKSVILLE, TN 37043				,
MAKE-A-WISH 1780 MORIAH WOODS BLVD SUITE 10 MEMPHIS, TN 38117	NONE	501(C)3	CHARITABLE DONATIONS	8,000

Total .

▶ 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

a Paid during the year				
MANA' CAF1319 E FRANKLIN STREET CLARKSVILLE, TN 37040	NONE	501(C)3	CHARITABLE DONATIONS	5,000

7,500

300,000

■ 3a

CLARKSVILLE, TN 37040		(-)-		
MEMPHIS ATHLETIC MINISTRIES 2107 BALL ROAD MEMPHIS, TN 38114	NONE	501(C)3	CHARITABLE DONATIONS	

MEMPHIS ATHLETIC MINISTRIES 2107 BALL ROAD MEMPHIS,TN 38114	NONE	501(C)3	CHARITABLE DONATIONS	
MEMPHIS ORAL SCHOOL FOR THE DEAF	NONE	501(C)3	CHARITABLE DONATIONS	

MEMPHIS, TN 38114				
MEMPHIS ORAL SCHOOL FOR THE DEAF 7901 POPLAR AVENUE	NONE	501(C)3	CHARITABLE DONATIONS	7,500

MEMPHIS, IN 38114				
MEMPHIS ORAL SCHOOL FOR THE DEAF 7901 POPLAR AVENUE GERMANTOWN, TN 38138	NONE	501(C)3	CHARITABLE DONATIONS	7,500

MEMPHIS ORAL SCHOOL FOR THE DEAF	NONE	501(C)3	CHARITABLE DONATIONS	7,50
7901 POPLAR AVENUE				·
GERMANTOWN, TN 38138				

	` '	
7901 POPLAR AVENUE		
7901 POPLAR AVENUE		
CERMANITOWN, TN. 20120		
GERMANTOWN, TN 38138		

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				
MEMPHIS UNION MISSION 383 POPLAR AVENUE MEMPHIS,TN 38105	NONE	501(C)3	CHARITABLE DONATIONS	2,000

ı	MEMINIS, IN 30103				
	METROPOLITAN INTER-FALTH ASSOCIATION 910 VANCE AVENUE MEMPHIS, TN 38126	NONE	501(C)3	CHARITABLE DONATIONS	2,000

ASSOCIATION 910 VANCE AVENUE MEMPHIS, TN 38126				
MID-SOUTH FOOD BANK 3865 SPERKINS ROAD	NONE	501(C)3	CHARITABLE DONATIONS	10,000

MEMPHIS, TN 38126				
MID-SOUTH FOOD BANK 3865 SPERKINS ROAD MEMPHIS, TN 38118	NONE	501(C)3	CHARITABLE DONATIONS	10,000

Total .

MID-SOUTH FOOD BANK 3865 SPERKINS ROAD MEMPHIS, TN 38118	NONE	501(C)3	CHARITABLE DONATIONS	10,000

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				
PAGE ROBBINS 1961 S HOUSTON LEVEE ROAD COLLIERVILLE, TN 38017	NONE	501(C)3	CHARITABLE DONATIONS	2,500
DODTED LEATH CHILDDENIC HOME	NONE	504(0)3	CHARTTARIE DONATIONS	F 000

COLLIERVILLE, TN 38017				
PORTER-LEATH CHILDREN'S HOME 3400 PRESCOTT AVENUE MEMPHIS, TN 38118	NONE	501(C)3	CHARITABLE DONATIONS	5,000
POTTER'S HOUSE FAMILY RESOURCE	NONE	501(C)3	CHARITABLE DONATIONS	2,500

PORTER-LEATH CHILDREN'S HOME 3400 PRESCOTT AVENUE MEMPHIS, TN 38118	NONE	501(C)3	CHARITABLE DONATIONS	5,000
POTTER'S HOUSE FAMILY RESOURCE CENTER PO BOX 4221 WINSTONSALEM NC 27105	NONE	501(C)3	CHARITABLE DONATIONS	2,500

MEMPHIS, TN 38118				
POTTER'S HOUSE FAMILY RESOURCE CENTER PO BOX 4221 WINSTONSALEM, NC 27105	NONE	501(C)3	CHARITABLE DONATIONS	2,500

POTTER'S HOUSE FAMILY RESOURCE CENTER PO BOX 4221 WINSTONSALEM, NC 27105	NONE	501(C)3	CHARITABLE DONATIONS	2,500

Total .

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

recipient

300,000

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

any foundation manager

or substantial contributor

Name and address (home or business)

CLARKSVILLE.TN 37040

	or substantial contributor			
a Paid during the year				
PROGRESSIVE DIRECTIONS 1249 PARADISE HILL ROAD	NONE	501(C)3	CHARITABLE DONATIONS	2,00

,				
RHODES COLLEGE 2000 NORTH PARKWAY MEMPHIS, TN 38112	NONE	501(C)3	CHARITABLE DONATIONS	

RHODES COLLEGE 2000 NORTH PARKWAY MEMPHIS, TN 38112	NONE	501(C)3	CHARITABLE DONATIONS	28,000
RONALD MCDONALD HOUSE	NONE	501(C)3	CHARITABLE DONATIONS	5,000

MEMPHIS, TN 38112				
RONALD MCDONALD HOUSE 535 ALABAMA STREET	NONE	501(C)3	CHARITABLE DONATIONS	5,00

MEMPHIS, TN 38112				
RONALD MCDONALD HOUSE 535 ALABAMA STREET	NONE	501(C)3	CHARITABLE DONATIONS	5,0
MEMBLIC TN 30105				

				1
RONALD MCDONALD HOUSE	NONE	501(C)3	CHARITABLE DONATIONS	5,00
535 ALABAMA STREET				
MEMPHIS.TN 38105				1

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

a Paid during the year				
RONALD MCDONALD HOUSE OF WINSTON-SALEM 419 S HAWTHORNE ROAD	NONE	501(C)3	CHARITABLE DONATIONS	2,500

WINSTONSALEM, NC 27103				
SAMARITAN MINISTRIES 414 E NORTHWEST BLVD WINSTONSALEM, NC 27105	NONE	501(C)3	CHARITABLE DONATIONS	3,0

SAMARITAN MINISTRIES 414 E NORTHWEST BLVD WINSTONSALEM, NC 27105	NONE	501(C)3	CHARITABLE DONATIONS	3,000
SHELBY RESIDENTIAL & VOCATIONS SERVICES	NONE	501(C)3	CHARITABLE DONATIONS	5,000

414 E NORTHWEST BLVD WINSTONSALEM, NC 27105				
SHELBY RESIDENTIAL & VOCATIONS SERVICES 3971 KNIGHT ARNOLD ROAD	NONE	501(C)3	CHARITABLE DONATIONS	5,000

William Strawing the English				
SHELBY RESIDENTIAL & VOCATIONS SERVICES 3971 KNIGHT ARNOLD ROAD MEMPHIS, TN 38118	NONE	501(C)3	CHARITABLE DONATIONS	5,000
Total			▶ 3a	300,000

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

a Paid during the year				
SOULFUL MEMPHIS OPERATION CHRISTMAS BASKET 5050 POPLAR AVENUE SUITE 1600 MEMPHIS, TN 38157	NONE	501(C)3	CHARITABLE DONATIONS	2,000

MEMPHIS, TN 38157				
STEWART COUNTY SCHOOLS PO BOX 367 DOVER, TN 37058	NONE	501(C)3	CHARITABLE DONATIONS	1,000
STOKES PARTNERSHIP FOR CHILDREN	NONE	501(C)3	CHARITABLE DONATIONS	2 500

STEWART COUNTY SCHOOLS PO BOX 367 DOVER, TN 37058	NONE	501(C)3	CHARITABLE DONATIONS	1,000
STOKES PARTNERSHIP FOR CHILDREN PO BOX 2319 KING, NC 27021	NONE	501(C)3	CHARITABLE DONATIONS	2,500

DOVER, TN 37058				
STOKES PARTNERSHIP FOR CHILDREN PO BOX 2319 KING, NC 27021	NONE	501(C)3	CHARITABLE DONATIONS	2,500
Total			▶ 3a	300,000

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

Name and address (home or business)	any foundation manager or substantial contributor	recipient	
a Paid during the year			

STOREHOUSE FOR JESUS	NONE	501(C)3	CHARITABLE DONATIONS	3,000
675 E LEXINGTON ROAD MOCKSVILLE, NC 27028				

MOCKSVILLE, NC 27028				
SUNY COUNTY SCHOOLS 543 OLD WESTFIELD ROAD PILOT MOUNTAIN, NC 27041	NONE	501(C)3	CHARITABLE DONATIONS	3,000
		1		l

SUNY COUNTY SCHOOLS 543 OLD WESTFIELD ROAD PILOT MOUNTAIN, NC 27041	NONE	501(C)3	CHARITABLE DONATIONS	3,000
THE GOOD SAMARITANS 303 DONELSON PARKWAY	NONE	501(C)3	CHARITABLE DONATIONS	3,000

PILOT MOUNTAIN, NC 27041				
THE GOOD SAMARITANS 303 DONELSON PARKWAY DOVER, TN 37058	NONE	501(C)3	CHARITABLE DONATIONS	3,000

Total			▶ 3a	300,000
303 DONELSON PARKWAY DOVER, TN 37058				
THE GOOD SAMARITANS	NONE	501(C)3	CHARITABLE DONATIONS	3,000

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

a Paid during the year				
THE MASTER'S TABLEPO BOX 215	NONE	501(C)3	CHARITABLE DONATIONS	4,500

PRINGFIELD, IN 3/1/2				
HE SALVATION ARMYPO BOX 1205 /INSTONSALEM, NC 27102	NONE	501(C)3	CHARITABLE DONATIONS	

or substantial contributor

THE SALVATION ARMYPO BOX 1205 WINSTONSALEM, NC 27102	NONE	501(C)3	CHARITABLE DONATIONS	5,000
THE SALVATION ARMY 210 KRAFT STREET	NONE	501(C)3	CHARITABLE DONATIONS	10,000

THE SALVATION ARMY 210 KRAFT STREET CLARKSVILLE, TN 37040	NONE	501(C)3	CHARITABLE DONATIONS	10,000

Total			▶ 3a	300,000
210 KRAFT STREET CLARKSVILLE, TN 37040				
THE SALVATION ARMY	NONE	501(C)3	CHARITABLE DONATIONS	10,00

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

or substantial contributor

Name and address (home or business)

	or substantial contributor			
a Paid during the year				
TN KIDS NUTRITION INC 1006 PEPPER STREET SPRINGFIELD, TN 37172	NONE	501(C)3	CHARITABLE DONATIONS	4,000

	SPRINGFIELD, IN 3/1/2				
	UNITED WAY 107 JEFFERSON STREET SUITE 107 CLARKSVILLE, TN 37040	NONE	501(C)3	CHARITABLE DONATIONS	2,000
1	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		1	

UNITED WAY 107 JEFFERSON STREET SUITE 107 CLARKSVILLE, TN 37040	NONE	501(C)3	CHARITABLE DONATIONS	2,000
UNITED WAY OF FORSYTH COUNTY 301 N MAIN STREET SUITE 1700	NONE	501(C)3	CHARITABLE DONATIONS	2,000

107 JEFFERSON STREET SUITE 107 CLARKSVILLE, TN 37040		001(0)0		_,,,,,
UNITED WAY OF FORSYTH COUNTY 301 N MAIN STREET SUITE 1700 WINSTONSALEM, NC 27101	NONE	501(C)3	CHARITABLE DONATIONS	2,000

CLARKSVILLE, TN 37040				
UNITED WAY OF FORSYTH COUNTY 301 N MAIN STREET SUITE 1700 WINSTONSALEM, NC 27101	NONE	501(C)3	CHARITABLE DONATIONS	2,000
Total			▶ 3a	300,000

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

Name and address (home or business)

,	or substantial contributor			
a Paid during the year				
UNITED WAY OF MID-SOUTH 1005 TILLMAN STREET	NONE	501(C)3	CHARITABLE DONATIONS	2,000

recipient

MEMPHIS, TN 38112				
VETERANS HELPING VETERANS 3614 N GLENN AVENUE WINSTONSALEM, NC 27105	NONE	501(C)3	CHARITABLE DONATIONS	5,0
VADIZIN CHRICTIAN	NONE	E01/C\2	CHARITARI E DONATIONS	0.0

VETERANS HELPING VETERANS 3614 N GLENN AVENUE WINSTONSALEM, NC 27105	NONE	501(C)3	CHARITABLE DONATIONS	5,000
YADKIN CHRISTIAN 117 WOODLYN DRIVE YADKINVILLE NC. 27055	NONE	501(C)3	CHARITABLE DONATIONS	8,000

WINSTONSALEM, NC 27105				
YADKIN CHRISTIAN 117 WOODLYN DRIVE YADKINVILLE, NC 27055	NONE	501(C)3	CHARITABLE DONATIONS	8,000
Total			> 3a	300,000

efile GRAPHIC print - DO NOT P	ROCESS	As Filed Data	-1	D	LN: 93491097005281		
TY 2020 Accounting Fees Schedule							
Name: AMERICAN SNUFF CHARITABLE TRUST							
	REGIONS BANK TRUSTEE						
EIN: 62-6036034							
Category	Amo	unt N	et Investment Income	Adjusted Net Income	Disbursements for Charitable		

1,093

1,093

Purposes

	EIN: 62-6036	034
Category	Amount	Net 1

ACCOUNTING FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491097005281						
TY 2020 Investments - Other Schedule									
Name: AMERICAN SNUFF CHARITABLE TRUST									
Hame.	REGIONS BANK TE								
EIN:	62-6036034								
Investments Other Schedule 2									

Investments Other Schedule 2							
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value				
OTHER INVESTMENTS	AT COST	2,631,402	3,683,245				

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491097005281					
TY 2020 Other Decreases Schedule								
Name:	AMERICAN SN	NUFF CHARITABLE TRUST						
	REGIONS BAN	IK TRUSTEE						
EIN:	62-6036034							
Do	escription		Amount					
BASIS ADJUSTMENT			1,701					

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	-	DLI	N: 93491097005281				
TY 2020 Other Professional Fees Schedule								
Name: AMERICAN SNUFF CHARITABLE TRUST								
	REGIONS BA	NK TRUSTEE						
EIN: 62-6036034								
Category	Amount	Net Investment	Adjusted Net	Disbursements				

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

5,645

5,645

INVESTMENT MANAGEMENT FEES

efile GRAPHIC print - DO NOT PROCE	ESS As Filed Data	-1	DLI	N: 93491097005281			
TY 2020 Taxes Schedule	TY 2020 Taxes Schedule						
Name: AMERICAN SNUFF CHARITABLE TRUST REGIONS BANK TRUSTEE EIN: 62-6036034							
Taxes Schedule							
Category Amount Net Investment Income Income Disbursements for Charitable Purposes							
FOREIGN TAXES	890	890		0			