## **Return of Private Foundation**

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

OMB No. 1545-0052 2017

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

| internal Heve                                                          | enue Service    | ▶ Go to v                               | vww.irs.gov/i    | Form990PF to                 | or instructions              | and the late                          | st informatic | Open                                                | to Public Inspection                             |  |
|------------------------------------------------------------------------|-----------------|-----------------------------------------|------------------|------------------------------|------------------------------|---------------------------------------|---------------|-----------------------------------------------------|--------------------------------------------------|--|
|                                                                        |                 | 17 or tax year be                       | ginning          | 1/01                         |                              | 2017, and                             |               | 12/31                                               | , 20 17                                          |  |
| Name of fo                                                             |                 |                                         |                  |                              |                              |                                       | A Employe     | r identification numb                               | 3f                                               |  |
|                                                                        | 's Outreach C   |                                         |                  |                              |                              |                                       | 62-1789148    |                                                     |                                                  |  |
|                                                                        | •               | . box number if mail is n               | ot delivered to  | street address)              | 1                            | Room/suite                            | B Telephon    | e number (see instruct                              |                                                  |  |
|                                                                        | ispering View   |                                         | <del></del>      | <del> </del>                 |                              |                                       | ļ             | 901-896-7818                                        |                                                  |  |
|                                                                        | -               | nce, country, and ZIP o                 | r foreign postal | code                         |                              |                                       | C If exempt   | ion application is pend                             | ling, check here ▶ 🔲 -                           |  |
| <u>-</u>                                                               | , Tn 38125      |                                         |                  |                              |                              |                                       |               |                                                     |                                                  |  |
| G Chec                                                                 | k all that app  | ·                                       | =                |                              | of a former p                | ublic charity                         | D 1. Foreign  | organizations, check                                | here ▶                                           |  |
|                                                                        |                 | ☐ Final retu                            |                  |                              |                              |                                       |               | organizations meetin                                |                                                  |  |
| H Chan                                                                 | li trans of our | Address of Scientists                   |                  | Name cha                     |                              | <del></del> †                         |               | here and attach compi<br>foundation status was      |                                                  |  |
|                                                                        |                 | anization:  Se                          |                  |                              |                              |                                       |               | 07(b)(1)(A), check here                             |                                                  |  |
|                                                                        |                 | of all assets at                        |                  |                              | : 🗹 Cash                     |                                       | 1             |                                                     |                                                  |  |
|                                                                        |                 | Part II, col. (c),                      |                  | iting method<br>er (specify) | . Lasii L                    | _ Accidar                             |               | ndation is in a 60-mont<br>ction 507(b)(1)(B), chec |                                                  |  |
|                                                                        | 6) <b>► \$</b>  |                                         |                  | • • • • • •                  | on cash basis.               | )                                     | under se      | 50011 507 (D)(1)(D), 51100                          |                                                  |  |
| Part I                                                                 |                 | f Revenue and Ex                        |                  |                              | T                            |                                       | L             |                                                     | (d) Disbursements                                |  |
| محجيب هجي                                                              |                 | olumns (b), (c), and (d)                |                  |                              | (a) Revenue a<br>expenses pe | ,   (D) Ne                            | t investment  | (c) Adjusted net income                             | for charitable purposes                          |  |
|                                                                        |                 | in column (a) (see instr                |                  | - •                          | books                        | '                                     | ncome         | n.com                                               | (cash basis only)                                |  |
| 1                                                                      | Contribution    | s, gifts, grants, etc., r               | eceived (attac   | h schedule)                  | 15                           | 0 00                                  |               |                                                     |                                                  |  |
| 2                                                                      |                 | if the foundation is n                  |                  |                              |                              |                                       |               |                                                     |                                                  |  |
| 3                                                                      | Interest on     | savings and tempo                       | orary cash in    | vestments                    |                              |                                       |               |                                                     |                                                  |  |
| 4                                                                      | Dividends a     | and interest from s                     | ecurities .      |                              |                              |                                       |               |                                                     |                                                  |  |
| 5a                                                                     |                 | 3                                       |                  |                              |                              |                                       |               |                                                     |                                                  |  |
| b                                                                      |                 | ncome or (loss)                         |                  |                              |                              |                                       |               |                                                     |                                                  |  |
| 9 6a                                                                   | ~               | (loss) from sale of                     |                  | on line 10                   | <u> </u>                     |                                       |               |                                                     |                                                  |  |
| Bevenue 6a b 7                                                         |                 | orice for all assets on                 |                  | -                            |                              |                                       |               |                                                     |                                                  |  |
| 7   <u>ق</u>                                                           |                 | n net income (from                      |                  |                              |                              |                                       |               |                                                     |                                                  |  |
| _   •                                                                  |                 | erm capital gain .                      |                  |                              |                              |                                       |               | <del></del>                                         | <del> </del>                                     |  |
| 9<br>  10a                                                             | Income mo       | less returns and allow                  |                  |                              |                              |                                       | ·             | <del></del>                                         | <del> </del>                                     |  |
| Ь                                                                      |                 | of goods sold .                         |                  |                              |                              |                                       |               |                                                     | <del> </del>                                     |  |
| 6                                                                      |                 | it or (loss) (attach s                  |                  |                              |                              |                                       |               |                                                     | <del> </del>                                     |  |
| 11                                                                     | -               | me (attach schedu                       | •                |                              |                              | · · · · · · · · · · · · · · · · · · · |               |                                                     |                                                  |  |
| 12                                                                     |                 | lines 1 through 11                      |                  |                              | 15                           | 0 00                                  |               | <del></del>                                         | <del>                                     </del> |  |
| 12                                                                     |                 | tion of officers, dir                   |                  |                              | 15                           | 0.00                                  |               |                                                     | <del> </del>                                     |  |
| 15<br>15<br>16a                                                        | Other emp       | loyee salaries and                      | wages            |                              |                              |                                       |               |                                                     |                                                  |  |
| <b>6</b> 15                                                            | Pension pla     | ans, employee ben                       | efits            |                              | -                            |                                       |               |                                                     |                                                  |  |
| 16a                                                                    | Legal fees      | (attach schedule)                       |                  | 1.11.10.11                   |                              |                                       |               |                                                     |                                                  |  |
| <b>6</b> P                                                             |                 | fees (attach sche                       |                  | ·····                        | ~ Y )                        |                                       |               |                                                     |                                                  |  |
| Operating and Administrative Ex 12 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 |                 | essional fees (attac                    |                  | MAB A                        | 2016                         |                                       |               |                                                     |                                                  |  |
| 일 17                                                                   |                 |                                         |                  | MAR 0 6                      | 2018                         |                                       |               | <b></b> -                                           | <del></del>                                      |  |
| 일 18                                                                   | Taxes (attac    | h schedule) (see ins                    | tructions)=      | 7                            |                              |                                       |               |                                                     |                                                  |  |
| E 19                                                                   | Depreciation    | on (attach schedule                     | e) and deple     | <b>wgde</b> i                | I, UT                        | <del>  </del>                         |               | ļ                                                   | <del> </del>                                     |  |
| ₹ 20                                                                   |                 | /                                       |                  |                              |                              |                                       |               |                                                     | <del> </del>                                     |  |
| 21 22                                                                  |                 | ferences, and mee                       | _                |                              |                              | <del></del>                           | <del> </del>  | <u> </u>                                            | <del> </del>                                     |  |
| E 23                                                                   |                 | d publications .<br>Inses (attach sched | <br>Hule)        |                              |                              | 6.75                                  |               |                                                     | <del> </del>                                     |  |
| E 24                                                                   |                 | rating and adm                          |                  |                              |                              | 0.73                                  |               |                                                     | <del> </del>                                     |  |
| E                                                                      |                 | 3 through 23                            |                  |                              | 15                           | 6.75                                  |               |                                                     |                                                  |  |
| 25                                                                     |                 | ns, gifts, grants pa                    |                  |                              | <del> </del>                 |                                       |               |                                                     |                                                  |  |
| 0 26                                                                   |                 | ses and disburseme                      |                  |                              | 18                           | 6.75                                  |               |                                                     | <del> </del>                                     |  |
| 27                                                                     |                 | ne 26 from line 12:                     |                  |                              |                              |                                       | <del></del>   | <del></del>                                         |                                                  |  |
| a                                                                      | Excess of r     | evenue over expen                       |                  |                              |                              | 6.75                                  |               |                                                     |                                                  |  |
| Ь                                                                      |                 | <b>ment income</b> (if n                |                  |                              |                              |                                       |               |                                                     |                                                  |  |
|                                                                        | Adjusted r      | <b>et income</b> (if nega               | ative, enter-    | 0-)                          |                              |                                       |               |                                                     |                                                  |  |
| For Paper                                                              | rwork Reduct    | ion Act Notice, see                     | instructions.    |                              |                              | at. No. 11289                         | x             | F                                                   | orm <b>990-PF</b> (2017)                         |  |

| Part il            |        | Balance Sheets Attached schedules and amounts in the description column                                      | Beginning of year       | End o                                 | f year                |  |
|--------------------|--------|--------------------------------------------------------------------------------------------------------------|-------------------------|---------------------------------------|-----------------------|--|
|                    |        | should be for end-of-year amounts only. (See instructions.)                                                  | (a) Book Value          | (b) Book Value                        | (c) Fair Market Value |  |
|                    | 1      | Cash non-interest-bearing                                                                                    | 0                       | 0                                     | 0                     |  |
|                    | 2      | Savings and temporary cash investments                                                                       |                         |                                       |                       |  |
|                    | 3      | Accounts receivable ▶                                                                                        |                         |                                       |                       |  |
|                    |        | Less: allowance for doubtful accounts ▶                                                                      |                         |                                       |                       |  |
|                    | 4      | Pledges receivable ▶                                                                                         | i                       |                                       |                       |  |
|                    | }      | Less: allowance for doubtful accounts ▶                                                                      |                         |                                       |                       |  |
|                    | 5      | Grants receivable                                                                                            |                         |                                       | <del></del>           |  |
|                    | 6      | Receivables due from officers, directors, trustees, and other                                                | }                       |                                       |                       |  |
|                    | }      | disqualified persons (attach schedule) (see instructions)                                                    |                         |                                       | <del></del>           |  |
|                    | 7      | Other notes and loans receivable (attach schedule) ▶                                                         |                         |                                       |                       |  |
|                    | }      | Less: allowance for doubtful accounts ▶                                                                      |                         |                                       |                       |  |
| Assets             | 8      | Inventories for sale or use                                                                                  |                         |                                       |                       |  |
| ž,                 | 9      | Prepaid expenses and deferred charges                                                                        |                         |                                       |                       |  |
| ₹                  | 10a    | Investments—U.S. and state government obligations (attach schedule)                                          |                         |                                       |                       |  |
|                    | b      | investments—corporate stock (attach schedule)                                                                |                         |                                       | <del></del>           |  |
|                    | 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     | 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                                                          | ļ                       | 1                                     | 1                     |  |
|                    |        | instructions. Also, see page 1, item l)                                                                      | 0                       | Xo                                    | / X o                 |  |
|                    | 17     | Accounts payable and accrued expenses                                                                        |                         |                                       | ļ                     |  |
| တ္က                | 18     | Grants payable                                                                                               |                         |                                       |                       |  |
| ij                 | 19     | Deferred revenue                                                                                             |                         |                                       |                       |  |
| Liabilities        | 20     | Loans from officers, directors, trustees, and other disqualified persons                                     |                         |                                       |                       |  |
| Lia                | 21     | Mortgages and other notes payable (attach schedule)                                                          |                         | <del></del>                           |                       |  |
|                    | 22     | Other liabilities (describe >                                                                                |                         |                                       | į                     |  |
|                    | 23     | Total liabilities (add lines 17 through 22)                                                                  | 0                       | 0                                     | •                     |  |
| 9                  |        | Foundations that follow SFAS 117, check here >                                                               | {                       |                                       | 1                     |  |
| ည                  |        | and complete lines 24 through 26, and lines 30 and 31.                                                       | {                       |                                       | į                     |  |
| Balances           | 24     | Unrestricted                                                                                                 |                         |                                       |                       |  |
| Ba                 | 25     | Temporarily restricted                                                                                       |                         |                                       |                       |  |
| פ                  | 26     | Permanently restricted                                                                                       |                         |                                       | }                     |  |
| 2                  |        | Foundations that do not follow SFAS 117, check here ▶ ☑ and complete lines 27 through 31.                    | 1                       |                                       | }                     |  |
| Net Assets or Fund | 27     |                                                                                                              | }                       |                                       | j                     |  |
| 9                  | 28     | Paid-in or capital surplus, or land, bldg., and equipment fund                                               |                         |                                       | }                     |  |
| 8                  | 29     | Retained earnings, accumulated income, endowment, or other funds                                             |                         |                                       |                       |  |
| B                  | 30     | Total net assets or fund balances (see instructions)                                                         | 0                       | 0                                     | }                     |  |
| e                  | 31     | Total liabilities and net assets/fund balances (see                                                          |                         |                                       | }                     |  |
| z                  |        | instructions)                                                                                                | o                       | o                                     |                       |  |
| Рa                 | rt III | Analysis of Changes in Net Assets or Fund Balances                                                           |                         |                                       |                       |  |
|                    |        | I net assets or fund balances at beginning of year-Part II, colur                                            | nn (a), line 30 (mus    | t agree with                          |                       |  |
|                    | end-   | of-year figure reported on prior year's return)                                                              |                         | 1                                     |                       |  |
| 2                  |        | r amount from Part I, line 27a                                                                               |                         |                                       |                       |  |
| 3                  |        | er increases not included in line 2 (itemize)                                                                |                         | 3                                     | <del></del>           |  |
| 4                  | Add    | lines 1, 2, and 3                                                                                            |                         | 4                                     |                       |  |
| -                  |        |                                                                                                              |                         |                                       |                       |  |
| _6                 | Total  | eases not included in line 2 (itemize)  I net assets or fund balances at end of year (line 4 minus line 5)—F | art II, column (b), lin | ne 30 6                               | 0                     |  |
|                    |        |                                                                                                              | <del></del>             |                                       | 5 OOO DE GOLT         |  |

| Part          | V Capital Gains and                   | Losses for Tax on Investn                                                            | nent Income                           |                                              |                                   |                                   |
|---------------|---------------------------------------|--------------------------------------------------------------------------------------|---------------------------------------|----------------------------------------------|-----------------------------------|-----------------------------------|
|               |                                       | nd(s) of property sold (for example, real e<br>se; or common stock, 200 shs. MLC Co. |                                       | (b) How acquired<br>P—Purchase<br>D—Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold<br>(mo., day, yr.)  |
| 1a            |                                       |                                                                                      |                                       |                                              |                                   |                                   |
| b             |                                       |                                                                                      |                                       |                                              |                                   |                                   |
| С             |                                       |                                                                                      |                                       |                                              |                                   |                                   |
| <u>d</u>      |                                       |                                                                                      |                                       |                                              |                                   | -                                 |
| е             |                                       |                                                                                      |                                       |                                              |                                   |                                   |
|               | (e) Gross sales price                 | (f) Depreciation allowed (or allowable)                                              |                                       | r other basis<br>ense of sale                |                                   | or (loss)<br>) minus (g))         |
| <u>a</u><br>b |                                       |                                                                                      |                                       |                                              |                                   |                                   |
| С             |                                       |                                                                                      |                                       |                                              |                                   |                                   |
| d             |                                       |                                                                                      |                                       |                                              |                                   |                                   |
| е             |                                       |                                                                                      |                                       |                                              |                                   |                                   |
|               | Complete only for assets sho          | wing gain in column (h) and owned                                                    | by the foundation                     | on 12/31/69.                                 | (f) Gains (Col.                   | (h) gain minus                    |
|               | (i) FMV as of 12/31/69                | (i) Adjusted basis<br>as of 12/31/69                                                 |                                       | ss of col. (i)<br>l. (j), if any             |                                   | less than -0-) or<br>om col. (h)) |
| a             |                                       |                                                                                      |                                       |                                              |                                   |                                   |
| ь             |                                       |                                                                                      |                                       |                                              |                                   |                                   |
| C             |                                       |                                                                                      |                                       |                                              |                                   |                                   |
| <u>d</u>      |                                       |                                                                                      |                                       |                                              |                                   |                                   |
|               |                                       |                                                                                      |                                       |                                              | <u></u>                           |                                   |
| 2             | Capital gain net income o             | rinat canital incel ( -                                                              | also enter in Pa<br>, enter -0- ın Pa | ,                                            | 2                                 |                                   |
| 3             | If gain, also enter in Part           | n or (loss) as defined in sections<br>I, line 8, column (c). See instru              | ictions. If (loss)                    | , enter -0- in )                             |                                   |                                   |
|               |                                       |                                                                                      |                                       |                                              | 3                                 |                                   |
| Part          | V Qualification Und                   | er Section 4940(e) for Redu                                                          | uced Tax on N                         | let Investmen                                | t Income                          |                                   |
| (For o        | ptional use by domestic pri           | vate foundations subject to the                                                      | section 4940(a)                       | tax on net invest                            | tment income.)                    |                                   |
| lf acet       | ion 4040(d)(0) amplica Janua          | a this and block                                                                     |                                       |                                              |                                   |                                   |
| 11 3601       | tion 4940(d)(2) applies, leave        | e triis part biarik.                                                                 |                                       |                                              |                                   |                                   |
| Was t         | he foundation liable for the          | section 4942 tax on the distribu                                                     | table amount of                       | f any year in the                            | base period?                      | ☐ Yes ☐ No                        |
| If "Yes       | s," the foundation doesn't o          | jualify under section 4940(e). Do                                                    | not complete t                        | his part.                                    | -                                 |                                   |
| 1             | Enter the appropriate amo             | ount in each column for each ye                                                      | ar; see the instr                     | uctions before m                             | aking any entries.                |                                   |
|               | (a)<br>Base period years              | (b)                                                                                  |                                       | (c)                                          | Duct                              | (d)<br>abution ratio              |
| Cale          | endar year (or tax year beginning in) | Adjusted qualifying distribution                                                     | S Netvalue o                          | f nonchantable-use a                         |                                   | livided by col. (c))              |
|               | 2016                                  |                                                                                      |                                       |                                              |                                   |                                   |
|               | 2015                                  |                                                                                      |                                       |                                              |                                   |                                   |
|               | 2014                                  |                                                                                      |                                       |                                              |                                   |                                   |
|               | 2013                                  |                                                                                      |                                       |                                              |                                   |                                   |
|               | 2012                                  |                                                                                      |                                       |                                              |                                   |                                   |
|               |                                       |                                                                                      |                                       |                                              |                                   |                                   |
| 2             | Total of line 1, column (d)           |                                                                                      |                                       |                                              | . 2                               |                                   |
| 3             |                                       | for the 5-year base period-div                                                       |                                       |                                              |                                   |                                   |
|               | the number of years the fo            | oundation has been in existence                                                      | if less than 5 ye                     | ears                                         | . 3                               |                                   |
|               |                                       |                                                                                      |                                       |                                              |                                   |                                   |
| 4             | Enter the net value of non-           | charitable-use assets for 2017 f                                                     | from Part X, line                     | 5                                            | . 4                               |                                   |
| 5             | Multiply line 4 by line 3             |                                                                                      |                                       |                                              | . 5                               |                                   |
| 6             | Enter 1% of net investmen             | nt income (1% of Part I, line 27b                                                    | o)                                    |                                              | . 6                               |                                   |
| 7             | Add lines 5 and 6                     |                                                                                      |                                       |                                              | . 7                               |                                   |
| 8             | Enter qualifying distribution         | ns from Part XII, line 4                                                             |                                       |                                              | . 8                               |                                   |
|               |                                       | iter than line 7, check the box in                                                   |                                       |                                              | that part using a 1               | % tax rate. See the               |

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| Part ' | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—                                                                                                                  | see ir         | ารtาเ         | ction | <u>15)</u>  |  |  |
|--------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------|-------|-------------|--|--|
| 1a     | Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.  Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) |                |               |       |             |  |  |
| ь      | b Domestic foundations that meet the section 4940(e) requirements in Part V, check                                                                                                                  |                |               |       |             |  |  |
|        | here ▶ □ and enter 1% of Part I, line 27b                                                                                                                                                           | T              |               |       |             |  |  |
| С      | c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).                                                                         |                |               |       |             |  |  |
| 2      | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)                                                                                          | <u> </u>       |               |       |             |  |  |
| 3      | Add lines 1 and 2                                                                                                                                                                                   |                |               | 0     |             |  |  |
| 4      | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)                                                                                        |                |               |       |             |  |  |
| 5      | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0                                                                                                              |                |               | 0     | <b></b>     |  |  |
| 6      | Credits/Payments:                                                                                                                                                                                   |                |               |       | 1           |  |  |
| 8      | 2017 estimated tax payments and 2016 overpayment credited to 2017 6a                                                                                                                                | 1              |               | - 1   | i }         |  |  |
| ь      | Exempt foreign organizations—tax withheld at source 6b                                                                                                                                              | ļ              |               |       | 1           |  |  |
| C      | Tax paid with application for extension of time to file (Form 8868) . 6c                                                                                                                            |                |               |       | 1           |  |  |
| d      | Backup withholding erroneously withheld                                                                                                                                                             | _              |               |       |             |  |  |
| 7      | Total credits and payments. Add lines 6a through 6d                                                                                                                                                 | <del></del>    |               |       |             |  |  |
| 8      | Enter any penalty for underpayment of estimated tax. Check here [] If Form 2220 is attached [8]                                                                                                     | ↓              |               |       |             |  |  |
| 9      | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed                                                                                                                       | <del> </del>   |               | 0     | <b></b>     |  |  |
| 10     | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10                                                                                                      | <del> </del>   |               | 0     |             |  |  |
| 11     | Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11                                                                                                                   | ᆚ              |               |       | ·           |  |  |
|        | VII-A Statements Regarding Activities                                                                                                                                                               |                |               | V1    | Na          |  |  |
| 1a     | During the tax year, did the foundation attempt to influence any national, state, or local legislation or or participate or intervence in any political comparison?                                 | ו זום ונ       |               | Yes   |             |  |  |
| _      | participate or intervene in any political campaign?                                                                                                                                                 |                | <u>1a</u>     |       | ~           |  |  |
| Þ      | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See instructions for the definition                                                            |                | 1b            |       | v           |  |  |
|        | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mate                                                                                          | erials         |               |       | 1           |  |  |
|        | published or distributed by the foundation in connection with the activities.                                                                                                                       | 1              |               |       |             |  |  |
| C      | Did the foundation file Form 1120-POL for this year?                                                                                                                                                | - }            | 1c            |       | <b>"</b>    |  |  |
|        | d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$  (2) On foundation managers. ▶ \$                                 |                |               |       |             |  |  |
| е      | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposon foundation managers. ▶ \$                                                             | sed            |               |       |             |  |  |
| 2      | Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.                                          |                | 2             |       | -           |  |  |
| 3      | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article                                                                                       | es of          |               |       | 7           |  |  |
| 4a     | Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                         | i              | 3<br>4a       |       | -           |  |  |
|        | If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?                                                                                                                             | - {            | 4a<br>4b      |       | <del></del> |  |  |
| 5      | Was there a liquidation, termination, dissolution, or substantial contraction during the year?                                                                                                      | . }            | 5             |       | -           |  |  |
| ·      | If "Yes," attach the statement required by General Instruction T.                                                                                                                                   | • }            | <del></del> - |       | <u> </u>    |  |  |
| 6      | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:                                                                                                   | - 1            |               |       | [           |  |  |
| •      | By language in the governing instrument, or                                                                                                                                                         | - 1            |               |       | 1 1         |  |  |
|        | <ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions</li> </ul>                                                                           | that           |               |       |             |  |  |
|        | conflict with the state law remain in the governing instrument?                                                                                                                                     |                | 6             |       | <b>1</b>    |  |  |
| 7      | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Pal                                                                       | rt XV          | 7             |       | -           |  |  |
| 8a     | Enter the states to which the foundation reports or with which it is registered. See instructions.                                                                                                  |                |               |       |             |  |  |
| -      |                                                                                                                                                                                                     |                |               |       |             |  |  |
| b      | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ger                                                                                            | neral          |               |       |             |  |  |
| =      | (or designate) of each state as required by General Instruction G? If "No," attach explanation                                                                                                      |                | 8b            |       |             |  |  |
| 9      | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)                                                                                           | ,              | <del></del>   |       |             |  |  |
| -      | 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "                                                                                        |                |               |       |             |  |  |
|        | complete Part XIV                                                                                                                                                                                   |                | 9             |       | ~           |  |  |
| 10     | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing                                                                                            |                | _ <del></del> |       |             |  |  |
|        | names and addresses                                                                                                                                                                                 | _ <u>.</u> _ ] | 10            |       | ~           |  |  |
|        |                                                                                                                                                                                                     |                |               | A -   | ,           |  |  |

| Part    | VIFA Statements Regarding Activities (continued)                                                                                                                                                                               |        |              |            |
|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|--------------|------------|
|         |                                                                                                                                                                                                                                |        | Yes          | No         |
| 11      | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions                                         | 11     |              | ~          |
| 12      | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions                                        | 12     |              | v          |
| 13      | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?                                                                                                            | 13     | ~            |            |
|         | Website address ▶ n/a                                                                                                                                                                                                          |        |              |            |
| 14      | /*************************************                                                                                                                                                                                         | 1-896- |              |            |
| 40      | Located at ▶ 8268 Whispering View Dr, Memphis, TN ZIP+4 ▶                                                                                                                                                                      | 3812   | 5            |            |
| 15      | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here and enter the amount of tax-exempt interest received or accrued during the year                                              | • •    | •            | <b>▶</b> □ |
| 16      | At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority                                                                                                                |        | Yes          | No         |
|         | over a bank, securities, or other financial account in a foreign country?                                                                                                                                                      | 16     | L            | -          |
|         | the foreign country                                                                                                                                                                                                            | ĺ      |              |            |
| Part    | VII-B Statements Regarding Activities for Which Form 4720 May Be Required                                                                                                                                                      | L      |              | L!         |
|         | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.                                                                                                                                        |        | Yes          | No         |
| 1a      | During the year, did the foundation (either directly or indirectly):                                                                                                                                                           |        |              |            |
|         | (1) Engage in the sale or exchange, or leasing of property with a disqualified person?   Yes  No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a                                     |        |              |            |
|         | disqualified person?                                                                                                                                                                                                           | j      |              |            |
|         | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes 🗹 No                                                                                                                            | İ      |              |            |
|         | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes Volume No. (5) Transfer any income or assets to a disqualified person (or make any of either available for                            |        |              |            |
|         | the benefit or use of a disqualified person)?                                                                                                                                                                                  | }      |              |            |
|         | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the                                                                                                                                     |        |              |            |
|         | foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)                                                                           |        |              |            |
| b       | If any answer is "Yes" to 1a(1)-(6), did any of the acts fall to qualify under the exceptions described in Regulations                                                                                                         | l      |              |            |
|         | section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions                                                                                                                                    | 1b     |              |            |
| _       | Organizations relying on a current notice regarding disaster assistance, check here                                                                                                                                            |        |              |            |
| С       | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?                                        | 1c     |              | •          |
| 2       | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):                                                 |        |              |            |
| а       | At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and                                                                                                                                    |        | 1            |            |
|         | 6e, Part XIII) for tax year(s) beginning before 2017?                                                                                                                                                                          |        |              |            |
| b       | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)                                                                                                                 | 1      | 1            |            |
|         | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to                                                                                                             |        |              |            |
|         | all years listed, answer "No" and attach statement—see instructions.)                                                                                                                                                          | 2b     |              | ļ          |
|         | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  20, 20, 20, 20, 20, 20                                                                                |        |              |            |
| 3a      | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?                                                                                                     |        |              |            |
| ь       | If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or                                                                                                                    |        |              |            |
| -       | disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the                                                                                                                  |        | }            |            |
|         | Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of                                                                                                                 |        | 1            |            |
|         | the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the                                                                                                                           |        | <b> </b>     |            |
| 4-      | foundation had excess business holdings in 2017.)                                                                                                                                                                              | 3b     |              |            |
| 4a<br>b | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | 4a     | ┼            | -          |
| •       | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?                                                                                                             | 4b     | <del> </del> |            |

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| Part   | VII-B                                                                                                  | Statements Regarding Activities                                                         | for V    | Vhich Form                    | 4720            | May Be R                              | equire  | d (contin                    | nued)        |                                              |         |        |
|--------|--------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|----------|-------------------------------|-----------------|---------------------------------------|---------|------------------------------|--------------|----------------------------------------------|---------|--------|
| 5a     |                                                                                                        | ne year, did the foundation pay or incur                                                |          |                               |                 |                                       |         |                              |              |                                              | Yes     | No     |
|        | (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? . ☐ Yes ☑ No |                                                                                         |          |                               |                 |                                       |         |                              | 1            | j                                            |         |        |
|        |                                                                                                        | ence the outcome of any specific public<br>tly or indirectly, any voter registration dr |          | •                             |                 | • -                                   | -       |                              |              |                                              |         |        |
|        |                                                                                                        | de a grant to an individual for travel, stu                                             |          |                               |                 |                                       |         | ∐ Yes                        | ☑ No<br>☑ No | 1 !                                          |         | ,      |
|        |                                                                                                        | de a grant to an organization other than                                                |          |                               |                 |                                       |         |                              | <u>-</u> 140 |                                              |         | 1      |
|        |                                                                                                        |                                                                                         |          |                               |                 |                                       |         | Yes                          | ☑ No         |                                              |         |        |
|        |                                                                                                        | de for any purpose other than religious,                                                |          |                               |                 |                                       |         |                              |              |                                              |         |        |
|        |                                                                                                        | oses, or for the prevention of cruelty to o                                             |          |                               |                 |                                       |         |                              | ☑ No         |                                              |         |        |
| b      |                                                                                                        | swer is "Yes" to 5a(1)-(5), did any of the                                              |          |                               |                 |                                       |         |                              | ibed in      | 1 1                                          |         |        |
|        | _                                                                                                      | ons section 53.4945 or in a current notice                                              | _        | =                             |                 |                                       |         |                              |              | 5b                                           |         |        |
| c      |                                                                                                        | itions relying on a current notice regardi<br>swer is "Yes" to question 5a(4), does t   |          |                               |                 |                                       |         |                              |              | <b>'</b>                                     |         |        |
| •      |                                                                                                        | it maintained expenditure responsibility                                                |          |                               |                 |                                       |         |                              | □No          |                                              |         |        |
|        |                                                                                                        | attach the statement required by Regula                                                 |          | _                             |                 |                                       |         |                              | ٠.,٠٠٠       | }                                            |         | 1      |
| 6a     | Did the f                                                                                              | oundation, during the year, receive any                                                 |          |                               |                 |                                       | miums   | <b>;</b>                     |              |                                              |         |        |
|        | •                                                                                                      | sonal benefit contract?                                                                 |          |                               |                 |                                       |         | Yes Yes                      | ✓ No         |                                              |         |        |
| b      |                                                                                                        | oundation, during the year, pay premiun                                                 | ns, dire | ctly or indire                | ctly, on        | a personal                            | benefr  | t contract                   | ? .          | 6b                                           |         |        |
| 70     |                                                                                                        | to 6b, file Form 8870.<br>The during the tax year, was the foundation a                 | n nach i | to a avabibita                | d tou ob.       | altau tuanaa                          | 4i0     | Yes                          | ₽ No         | 1                                            |         |        |
|        |                                                                                                        | did the foundation receive any proceeds                                                 |          |                               |                 |                                       |         |                              |              | 7b                                           |         | i      |
|        | VIII                                                                                                   | Information About Officers, Direc                                                       |          |                               |                 |                                       |         |                              |              |                                              | ees,    |        |
|        |                                                                                                        | and Contractors                                                                         |          |                               |                 |                                       |         |                              |              |                                              |         |        |
|        | List all c                                                                                             | fficers, directors, trustees, and found                                                 |          |                               | ~~~~            |                                       |         |                              |              | <u>.                                    </u> |         |        |
|        |                                                                                                        | (a) Name and address                                                                    | hou      | e, and average<br>rs per week | (Hr             | mpensation<br>not paid,               | emplo   | Contribution<br>byee benefit | plans        | (e) Expe                                     | nse acc |        |
| Candis | s Saulsber                                                                                             | N                                                                                       | Officer  | ed to position                | en              | ter -0-)                              | and det | erred compe                  | ensation     |                                              |         |        |
|        | Vhispering                                                                                             | **                                                                                      | Omcci    | 201113                        |                 | 150.00                                | ,       |                              | 0            |                                              |         | 0      |
|        | his, TN 38                                                                                             | ······································                                                  |          |                               |                 |                                       |         |                              |              |                                              |         |        |
|        |                                                                                                        |                                                                                         |          |                               | <u> </u>        | · · · · · · · · · · · · · · · · · · · |         |                              |              |                                              |         |        |
|        |                                                                                                        |                                                                                         |          |                               |                 |                                       |         |                              |              |                                              |         |        |
|        |                                                                                                        |                                                                                         |          |                               |                 |                                       |         |                              |              |                                              |         |        |
| ~      |                                                                                                        | ***************************************                                                 |          |                               |                 |                                       |         |                              |              |                                              |         |        |
| 2      | Compen                                                                                                 | sation of five highest-paid employee                                                    | s (oth   | er than tho                   | se incl         | uded on li                            | ne 1-   | see instr                    | uction       | s). If n                                     | one,    | enter  |
|        | "NONE."                                                                                                |                                                                                         | •        |                               |                 |                                       |         |                              |              |                                              |         |        |
|        | <del>_</del>                                                                                           |                                                                                         |          | (b) Title, and                | average         |                                       |         | (d) Contribu                 |              |                                              | nee ac  | count  |
| 1      | (a) Name and                                                                                           | d address of each employee paid more than \$50,00                                       | 0        | hours per v                   | veek<br>osition | (c) Comper                            | sation  | plans and c                  | deferred     |                                              | allowar |        |
| None   | <del></del>                                                                                            |                                                                                         |          | ļ                             |                 |                                       |         | Compen                       | 3811011      | <del></del>                                  |         |        |
|        |                                                                                                        | ***************************************                                                 |          |                               |                 | 1                                     |         | <u> </u>                     |              | ļ                                            |         |        |
|        |                                                                                                        | **************************************                                                  |          | <del> </del>                  |                 | <del> </del>                          |         |                              |              |                                              |         |        |
|        |                                                                                                        |                                                                                         |          | <u></u>                       |                 |                                       |         | <u> </u>                     |              |                                              |         |        |
|        |                                                                                                        |                                                                                         |          |                               |                 | 1                                     |         |                              |              |                                              |         |        |
|        |                                                                                                        |                                                                                         |          | ļ                             |                 | <b> </b>                              |         | <b> </b>                     |              | <b> </b>                                     |         |        |
|        |                                                                                                        |                                                                                         |          | }                             |                 | }                                     |         | 1                            |              |                                              |         |        |
|        |                                                                                                        |                                                                                         |          | <del> </del>                  |                 | <del> </del>                          |         | <del> </del>                 |              | <del> </del>                                 |         |        |
|        |                                                                                                        |                                                                                         |          | 1                             |                 | ,                                     |         | 1                            |              | }                                            |         |        |
| Total  | number o                                                                                               | other employees paid over \$50,000 .                                                    | <u> </u> | · · · · ·                     |                 | · · · ·                               |         | ·                            | . ▶          |                                              | None    |        |
|        |                                                                                                        |                                                                                         |          |                               |                 |                                       |         |                              |              | c 00                                         | n_DE    | (0017) |

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| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors (continued)                                                                                                                         | Paid Employees,                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| 3 Five highest-paid independent contractors for professional services. See instructions. If none, en                                                                                                                                       | iter "NONE."                            |
| (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                                                                                                                                                                   | None                                    |
|                                                                                                                                                                                                                                            | · · · · · · · · · · · · · · · · · · · · |
| Part IX-A Summary of Direct Charitable Activities                                                                                                                                                                                          |                                         |
| List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the organizations and other beneficianes served, conferences convened, research papers produced, etc. | number of 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                                  |
|                                                                                                                                                                                                                                            |                                         |
| ***************************************                                                                                                                                                                                                    |                                         |
|                                                                                                                                                                                                                                            |                                         |
| 2                                                                                                                                                                                                                                          |                                         |
|                                                                                                                                                                                                                                            |                                         |
|                                                                                                                                                                                                                                            |                                         |
| All other program-related investments. See instructions.                                                                                                                                                                                   |                                         |
| 3                                                                                                                                                                                                                                          |                                         |
|                                                                                                                                                                                                                                            |                                         |
|                                                                                                                                                                                                                                            |                                         |
| Total. Add lines 1 through 3                                                                                                                                                                                                               | 🕨                                       |
|                                                                                                                                                                                                                                            | Form <b>990-PF</b> (20                  |

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| Part   |                                                                                                                                                                                                                        | gn found       | dations, |
|--------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------|
|        | see instructions.)                                                                                                                                                                                                     | <del>, ,</del> |          |
| 1      | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:                                                                                                            |                |          |
| а      | Average monthly fair market value of securities                                                                                                                                                                        | 1a             | 0        |
| ь      | Average of monthly cash balances                                                                                                                                                                                       | 1b             |          |
| С      | Fair market value of all other assets (see instructions)                                                                                                                                                               | 1c             |          |
| đ      | Total (add lines 1a, b, and c)                                                                                                                                                                                         | 1d             | 0        |
| е      | Reduction claimed for blockage or other factors reported on lines 1a and                                                                                                                                               |                |          |
|        | 1c (attach detailed explanation)                                                                                                                                                                                       |                |          |
| 2      | Acquisition indebtedness applicable to line 1 assets                                                                                                                                                                   | 2              |          |
| 3      | Subtract line 2 from line 1d                                                                                                                                                                                           | 3              | 0        |
| 4      | Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see                                                                                                                             |                |          |
|        | instructions)                                                                                                                                                                                                          | 4              | 0        |
| 5      | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4                                                                                                                   | 5              | 0        |
| 6      | Minimum investment return. Enter 5% of line 5                                                                                                                                                                          | 6              | 0        |
| Part   |                                                                                                                                                                                                                        | oundatio       | ons      |
| 1      | Minimum investment return from Part X, line 6                                                                                                                                                                          | 1              | O        |
| 2a     | Tax on investment income for 2017 from Part VI, line 5                                                                                                                                                                 |                |          |
| b      | Income tax for 2017. (This does not include the tax from Part VI.) 2b                                                                                                                                                  | ] ]            |          |
| C      | Add lines 2a and 2b                                                                                                                                                                                                    | 2c             | 0        |
| 3      | Distributable amount before adjustments. Subtract line 2c from line 1                                                                                                                                                  | 3              | 0        |
| 4      | Recoveries of amounts treated as qualifying distributions                                                                                                                                                              | 4              |          |
| 5      | Add lines 3 and 4                                                                                                                                                                                                      | 5              | 0        |
| 6      | Deduction from distributable amount (see instructions)                                                                                                                                                                 | 6              |          |
| 7      | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,                                                                                                                            |                |          |
|        | line 1                                                                                                                                                                                                                 | 7              | 0        |
|        | Qualifying Distributions (see instructions)                                                                                                                                                                            | ·              |          |
| 1_     | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:                                                                                                                             |                | _        |
| a      | Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26                                                                                                                                            | 1a             | 0        |
| Ъ      | Program-related investments—total from Part IX-B                                                                                                                                                                       | 1b             |          |
| 2      | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,                                                                                                                       | _              |          |
|        | purposes                                                                                                                                                                                                               | 2              |          |
| 3      | Amounts set aside for specific chantable projects that satisfy the:                                                                                                                                                    |                |          |
| a      | Suitability test (prior IRS approval required)                                                                                                                                                                         | 3a             |          |
| b      | Cash distribution test (attach the required schedule)                                                                                                                                                                  | 3b             |          |
| 4<br>5 | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. | 4              | 0        |
| J      | Enter 1% of Part I, line 27b. See instructions                                                                                                                                                                         | _              | 0        |
| 6      |                                                                                                                                                                                                                        | 6              |          |
| U      | Adjusted qualifying distributions. Subtract line 5 from line 4                                                                                                                                                         |                |          |
|        | Jermine in min angular in infal rangement of morth friend location                                                                                                                                                     |                | 000 DE   |

| ran | VIII Undistributed Income (see instruction                                                                                | ons)                                  | <del></del>                |                    |                                       |
|-----|---------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------|--------------------|---------------------------------------|
| 1   | Distributable amount for 2017 from Part XI,                                                                               | (a)<br>Corpus                         | (b)<br>Years prior to 2016 | <b>(c)</b><br>2016 | (d)<br>2017                           |
|     | line 7                                                                                                                    |                                       |                            |                    | 0                                     |
| 2   | Undistributed income, if any, as of the end of 2017:                                                                      |                                       |                            |                    | i                                     |
| а   | Enter amount for 2016 only                                                                                                |                                       |                            |                    |                                       |
| b   | Total for prior years: 20,20,20                                                                                           |                                       |                            |                    |                                       |
| 3   | Excess distributions carryover, if any, to 2017:                                                                          |                                       |                            |                    |                                       |
| а   | From 2012                                                                                                                 |                                       |                            |                    |                                       |
| b   | From 2013                                                                                                                 |                                       |                            |                    |                                       |
| c   | From 2014                                                                                                                 |                                       |                            |                    |                                       |
| ď   | From 2015                                                                                                                 |                                       |                            |                    | i                                     |
| e   | From 2016                                                                                                                 |                                       |                            |                    |                                       |
| -   |                                                                                                                           |                                       |                            |                    |                                       |
| 4   | Total of lines 3a through e                                                                                               |                                       |                            |                    |                                       |
| а   | Applied to 2016, 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)                                               | •                                     |                            |                    |                                       |
| -4  | -                                                                                                                         | · · · · · · · · · · · · · · · · · · · |                            |                    |                                       |
| đ   | Applied to 2017 distributable amount                                                                                      |                                       |                            |                    |                                       |
| -Θ  | Remaining amount distributed out of corpus                                                                                | 0                                     |                            |                    |                                       |
| 5   | Excess distributions carryover applied to 2017                                                                            |                                       |                            | ·····              | · · · · · · · · · · · · · · · · · · · |
|     | (If an amount appears in column (d), the same amount must be shown in column (a).)                                        |                                       |                            |                    |                                       |
| 6   | Enter the net total of each column as indicated below:                                                                    |                                       |                            |                    |                                       |
| а   | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5                                                                         | 0                                     |                            |                    |                                       |
| b   | Prior years' undistributed income. Subtract                                                                               |                                       |                            |                    |                                       |
|     | line 4b from line 2b                                                                                                      |                                       | o                          |                    |                                       |
| С   | Enter the amount of prior years' undistributed                                                                            |                                       |                            |                    |                                       |
|     | income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed |                                       |                            |                    |                                       |
| ۰   |                                                                                                                           |                                       | <del>,</del>               |                    |                                       |
| đ   | Subtract line 6c from line 6b. Taxable amount—see instructions                                                            |                                       | 0                          |                    |                                       |
| 0   | Undistributed income for 2016. Subtract line                                                                              |                                       |                            |                    |                                       |
|     | 4a from line 2a. Taxable amount-see                                                                                       |                                       |                            |                    |                                       |
|     | instructions                                                                                                              |                                       |                            | 0                  |                                       |
| f   | Undistributed income for 2017. Subtract lines                                                                             |                                       |                            |                    |                                       |
|     | 4d and 5 from line 1. This amount must be                                                                                 |                                       |                            |                    |                                       |
|     | distributed in 2018                                                                                                       |                                       |                            |                    | 0                                     |
| 7   | Amounts treated as distributions out of corpus                                                                            |                                       |                            |                    |                                       |
|     | to satisfy requirements imposed by section                                                                                |                                       |                            |                    |                                       |
|     | 170(b)(1)(F) or 4942(g)(3) (Election may be                                                                               |                                       |                            |                    |                                       |
|     | required—see instructions)                                                                                                |                                       |                            |                    |                                       |
| 8   | Excess distributions carryover from 2012 not                                                                              |                                       |                            |                    |                                       |
| •   | applied on line 5 or line 7 (see instructions) .                                                                          |                                       |                            |                    |                                       |
| 9   | Excess distributions carryover to 2018.                                                                                   | 0                                     |                            |                    |                                       |
| 3   | Subtract lines 7 and 8 from line 6a                                                                                       |                                       |                            | :                  |                                       |
| •   |                                                                                                                           | 0                                     |                            | <u> </u>           |                                       |
| 10  | Analysis of line 9:                                                                                                       |                                       |                            |                    |                                       |
| a   | Excess from 2013 0                                                                                                        |                                       |                            |                    |                                       |
| b   | Excess from 2014 0                                                                                                        |                                       |                            |                    |                                       |
| C   | Excess from 2015 0                                                                                                        |                                       |                            |                    |                                       |
| đ   | Excess from 2016                                                                                                          |                                       |                            |                    |                                       |
| е   | Excess from 2017 0                                                                                                        | _                                     |                            |                    |                                       |

|      | 00-PF (2017)                                                              | At a control of     |                               | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | <del></del>                           | Page 10              |
|------|---------------------------------------------------------------------------|---------------------|-------------------------------|----------------------------------------|---------------------------------------|----------------------|
| Part |                                                                           |                     |                               |                                        | }                                     |                      |
| 1a   | If the foundation has received a ruling                                   | -                   |                               |                                        | _                                     | /                    |
|      | foundation, and the ruling is effective fo                                |                     | -                             |                                        |                                       | VA /                 |
| ь    | Check box to indicate whether the four                                    |                     | e operating toundar           |                                        | ection 1 4942(j)                      | (3) or 4942(j)(5)    |
| 2a   | Enter the lesser of the adjusted net income from Part I or the minimum    | Tax year            | ļ                             | Prior 3 years                          | · · · · · · · · · · · · · · · · · · · | (e) Total            |
|      | investment return from Part X for                                         | (a) 2017            | (b) 2016                      | (c) 2015                               | (d) 2014                              | <u>/</u>             |
|      | each year listed                                                          |                     | <u> </u>                      | ļ                                      |                                       | <u> </u>             |
|      | 85% of line 2a                                                            |                     |                               | <u> </u>                               |                                       |                      |
| C    | Qualifying distributions from Part XII,                                   | }                   |                               |                                        |                                       |                      |
|      | line 4 for each year listed                                               | ļ                   | <u> </u>                      | <u> </u>                               |                                       |                      |
| d    | Amounts included in line 2c not used directly                             | •                   | 1                             | 1                                      |                                       | }                    |
|      | for active conduct of exempt activities                                   |                     |                               | <u> </u>                               | /                                     | <u> </u>             |
| е    | Qualifying distributions made directly                                    | }                   |                               |                                        | <b>1</b>                              |                      |
|      | for active conduct of exempt activities.                                  | }                   | 1                             |                                        |                                       |                      |
|      | Subtract line 2d from line 2c                                             | {                   | <u> </u>                      |                                        |                                       | 1                    |
| 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)                                                  |                     |                               |                                        |                                       | }                    |
| ь    | "Endowment" alternative test-enter 2/3                                    |                     |                               |                                        |                                       |                      |
|      | of minimum investment return shown in Part X, line 6 for each year listed | {                   |                               |                                        |                                       |                      |
| C    | "Support" alternative test—enter:                                         |                     |                               | <del></del>                            | · · · · · · · · · · · · · · · · · · · |                      |
|      | (1) Total support other than gross                                        |                     |                               |                                        |                                       |                      |
|      | investment income (interest,                                              | }                   |                               |                                        |                                       |                      |
|      | dividends, rents, payments on                                             | }                   | V                             |                                        |                                       |                      |
|      | securities loans (section 512(a)(5)), or royalties)                       | /                   | 1                             | }                                      |                                       |                      |
|      | (2) Support from general public                                           | /                   | <del> </del>                  | <del> </del>                           |                                       | <del> </del>         |
|      | and 5 or more exempt                                                      |                     |                               | }                                      |                                       |                      |
|      | organizations as provided in section 4942(j)(3)(B)(iii)                   |                     | ,                             | }                                      |                                       |                      |
|      | (3) Largest amount of support from                                        | ·                   |                               | <del> </del>                           |                                       |                      |
|      | an exempt organization                                                    |                     |                               |                                        |                                       |                      |
|      | (4) Gross investment income                                               |                     | <del> </del>                  | <del> </del>                           |                                       | <del> </del>         |
| Part |                                                                           | on (Complete th     | nis part only if t            | he foundation h                        | ad \$5,000 or m                       | ore in assets at     |
|      | any time during the year-                                                 |                     |                               |                                        |                                       |                      |
| 1    | Information Regarding Foundation                                          |                     | <del></del>                   | ······································ | <del></del>                           |                      |
| а    | List any managers of the foundation                                       |                     | uted more than 29             | % of the total cont                    | ributions received                    | by the foundation    |
|      | before the close of any tax year (but o                                   |                     |                               |                                        |                                       | •                    |
|      | • •                                                                       | •                   |                               | , ,                                    |                                       |                      |
| b    | List any managers of the foundation                                       | who own 10% o       | r more of the stoo            | ck of a corporation                    | n (or an equally la                   | arge portion of the  |
|      | ownership of a partnership or other el                                    |                     |                               |                                        |                                       | •                    |
|      |                                                                           |                     |                               | _                                      |                                       |                      |
| 2    | Information Regarding Contribution                                        | n. Grant. Gift. Los | n. Scholarship, e             | tc Programs:                           |                                       | <del></del>          |
|      | Check here ▶ ☐ If the foundation                                          |                     | • •                           | •                                      | organizations and                     | does not accept      |
|      | unsolicited requests for funds. If the f                                  |                     |                               |                                        |                                       |                      |
|      | complete items 2a, b, c, and d. See in                                    |                     | <b>J</b> , <b>J</b> 12, 1111, |                                        | <b>3</b>                              |                      |
| а    | The name, address, and telephone nu                                       |                     | dress of the perso            | n to whom applica                      | tions should be a                     | ddressed:            |
|      | , , , , , , , , , , , , , , , , , , , ,                                   |                     |                               | то того принос                         |                                       |                      |
|      |                                                                           |                     |                               |                                        |                                       |                      |
| b    | The form in which applications should                                     | be submitted an     | d information and             | materials they sho                     | uld include:                          |                      |
|      | , p. p. 100 110 0110 0110 0110 0110 0110                                  |                     |                               |                                        | =                                     |                      |
|      |                                                                           |                     |                               |                                        |                                       |                      |
| C    | Any submission deadlines:                                                 |                     | <del></del>                   | <del></del>                            |                                       |                      |
|      | · · · · · · · · · · · · · · · · · · ·                                     |                     |                               |                                        |                                       |                      |
| d    | Any restrictions or limitations on av                                     | vards, such as b    | y geographical a              | reas, charitable fi                    | elds, kinds of ins                    | stitutions, or other |
|      | factors:                                                                  |                     |                               |                                        |                                       |                      |
|      |                                                                           |                     |                               |                                        |                                       |                      |

| 3                                            | Supplementary Information (con Grants and Contributions Paid During | the Vear or Approx                                                                                        | ed for Eutre                                      | a Dayment           |     |
|----------------------------------------------|---------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|---------------------------------------------------|---------------------|-----|
| <u>.                                    </u> | Recipient                                                           | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of                              | Purpose of grant or | Amo |
|                                              | Name and address (home or business)                                 | any foundation manager or substantial contributor                                                         | recipient                                         | contribution        |     |
| а                                            | Paid during the year                                                | <del> </del>                                                                                              |                                                   | <del></del>         |     |
|                                              |                                                                     |                                                                                                           | <u> </u>                                          |                     | 1   |
|                                              |                                                                     |                                                                                                           | <b>1</b>                                          |                     |     |
|                                              |                                                                     |                                                                                                           | 1                                                 |                     |     |
|                                              |                                                                     |                                                                                                           | j j                                               |                     | 1   |
|                                              |                                                                     |                                                                                                           | j j                                               |                     |     |
|                                              |                                                                     |                                                                                                           | <b>i</b>                                          |                     | )   |
|                                              |                                                                     |                                                                                                           | }                                                 |                     | )   |
|                                              |                                                                     |                                                                                                           | )                                                 |                     | ]   |
|                                              |                                                                     |                                                                                                           | ]                                                 |                     |     |
|                                              |                                                                     |                                                                                                           | i l                                               |                     | -   |
|                                              |                                                                     |                                                                                                           |                                                   |                     |     |
|                                              |                                                                     |                                                                                                           |                                                   |                     |     |
|                                              |                                                                     |                                                                                                           |                                                   |                     |     |
|                                              |                                                                     |                                                                                                           | ĺ                                                 |                     | 1   |
|                                              |                                                                     |                                                                                                           | (                                                 |                     | - 1 |
|                                              |                                                                     |                                                                                                           | ł                                                 |                     |     |
|                                              |                                                                     |                                                                                                           | 1                                                 |                     |     |
|                                              |                                                                     |                                                                                                           | İ                                                 |                     |     |
|                                              |                                                                     |                                                                                                           | <b>i</b>                                          |                     |     |
|                                              |                                                                     |                                                                                                           | <b>i</b>                                          |                     |     |
|                                              |                                                                     |                                                                                                           | }                                                 |                     |     |
|                                              |                                                                     |                                                                                                           | }                                                 |                     | }   |
|                                              |                                                                     |                                                                                                           | , ;                                               |                     |     |
|                                              |                                                                     |                                                                                                           | }                                                 |                     | 1   |
|                                              |                                                                     |                                                                                                           | ) [                                               |                     |     |
|                                              |                                                                     |                                                                                                           |                                                   |                     |     |
|                                              |                                                                     |                                                                                                           | ] ]                                               |                     |     |
|                                              |                                                                     |                                                                                                           |                                                   |                     | ł   |
|                                              | Total                                                               | <del></del>                                                                                               | <u> </u>                                          |                     | 3a  |
| b                                            | Approved for future payment                                         | <del></del>                                                                                               | <del>' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' </del> |                     | Ja  |
|                                              |                                                                     |                                                                                                           |                                                   |                     |     |
|                                              |                                                                     |                                                                                                           | }                                                 |                     |     |
|                                              |                                                                     |                                                                                                           | }                                                 |                     |     |
|                                              |                                                                     |                                                                                                           | {                                                 |                     |     |
|                                              |                                                                     |                                                                                                           | 1                                                 |                     |     |
|                                              |                                                                     | }                                                                                                         |                                                   |                     | 1   |
|                                              |                                                                     |                                                                                                           |                                                   |                     |     |
|                                              |                                                                     |                                                                                                           |                                                   |                     |     |
|                                              |                                                                     |                                                                                                           |                                                   |                     |     |
|                                              |                                                                     |                                                                                                           | 1                                                 |                     |     |
|                                              |                                                                     |                                                                                                           |                                                   |                     |     |
|                                              |                                                                     |                                                                                                           |                                                   |                     |     |
|                                              |                                                                     |                                                                                                           | [ [                                               |                     |     |
|                                              |                                                                     | 1                                                                                                         | 1 1                                               |                     | 1   |

| Ente                     | r gro            | oss amounts unless otherwise indicated.               | Unrelated bu            | isiness income | Excluded by section   | n 512, 513, or 5°    | (e)<br>Related or exempt               |
|--------------------------|------------------|-------------------------------------------------------|-------------------------|----------------|-----------------------|----------------------|----------------------------------------|
|                          | D                |                                                       | (a)<br>Business code    | (b)<br>Amount  | (c)<br>Exclusion code | <b>(d)</b><br>Amount | function income<br>(See instructions.) |
| 1                        |                  | ogram service revenue:                                |                         | 450.00         | <del></del>           |                      |                                        |
|                          | a<br>b           | Parent Education Class                                | 900099                  | 150.00         | <b></b>               |                      | <del>- </del> -                        |
|                          |                  |                                                       |                         |                | <u> </u>              |                      | <del></del>                            |
|                          | C                |                                                       |                         |                | L                     |                      |                                        |
|                          | đ                |                                                       | <b></b>                 | <u> </u>       |                       |                      | <del></del>                            |
|                          | e                |                                                       | <b></b>                 |                | <b></b>               |                      | <del></del>                            |
|                          | T                |                                                       | ļ                       |                |                       |                      |                                        |
|                          | _                | Fees and contracts from government agencies           |                         |                | L                     |                      |                                        |
|                          |                  | mbership dues and assessments                         |                         |                |                       |                      |                                        |
|                          |                  | erest on savings and temporary cash investments       |                         |                |                       | <del> </del>         |                                        |
|                          |                  | idends and interest from securities                   |                         |                |                       |                      |                                        |
| 5                        | Net              | t rental income or (loss) from real estate:           |                         |                |                       |                      |                                        |
|                          | a                | Debt-financed property                                |                         |                |                       |                      |                                        |
|                          |                  | Not debt-financed property                            | Ĺ                       |                |                       |                      | _                                      |
|                          |                  | rental income or (loss) from personal property        |                         |                |                       |                      |                                        |
| 7                        | Oth              | ner investment income                                 |                         |                |                       |                      |                                        |
| 8                        | Gai              | n or (loss) from sales of assets other than inventory |                         |                |                       |                      |                                        |
| 9                        | Net              | t income or (loss) from special events                |                         |                |                       |                      |                                        |
| 10                       | Gro              | oss profit or (loss) from sales of inventory          | {                       |                |                       |                      |                                        |
| 11                       | Oth              | ner revenue: a                                        |                         |                |                       |                      |                                        |
|                          | b                |                                                       |                         |                |                       |                      |                                        |
|                          | C                |                                                       |                         |                |                       |                      |                                        |
|                          | d                |                                                       |                         |                |                       |                      |                                        |
|                          | е                |                                                       |                         |                |                       |                      |                                        |
| 12                       | Sut              | ototal. Add columns (b), (d), and (e)                 | <del></del>             | 450.00         |                       |                      | <del></del>                            |
|                          |                  |                                                       |                         | l 150 00.      |                       |                      | į.                                     |
|                          |                  |                                                       |                         | 150 00         |                       | 13                   | 150.00                                 |
| 13                       | Tot              | tal. Add line 12, columns (b), (d), and (e)           |                         |                |                       | 13                   | 150.00                                 |
| 13<br>See                | Tot<br>wor       | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)                |                |                       | 13                   | 150.00                                 |
| 13<br>See                | Tot<br>wor       | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor       | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |
| 13<br>See<br>Par<br>Line | Tot<br>wor<br>LX | tal. Add line 12, columns (b), (d), and (e)           | <br>ıs.)<br>Accomplishm | ent of Exemp   | t Purposes            |                      |                                        |

| Part          | XVII           | Information<br>Organization           | n Regarding Tra<br>ons                      | nsfers to and T                                  | ransaction      | ns and F      | Relationshi       | ps W         | ith N   | onchar                 | itable    | Exe      | mpt              |
|---------------|----------------|---------------------------------------|---------------------------------------------|--------------------------------------------------|-----------------|---------------|-------------------|--------------|---------|------------------------|-----------|----------|------------------|
| 1             | in s           | he organization of                    | directly or indirectly other than section   |                                                  |                 |               |                   |              |         |                        |           | Yes      | No               |
| а             | _              |                                       | porting foundation                          | to a noncharitable                               | evemnt ora      | anization     | of:               |              |         |                        |           |          |                  |
| a             |                |                                       | porting foundation                          |                                                  |                 |               |                   |              |         |                        | 1a(1)     |          | -                |
|               | . ,            | other assets .                        |                                             |                                                  | • • • •         | • • •         |                   | • •          |         | • •                    | 1a(1)     |          | -                |
| b             |                | r transactions:                       |                                             |                                                  |                 |               |                   | • •          |         | • •                    | iaki      |          |                  |
|               |                |                                       | a noncharitable ex                          | empt organization                                | ,               |               |                   |              |         |                        | 1b(1)     |          | -                |
|               |                |                                       | ets from a nonchari                         |                                                  |                 |               |                   | • •          |         | • •                    | 1b(1)     |          | -                |
|               |                |                                       | , equipment, or oth                         |                                                  |                 |               |                   | • •          |         | • •                    | 1b(3)     |          | -                |
|               |                |                                       | rrangements                                 |                                                  |                 |               |                   |              |         | • •                    | 1b(4)     |          | -                |
|               |                |                                       | rantees                                     |                                                  |                 |               |                   | • •          | • •     | • •                    | 1b(5)     |          | 7                |
|               |                |                                       | ervices or members                          |                                                  |                 |               |                   |              | • •     | • •                    | 1b(6)     | _        | -                |
| С             |                |                                       | quipment, mailing l                         |                                                  |                 |               |                   |              | • •     | • •                    | 1c        |          | -                |
| ď             |                |                                       | of the above is "Ye                         |                                                  |                 | •             |                   |              |         |                        |           | fair m   |                  |
| _             |                |                                       | ther assets, or serv                        |                                                  |                 |               |                   |              |         |                        |           |          |                  |
|               |                |                                       | on or sharing arrang                        |                                                  |                 |               |                   |              |         |                        |           |          |                  |
| (a) Line      |                | (b) Amount involved                   |                                             | chantable exempt organ                           |                 |               | nption of transfe |              |         |                        |           |          |                  |
|               |                | · · · · · · · · · · · · · · · · · · · | , , , , , , , , , , , , , , , , , , ,       |                                                  |                 | ( )           |                   |              |         |                        |           |          |                  |
|               |                | · · · · · · · · · · · · · · · · · · · |                                             |                                                  |                 |               |                   |              |         |                        |           |          |                  |
|               | $\neg \dagger$ |                                       |                                             |                                                  |                 |               |                   |              |         |                        |           |          |                  |
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|               |                |                                       |                                             |                                                  |                 |               |                   |              |         |                        |           |          |                  |
|               |                |                                       |                                             | <del></del>                                      |                 |               | <del>-</del>      |              |         |                        |           |          |                  |
|               | $\dashv$       |                                       |                                             |                                                  |                 |               |                   |              |         | ·····                  |           |          |                  |
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|               |                |                                       | ——————————————————————————————————————      |                                                  |                 |               |                   |              |         |                        |           |          |                  |
|               |                |                                       |                                             |                                                  |                 |               |                   |              |         |                        |           |          |                  |
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| 2a            | le the         | foundation due                        | l<br>ectly or indirectly a                  | ffiliated with or re                             | olated to o     | oo or mo      | ro tay ayam       | nt ore       | 100170  | tions                  |           |          |                  |
| Za<br>h       | desc           | ribed in section 5                    | 501(c) (other than so<br>following schedule | ection 501(c)(3)) oı                             | r in section (  | 527? .        | · · · ·           | ρι org       |         | ···                    | ] Yes     |          | No               |
|               |                | (a) Name of organi                    |                                             | T                                                | of organization |               | · ·               | (c) Dec      | enntin  | n of relation          | nehin     |          |                  |
|               |                | (a) traine or organ                   | Lation                                      | (b) Type C                                       | or organization |               |                   | (0) 000      | Chption | 1 OI TEIGLIO           | dine      |          |                  |
|               |                |                                       |                                             |                                                  |                 |               |                   |              |         |                        |           |          |                  |
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| Sign<br>Here  | Согте          | ct, and complete, Declar              | aration/di prepare/lotine/ti                | han taxpayer) is based or                        | exe             | of which prep | parer has any kno | wledge.      | . (     | May the If with the pr | RS discu  | iss this | return<br>selow? |
|               | Jigh           | ature of officer or trus              |                                             | Date Date                                        | Title           |               | Data              |              |         | <u> </u>               | TIAL      |          |                  |
| Paid<br>Prepa | arer           | Print/Type preparer                   | s пате                                      | Preparer's signatur                              | ·               |               | Date              |              |         | c ☐ if F               | MΠΥ       | ,        |                  |
| Use (         |                | Firm's name ▶                         |                                             |                                                  |                 |               |                   | Firm's EIN ▶ |         |                        |           |          |                  |
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| Freeman's Outreach Center        | 62-1789148 | 1    |
|----------------------------------|------------|------|
| Form 990-PF, Page 1, Part I, Lir | ne 23      | <br> |

## Line 23 Stmt

| Other Expenses     | Rev/Exp Book | Net Inv Inc | Adj Net Inc | Charity Disb. |
|--------------------|--------------|-------------|-------------|---------------|
| Supplies/Materials | 36.75        |             |             |               |
|                    |              |             |             |               |
|                    |              |             |             |               |
|                    |              |             |             |               |

Total <u>36.75</u>

Freeman's Outreach Center 62-1789148 2

Supporting Statement of:

Form 990-PF, p1/Line 1(a)

Description Amount

Parent Education Class 150.00

Total

<u>150</u>