-orm **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

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OMB No. 1545-0047

F	or caler	ndar year 2019 or tax year beginning Janual			ndina	December 31	, 20 19	
	ame of fou]		r identification number			
F	reeman (Outreach Center		i		62-1789148		
-		street (or P.O box number if mail is not delivered to street address)	Room/s	surte	B Telephone number (see instructions)			
Р	.O. Box 2	25261	901-424-5002					
		, state or province, country, and ZIP or foreign postal code			C If exempt	ion application is pend		
м	emphis.	TN 38125			e wown.p.	ion approaction to post	ig, ondok no.02	
_			n of a former public of	charity	D 1. Foreign	n organizations, check	here	
		☐ Final return ☐ Amended	•	1	_	-	_	
_		Address change Name cha	nge			n organizations meeting here and attach compt		
³ Ħ	Checl	type of organization: Section 501(c)(3) exempt p	rivate foundation			foundation status was	_	
ī. C		on 4947(a)(1) nonexempt charitable trust Other tax		ation		07(b)(1)(A), check here		
Ī	Fair n	narket value of all assets at J Accounting method	I: 🗸 Cash 🗌 Acc	crual	E If the four	ndation is in a 60-mont	h termination	
	end o	f year (from Part II, col. (c), Other (specify)			under sec	ction 507(b)(1)(B), chec	k here ▶ 🗌	
	line 16	6) ► \$ 0.00 (Part I, column (d), must b	e on cash basis.)					
	Part I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements	
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		investment come	(c) Adjusted net income	for charitable purposes	
		the amounts in column (a) (see instructions).)	DOURS				(cash basis only)	
	1	Contributions, gifts, grants, etc., received (attach schedule)	10695			المراجد دالم المرابع المرابع	Cara, the book of line	
	2	Check ► ☐ If the foundation is not required to attach Sch. B	1111		*,* (, *)	Ma F COL	4 6 7 E	
	3	Interest on savings and temporary cash investments					,	
	4	Dividends and interest from securities					yez ne nhu se q	
	5a	Gross rents						
	Ь	Net rental income or (loss)	,			,	75	
Revenie	6a	Net gain or (loss) from sale of assets not on line 10		<u> </u>				
9	b	Gross sales price for all assets on line 6a		1			. 14	
ð	7	Capital gain net income (from Part IV, line 2)	·		R	OFIVED		
	- -	Net short-term capital gain			<u> </u>			
	9	Income modifications			M/	R 1 82020	<u>8</u>	
	10a	Gross sales less returns and allowances		- 1		7 2020		
	Ь	Less: Cost of goods sold	 	- $+$	OG			
	l c	Gross profit or (loss) (attach schedule)	 	<u> </u>		YEN; UT	}	
	11	Other income (attach schedule)	40005		4			
_	13	Compensation of officers, directors, trustees, etc.	10695					
6	13	Other employee salaries and wages	7978			1000		
	15	Pension plans, employee benefits	 			W VU		
2	16a	Legal fees (attach schedule)				10000	<u> </u>	
		Accounting fees (attach schedule)				XXX	 	
	C	Other professional fees (attach schedule)	<u> </u>			90 6 1 00		
Ţ	17	Interest						
	18	Taxes (attach schedule) (see instructions)						
(0)	19	Depreciation (attach schedule) and depletion					3	
C	20	Occupancy						
≥`	21	Travel, conferences, and meetings						
\$	22	Printing and publications						
M	23	Other expenses (attach schedule)	2716					
C	24	Total operating and administrative expenses.						
SCANNED JAN 1	š	Add lines 13 through 23	10695					
\mathbf{z}	25	Contributions, gifts, grants paid	ļ			J.		
		Total expenses and disbursements. Add lines 24 and 25	10695					
•	27	Subtract line 26 from line 12:			~ ' '		, "	
0 2022	а	Excess of revenue over expenses and disbursements	- 0				् क्ष	
22	b	Net investment income (if negative, enter -0-) .	, ; ; ,	1				
_	i C	Adjusted net income (if negative, enter -0-)	11 2 1		' 1		. 4	

Bal. Shut (b)

For Paperwork Reduction Act Notice, see instructions.

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Part II		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	Ø	()
	2	Savings and temporary cash investments	0	0	8
	3	Accounts receivable ▶	र्शक्त १ स्टब्स	Lesio - 6, 243 31.	
		Less: allowance for doubtful accounts ▶	0		0
	4	Pledges receivable ▶	শিংক-সভালি হয়ে তেনে হ	6 900 . 102 days	in
	ł	Less: allowance for doubtful accounts ▶	0	0	0
	5	Grants receivable	0	0	0
	6	Receivables due from officers, directors, trustees, and other			^
		disqualified persons (attach schedule) (see instructions)	d	0	0
	7	Other notes and loans receivable (attach schedule) ▶	NOT 13 ,	, E	
		Less: allowance for doubtful accounts ▶	0	0	0
ţ	8	Inventories for sale or use	0	0	0
Assets	9	Prepaid expenses and deferred charges	0	0	(7)
As	10a	Investments—U.S. and state government obligations (attach schedule)	0	0	0
	ь	Investments—corporate stock (attach schedule)	0	0	7)
	C	Investments—corporate bonds (attach schedule)	0	72	0
	11	Investments—land, buildings, and equipment: basis ▶	necusta vansii e	m 6 1 2 3 3 3	
		Less: accumulated depreciation (attach schedule) ▶	0		0
	12	Investments—mortgage loans	0	0	0
	13	Investments—other (attach schedule)	0	8	0
	14	Land, buildings, and equipment: basis ▶	,	·	4
		Less: accumulated depreciation (attach schedule) ▶	0	0	0
	15	Other assets (describe ▶)	0	0	0
	16	Total assets (to be completed by all filers—see the		1,40	140
		instructions. Also, see page 1, item I)	0	130	111/0
	17	Accounts payable and accrued expenses	0	1.0	
Ś	18	Grants payable	_0		,
Liabilities	19	Deferred revenue		0	ļ
Ē	20	Loans from officers, directors, trustees, and other disqualified persons	0	<u> </u>	·
멸	21	Mortgages and other notes payable (attach schedule)	. 0	<u></u>	,
_	22	Other liabilities (describe)	0		+ 4
	23	Total liabilities (add lines 17 through 22)	0	<u> </u>	*
Š		Foundations that follow FASB ASC 958, check here			
Ĕ	0.4	and complete lines 24, 25, 29, and 30.		0	.i
<u> </u>	24 25	Net assets without donor restrictions	0		<u> </u>
	_	Net assets with donor restrictions	<u> </u>		<u> </u>
Š		Foundations that do not follow FASB ASC 958, check here ▶ □			l
Œ		and complete lines 26 through 30.		n	[-
<u>o</u>		Capital stock, trust principal, or current funds	0	- 7	
es		Paid-in or capital surplus, or land, bldg., and equipment fund	0		
SS		Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions)		6	
۲		Total liabilities and net assets/fund balances (see	0		1 1
Net Assets or Fund Balances		instructions)	0	0	
	t III	Analysis of Changes in Net Assets or Fund Balances	<u> </u>		<u> </u>
		net assets or fund balances at beginning of year-Part II, colur	nn (a), line 29 (mus	st agree with	
		of-year figure reported on prior year's return)			0
2	Enter	amount from Part I, line 27a		2	0
3	Other	ncreases not included in line 2 (itemize)		3	0
4	Add li	ines 1, 2, and 3		4	0
5	Decre	eases not included in line 2 (itemize) ▶		5	0
6	Total	net assets or fund balances at end of year (line 4 minus line 5)-F	Part II, column (b), li	ne 29 6	0
					QQA_DF (2010)

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Part	V Capital Gains and	d Losses for Tax on Investr	nent Income			
		and(s) of property sold (for example, real eause, or common stock, 200 shs MLC Co.		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo , day, yr.)
1a				0		
.b				0		
С				0		
d	<u> </u>			0		
е			r — 	0		<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		n or (loss) (f) minus (g))
a	0					
<u>b</u>						
<u>c</u>			ļ			
<u>d</u>						
е_	Complete only for assets sho	owing gain in column (h) and owned	by the foundation	on 12/31/69		
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	ss of col. (i)	col. (k), but no	l. (h) gain minus t less than -0-) or from col. (h))
а				,	·	
<u> </u>						
d						
е						
2	Capital gain net income o		also enter in Pa		2	0
3	If gain, also enter in Part	in or (loss) as defined in sections I, line 8, column (c). See instru	s 1222(5) and (6)). , enter -0- ın }		
Part		ler Section 4940(e) for Red			l a l	0
f sect Was t	tion 4940(d)(2) applies, leav	ivate foundations subject to the re this part blank. section 4942 tax on the distribution and the distribution and the distribution and the distribution are the distribution ar	utable amount of	f any year in the t		☐ Yes ☑ No
1		ount in each column for each ye			akıng any entries.	· · · · · · · · · · · · · · · · · · ·
Cale	(a) Base penod years endar year (or tax year beginning in	(b)		(c) f nonchantable-use a	Dis	(d) tribution ratio divided by col. (c))
	2018		0			
	2017		0			
	2016		0	<u> </u>		
	2015		0			
	2014		0			
_						_
2	Total of line 1, column (d)				. 2	0
3		for the 5-year base period—diroundation has been in existence				0
4	Enter the net value of non	ncharitable-use assets for 2019 t	from Part X, line	5	. 4	0
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investme	nt income (1% of Part I, line 27t	o)		. 6	0
7	Add lines 5 and 6				. 7	0
8		ons from Part XII, line 4 ater than line 7, check the box			. 8	% tax rate. See the
	Part VI instructions	ato. than and 1, bhook the box i		, and complete	part doing a	, , , , , , , , , , , , , , , , , , , ,

Part		instruc	tions)
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)	<u>-</u>	<u> </u>
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		0
	here ▶ □ and enter 1% of Part I, line 27b		-
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-)		0
3	Add lines 1 and 2		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		0
6	Credits/Payments:		Ť
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 0	7	l
b	Exempt foreign organizations—tax withheld at source 6b 0		
c	Tax paid with application for extension of time to file (Form 8868) 6c 0	,	
ď	Backup withholding erroneously withheld		ŀ
7	Total credits and payments. Add lines 6a through 6d	•	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		<u>_</u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		<u>0</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10		
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax > Refunded > 11		
	VII-A Statements Regarding Activities		<u> </u>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	7- Y	es No
	participate or intervene in any political campaign?	1a	1
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the		
_	instructions for the definition	1b	1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		
	published or distributed by the foundation in connection with the activities.	_	
C	Did the foundation file Form 1120-POL for this year?	1c	1
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. ▶ \$	1.	1 1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		
	on foundation managers. ▶ \$,	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	/
	If "Yes," attach a detailed description of the activities.		. 🖥
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	3	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	1
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	1
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	-
	If "Yes," attach the statement required by General Instruction T.		4
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		A
	By language in the governing instrument, or		4
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that		
	conflict with the state law remain in the governing instrument?	6	1
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	✓
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶	.	
	TN	.	٠ ,
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"		
	complete Part XIV	9	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	1

Par	VII-A Statements Regarding Activities (continued)			
		·	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		1
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	d 12		√ .
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	1? 13	1	-
	Website address ▶			
14	The books are in care of ▶ Candis Saulsberry Telephone no. ▶	901-424		
15	Located at ► P.O. Box 25261 Memphis, TN ZIP+4 ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here	3812	25	N
10	and enter the amount of tax-exempt interest received or accrued during the year		·	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authoriover a bank, securities, or other financial account in a foreign country?	ty 16	Yes	No ✓
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name	of 📗		• ,
Dard	the foreign country ► VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
rar	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1	Yes	No
1a	During the year, did the foundation (either directly or indirectly):		163	140
·a	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	0		,
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a] .	.
	disqualified person?	4 .	İ	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	~ }	_	l
	the benefit or use of a disqualified person)?	0		
	(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 fail to qualify under the exceptions described	n		
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b		
С	Organizations relying on a current notice regarding disaster assistance, check here	- 1		
	were not corrected before the first day of the tax year beginning in 2019?	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)).	e		
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines		ľ	
	6d and 6e) for tax year(s) beginning before 2019?	° '		,
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(a)	2)		
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b	ļ	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 , 20 , 20 , 20	1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1	ł	
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation of		}	
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the commissioner under section 4943(c)(7) to dispose of holdings acquired by gift or bequest; or (4) the commissioner under section 4943(c)(7) the co			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			_ :
	foundation had excess business holdings in 2019.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes		ļ	1
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize it charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019	_	<u> </u>	
	chartable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015	7 4b	1	✓

Page	ŧ
. 490	•

Dar	90-PF (2019) t VII-B Statements Regarding Activitie	c for W	Vhich Form	4720	May Po P	OG: ii-	od (conti	nued			Pag
	During the year, did the foundation pay or incur			4/20	way be n	equir	ea (contil	nuea)		Yes	T
Ja	(1) Carry on propaganda, or otherwise attempt(2) Influence the outcome of any specific public	to influe ic electi	ence legislation on (see sect	ion 495	55); or to ca	arry on		☑ No		163	
	directly or indirectly, any voter registration d (3) Provide a grant to an individual for travel, sti (4) Provide a grant to an organization other tha	udy, or		purpos	es?		☐ Yes	☑ No ☑ No	- I		
	section 4945(d)(4)(A)? See instructions (5) Provide for any purpose other than religious	s, chant	able, scientif	ic, liter	ary, or edu	cationa	ıl .	☑ No			
b	purposes, or for the prevention of cruelty to If any answer is "Yes" to 5a(1)–(5), did any of the in Regulations section 53.4945 or in a current new trees.	he trans	sactions fail t	o qual	fy under th	e exce	ptions des	√ No scribed			-
С	Organizations relying on a current notice regard If the answer is "Yes" to question 5a(4), does because it maintained expenditure responsibility	the fou	ndation claim	ı exem	ption from	the tax	•	►□			
6a	If "Yes," attach the statement required by Regul Did the foundation, during the year, receive any	lations s funds,	section 53.49 directly or in	45-5(d) directly).		3	_			,
b	on a personal benefit contract? Did the foundation, during the year, pay premiur If "Yes" to 6b, file Form 8870.				a personal	benefi	☐ Yes t contract	 	6b		-
7a	At any time during the tax year, was the foundation										_
b	If "Yes," did the foundation receive any proceed							n? .	7b		Ļ
8	Is the foundation subject to the section 4960 to remuneration or excess parachute payment(s) d							[7] N.		<u> </u>	İ
1	and Contractors List all officers, directors, trustees, and found	dation r	nanagers ar	d their	r compens	ation.	Contribution	uctions	· ·		_
1 Candi:	List all officers, directors, trustees, and found (a) Name and address S Saulcherry	dation r	nanagers ar	(c) Co	compens	ation.	See instru	s to	(e) Expe		
	List all officers, directors, trustees, and found (a) Name and address	dation r	nanagers ar e, and average rs per week	(c) Co	r compens	ation. (d) empl and de	See instru Contributions oyee benefit	s to	(e) Expe	ense ac	
268 V	List all officers, directors, trustees, and found (a) Name and address s Saulsberry	dation r (b) Title hou devot	nanagers ar e, and average rs per week	(c) Co	r compens mpensation not paid, nter -0-)	ation. (d) empl and de	See instru Contributions oyee benefit	s to	(e) Expe	ense ac	
268 V	List all officers, directors, trustees, and found (a) Name and address s Saulsberry Whispering View Dr.	dation r (b) Title hou devot	nanagers ar e, and average rs per week	(c) Co	r compens mpensation not paid, nter -0-)	ation. (d) empl and de	See instru Contributions oyee benefit	s to	(e) Expe	ense ac	
268 V	List all officers, directors, trustees, and found (a) Name and address s Saulsberry Whispering View Dr.	dation r (b) Titl hou devot	managers ar e, and average rs per week ed to position	(c) Co (ff i er	r compens impensation not paid, nter -0-)	ation. (d) empl and def	See instru Contribution: oyee benefit erred compe	uctions s to plans ensation	(e) Expe other	ense ac	
3268 V Memp	List all officers, directors, trustees, and found (a) Name and address s Saulsberry Whispering View Dr. his, TN 38125 Compensation of five highest-paid employe	dation r (b) Title hou devot 35	managers ar e, and average rs per week ed to position	(c) Co (if i er	r compens impensation not paid, nter -0-)	ation. (d) empl and def	See instru Contribution: oyee benefit erred compe	uctions s to plans	(e) Experience other s	ense acallowa	el
3268 V Memp	List all officers, directors, trustees, and found (a) Name and address s Saulsberry Nhispering View Dr. his, TN 38125 Compensation of five highest-paid employe "NONE."	dation r (b) Title hou devot 35	managers ar e, and average rs per week ed to position er than those (b) Title, and a hours per week	(c) Co (if i er	r compens mpensation not paid, nter -0-) 7978	ation. (d) empl and def	See instru Contribution oyee benefit erred compe see instru (d) Contribu employee plans and c	uctions s to plans	(e) Experience other s	one,	el
268 V Memp	List all officers, directors, trustees, and found (a) Name and address s Saulsberry Nhispering View Dr. his, TN 38125 Compensation of five highest-paid employe "NONE."	dation r (b) Title hou devot 35	managers ar e, and average rs per week ed to position er than those (b) Title, and a hours per week	(c) Co (if i er	r compens mpensation not paid, nter -0-) 7978	ation. (d) empl and def	See instru Contribution oyee benefit erred compe see instru (d) Contribu employee plans and c	uctions s to plans	(e) Experience other s	one,	e
2 2	List all officers, directors, trustees, and found (a) Name and address s Saulsberry Nhispering View Dr. his, TN 38125 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	dation r (b) Title hou devot 35	managers ar e, and average rs per week ed to position er than those (b) Title, and a hours per week	(c) Co (if i er	r compens mpensation not paid, nter -0-) 7978	ation. (d) empl and def	See instru Contribution oyee benefit erred compe see instru (d) Contribu employee plans and c	uctions s to plans	(e) Experience other s	one,	el
268 V Memp	List all officers, directors, trustees, and found (a) Name and address s Saulsberry Nhispering View Dr. his, TN 38125 Compensation of five highest-paid employe "NONE." (a) Name and address of each employee paid more than \$50,0	dation r (b) Title hou devot 35	managers ar e, and average rs per week ed to position er than those (b) Title, and a hours per week	(c) Co (if i er	r compens mpensation not paid, nter -0-) 7978	ation. (d) empl and def	See instru Contribution oyee benefit erred compe see instru (d) Contribu employee plans and c	uctions s to plans	(e) Experience other s	one,	el

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Fiv	e highest-paid independent contractors for professional services. See instructions. If none, enter "NON	IE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None		
Total num	ber of others receiving over \$50,000 for professional services	
Part IX-	A Summary of Direct Charitable Activities	
List the fo	oundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ions and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1		
2		
3		
		1
		<u> </u>
4		
		<u></u>
Part IX-		
Describe	the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1		
2		
<u> </u>		-
	program-related investments. See instructions.	
3		
Total. Add	d lines 1 through 3	
		Form 990-PF (201

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore	eign foundat	ions,
	see instructions.)		
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	
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	
8	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	O	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	} }	
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	
6	Minimum investment return. Enter 5% of line 5	6	
Part	and certain foreign organizations, check here ▶ □ and do not complete this part.)	foundations	
1	Minimum investment return from Part X, line 6	1	
2a		0	_
b	Income tax for 2019. (This does not include the tax from Part VI.)	0	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	
Part	XII Qualifying Distributions (see instructions)	1===	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1 1	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4		0
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	ng whether th	e foundation

Form **990-PF** (2019)

Part	Vill Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years pnor to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only			0	
ь	Total for prior years: 20 17 , 20 18 , 20 19		0		
3	Excess distributions carryover, if any, to 2019:				
а	From 20140				
þ	From 2015				
C	From 20160				
d	From 2017				
e	From 2018				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2019 from Part XII, line 4: \$				
a	Applied to 2018, but not more than line 2a .			0	
b	Applied to undistributed income of prior years (Election required—see instructions)		0		
С	Treated as distributions out of corpus (Election required—see instructions)	0			
d	Applied to 2019 distributable amount				0
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6	Enter the net total of each column as indicated below:				<u> </u>
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
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				
ď	Subtract line 6c from line 6b. Taxable				
u	amount-see instructions		0		· · · · · · · · · · · · · · · · · · ·
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see				
	instructions			0	
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				O
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)	0			
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) .	0			
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:			·	
а	Excess from 2015 0				
b	Excess from 2016 0			Ì	
C	Excess from 2017 0		1		Š
d	Excess from 2018				
e	Excess from 2019	•		1	1

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A guestion 9	3)	
	If the foundation has received a ruling				7 1	
14	foundation, and the ruling is effective for				1	
ь	Check box to indicate whether the four				ection)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Pnor 3 years	10 124,	
20	income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	investment return from Part X for	(4) 2010			1	0
h	each year listed		-			<u> </u>
b	Qualifying distributions from Part XII,				-/	
Ŭ	line 4, for each year listed	•				
d	Amounts included in line 2c not used directly					
ŭ	for active conduct of exempt activities		\			
_	Qualifying distributions made directly					
·	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the				-	
-	alternative test relied upon:					
а	"Assets" alternative test-enter:	1			}	
-	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)	,				
b	"Endowment" alternative test-enter 2/3					
	of minimum investment return shown in					
	Part X, line 6, for each year listed					
С	"Support" alternative test-enter:					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on					
	securities loans (section				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	512(a)(5)), or royalties)					<u> </u>
	(2) Support from general public and 5 or more exempt	•				
	organizations as ørovided in				}	
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					\ .
	an exempt organization					<u> </u>
Part	(4) Gross investment income XV Supplementary Information	n /Complete th	is part only if th	o foundation b	ad \$5,000 or m	ore in accets at
Part	any time during the year-		-	ie ioundation ii	iau \$5,000 01 11:	iore in assets at
1	Information Regarding Foundation					
	List any managers of the foundation v	-	ted more than 2%	6 of the total cont	ributions received	bv the foundation
_	before the close of any tax year (but o					,
	,					
b	List any managers of the foundation	who own 10% or	r more of the stoo	k of a corporation	n (or an equally la	arge portion of the
	ownership of a partnership or other er	ntity) of which the	foundation has a 1	10% or greater int	erest.	
2	Information Regarding Contribution	n, Grant, Gift, Loa	ın, Scholarship, e	tc., Programs:		
	Check here ▶ ☐ If the foundation					
	unsolicited requests for funds. If the fe		gifts, grants, etc.,	to individuals or o	rganizations unde	er other conditions,
	complete items 2a, b, c, and d. See in					
а	The name, address, and telephone nu	ımber or email adı	dress of the persor	n to whom applica	ations should be a	iddressed:
b	The form in which applications should	i be submitted and	d information and	materials they sho	ould include:	
	Any submission deadlines:				· · · · · · · · · · · · · · · · · · ·	
C	Any submission deadlines:					
d	Any restrictions or limitations on aw	vards, such as b	y geographical ar	eas, charitable fi	elds, kinds of ins	stitutions, or other
_	factors:	,	J J			•

3	Grants and Contributions Paid During	the Year or Approve	ed for Fut	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or	Amount
	Name and address (home or business)	or substantial contributor	recipient	Contribution	
a	Name and address (home or business) Paid during the year	any foundation manager or substantial contributor	recipient	contribution	Amount
	Total	<u> </u>		▶ 3a	0
6	Approved for future payment	,			
	Total		! <u></u>	▶ 3b	0

تتعم	rt XV	I-A Analysis of Income-Producing Ac	tivities				
Ente	r gros	ss amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by secti	on 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.)
1	_	ram service revenue:					(Coc mandonomo.)
	_	Anger Management Class	900099	0			
	p _						
	°. –						
	d _						
	e _						
	† ₌						
_	-	ees and contracts from government agencies	900099	9800			
2		bership dues and assessments	0				
3		est on savings and temporary cash investments	0				
4		dends and interest from securities	0				
5		rental income or (loss) from real estate:		<u> </u>	<u></u>		
		Debt-financed property	0			· - · · · · · · · · · · · · · · · · · ·	
^		Not debt-financed property	0			· =	<u> </u>
_		rental income or (loss) from personal property	0				
7		er investment income	0				
8		or (loss) from sales of assets other than inventory	0				
9		ncome or (loss) from special events	0				
10		s profit or (loss) from sales of inventory	0	-	· · · · · · · · · · · · · · · · · · ·		
11			000000	750			
	C A	Valmart Grant	900099	750			
	d –						
	e –						
40	_	otal. Add columns (b), (d), and (e)		10550			
				10550		13	10550
13	Total	II. Add line 12, columns (b), (d), and (e)				13	10550
13 (See	Total	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation 	s.)			13	10550
13 (See Pa Lin	Total works	 Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation 	s.) ccomplishm	ent of Exemp	t Purposes		
13 (See Pa Lin	Total works rt XV e No.	il. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishments repoposes (other than	ent of Exempli rted in column by providing fund	t Purposes		
13 (See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e)	s.) ccomplishments repoposes (other than	ent of Exempli rted in column by providing fund	t Purposes		
13 (See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e)	s.) ccomplishments repoposes (other than	ent of Exempli rted in column by providing fund	t Purposes		
13 (See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e)	s.) ccomplishments repoposes (other than	ent of Exempli rted in column by providing fund	t Purposes		
13 (See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e)	s.) ccomplishments repoposes (other than	ent of Exempli rted in column by providing fund	t Purposes		
13 (See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e)	s.) ccomplishments repoposes (other than	ent of Exempli rted in column by providing fund	t Purposes		
13 (See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e)	s.) ccomplishments repoposes (other than	ent of Exempli rted in column by providing fund	t Purposes		
13 (See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e)	s.) ccomplishments repoposes (other than	ent of Exempli rted in column by providing fund	t Purposes		
13 (See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e)	s.) ccomplishments repoposes (other than	ent of Exempli rted in column by providing fund	t Purposes		
13 (See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e)	s.) ccomplishments repoposes (other than	ent of Exempli rted in column by providing fund	t Purposes		
13 (See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e)	s.) ccomplishments report income is report than	ent of Exempli rted in column by providing fund	t Purposes		
13 (See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e)	s.) ccomplishments report income is report than	ent of Exempli rted in column by providing fund	t Purposes		
13 (See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e)	s.) ccomplishments report income is report than	ent of Exempli rted in column by providing fund	t Purposes		
13 (See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e)	s.) ccomplishments report income is report than	ent of Exempli rted in column by providing fund	t Purposes		
13 (See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e)	s.) ccomplishments report income is report than	ent of Exempli rted in column by providing fund	t Purposes		
13 (See Pa Lin	Total works rt XV e No.	I. Add line 12, columns (b), (d), and (e)	s.) ccomplishments report income is report than	ent of Exempli rted in column by providing fund	t Purposes		

Part XV	Information Organization		nsfers to and Transaction	ns and Relationsh	nips With Non	charitable	Exem
ın org	I the organization d section 501(c) (or panizations?	lirectly or indirectly ther than section	engage in any of the following 501(c)(3) organizations) of a noncharitable exempt or	in section 527, r		Deu I	Yes No
(1)	Cash					. 1a(1)	✓
						. 1a(2)	
	ner transactions:						
			empt organization				
			table exempt organization . er assets			1b(2)	
						1b(4)	- `
	Loans or loan guar					. 1b(5)	- `
	_		hip or fundraising solicitation				7
			ists, other assets, or paid em) - +	1
d If the	he answer to any o	of the above is "Ye	es," complete the following s	chedule. Column (b)	should always	show the f	aır mark
			ices given by the reporting f				
	<u> </u>		gement, show in column (d) t				
a) Line no	(b) Amount involved	(c) Name of nonc	charitable exempt organization	(d) Description of trans	fers, transactions, a	nd sharing arra	ngements
							
	 	·		 		····	
							
	 				_ 		
	 				 		
				<u> </u>			
		. <u></u>					
					<u>.</u>		
					 -		
des	scribed in section 5 Yes," complete the	01(c) (other than se following schedule	affiliated with, or related to, ection 501(c)(3)) or in section 5.			· 🗌 Ye	s 🗸 No
	(a) Name of organi	zation	(b) Type of organization		(c) Description of	relationship	<u> </u>
Sign Co	nder penalties of penury, I orrect, and/complete Decla	declare that have examin tration of preparer (other th	led this return, including accompanying nan taxpayer) is based on all information	schedules and statements, ar of which preparer has any kn	owledge	nowledge and b	
lere	gnature of officer or trus	1 / MUSU	Date 3/1/20 Exc	cutive Director		the preparer sh instructions	
l <u>∽</u> Paid	Print/Type preparer's		Preparer's signature	Date	Check C	of PTIN	
alu repare	-				self-emplo		
se Onl				•	Firm's EIN ▶		
	Firm's address ▶				Phone no		
<u> </u>	Cando	is Dau	leberry 81	26/20		Form 990	J- PF (201

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Employer identification number

Freeman Outreach Center 62-1789148				62-1789148	
Organization type (check one):					
Filers o	f:	Section:			
Form 99	90 or 990-EZ	☐ 501(c)() (enter number) organization		
		☐ 4947(a)(1) no	nexempt chantable trust not treated as a private for	undation	
		☐ 527 political of	organization		
Form 99	90-PF	√ 501(c)(3) exer	mpt private foundation		
,		☐ 4947(a)(1) not	nexempt charitable trust treated as a private founda	ition	
		☐ 501(c)(3) taxa	ble private foundation		
	•	-	neral Rule or a Special Rule.		
Note: Co	•), (8), or (10) organ	ization can check boxes for both the General Rule a	and a Special Rule. See	
Genera	l Rule				
V		r property) from ar	0-EZ, or 990-PF that received, during the year, combined one contributor. Complete Parts I and II. See institution.		
Special	Rules	•			
	regulations under se 13, 16a, or 16b, and	ections 509(a)(1) an that received from	on 501(c)(3) filing Form 990 or 990-EZ that met the 3 of 170(b)(1)(A)(vi), that checked Schedule A (Form 99 any one contributor, during the year, total contributorm 990, Part VIII, line 1h; or (ii) Form 990-EZ, line	90 or 990-EZ), Part II, line itions of the greater of (1)	
	contributor, during t	he year, total conti	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that ributions of more than \$1,000 exclusively for religiou or the prevention of cruelty to children or animals. Co	ıs, charıtable, scientific,	
	contributor, during t contributions totaled during the year for a General Rule applie	he year, contribution of more than \$1,000 on exclusively religion on this organizat ore during the yea	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that ons <i>exclusively</i> for religious, charitable, etc., purpos b. If this box is checked, enter here the total contributions, charitable, etc., purpose. Don't complete any c	es, but no such utions that were received of the parts unless the antable, etc., contributions	
			the General Rule and/or the Special Rules doesn't for Part IV, line 2, of its Form 990; or check the box or		

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization Employer identification number
Freeman Outreach Center 62-1789148

Part I	Contributors (see instructions). Use duplicate copies	of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
:	Shelby County Government Community Enhancement Grant 160 N. Main Memphis, TN 38103	\$5000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Juvenile Court 616 Adams Avenue Memphis, TN 38103	\$ 4800	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Walmart 7525 Winchester Road Memphis, TN 38125	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Kroger Memphis, TN 38125		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Chiquita Brown 403 Sımpson Ave. Memphis, TN 38106	\$120.00	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization Employer identification number
Freeman Outreach Center 62-1789148

Part II	Noncash Property (see instructions). Use duplicate cop	pies of Part II if additional space	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A		
}		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
i) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
n) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$,
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			······································
		s	

Employer identification number Name of organization 62-1789148 Freeman Outreach Center Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed. (a) No. (c) Use of gift (d) Description of how gift is held (b) Purpose of gift from Part I N/A (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (c) Use of gift (d) Description of how gift is held (b) Purpose of gift from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee