

Form **990-PF**  
 Department of the Treasury  
 Internal Revenue Service

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

▶ **Do not enter social security numbers on this form as it may be made public.**  
 ▶ **Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.**

OMB No 1545-0052  
**2018**  
**Open to Public Inspection**

**For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018**

Name of foundation HAMICO INC		<b>A Employer identification number</b> 62-6040782	
Number and street (or P O box number if mail is not delivered to street address) 1110 MARKET ST STE 317B		<b>B Telephone number (see instructions)</b> (423) 531-0028	
City or town, state or province, country, and ZIP or foreign postal code CHATTANOOGA, TN 37402		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>52,365,174</u>		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>			

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)				
	<b>2</b> Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments	606,485	606,485		
	<b>4</b> Dividends and interest from securities	738,453	738,453		
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	3,333,489			
	<b>b</b> Gross sales price for all assets on line 6a	9,394,554			
	<b>7</b> Capital gain net income (from Part IV, line 2)		3,333,489		
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)	7,977	235,753			
<b>12 Total.</b> Add lines 1 through 11	4,686,404	4,914,180			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc	525,000	262,500		262,500
	<b>14</b> Other employee salaries and wages	49,999	24,999		25,000
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule)				
	<b>b</b> Accounting fees (attach schedule)	11,086	5,543		5,542
	<b>c</b> Other professional fees (attach schedule)	2,025	1,012		1,013
	<b>17</b> Interest	171,070	171,070		0
	<b>18</b> Taxes (attach schedule) (see instructions)	92,215	66,928		25,287
	<b>19</b> Depreciation (attach schedule) and depletion	3,913	3,452		
	<b>20</b> Occupancy	53,913	26,956		26,957
	<b>21</b> Travel, conferences, and meetings	4,576	2,288		2,288
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	921,222	864,226		56,996
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	1,835,019	1,428,974		405,583
	<b>25</b> Contributions, gifts, grants paid	2,468,132			2,468,132
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	4,303,151	1,428,974		2,873,715	
<b>27</b> Subtract line 26 from line 12					
<b>a Excess of revenue over expenses and disbursements</b>	383,253				
<b>b Net investment income</b> (if negative, enter -0-)		3,485,206			
<b>c Adjusted net income</b> (if negative, enter -0-)					

**Part II Balance Sheets** Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	6,224,880	608,149	608,149
	<b>2</b> Savings and temporary cash investments . . . . .	17,724,768	16,967,929	20,840,265
	<b>3</b> Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .		27,332	27,332
	<b>10a</b> Investments—U S and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	4,696,324	6,000,424	7,933,102
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .	26,423,278	22,926,939	22,926,939
	<b>14</b> Land, buildings, and equipment basis ▶ _____ 52,405 Less accumulated depreciation (attach schedule) ▶ 40,248	11,899	12,157	12,157
<b>15</b> Other assets (describe ▶ _____)	17,230	17,230	17,230	
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	55,098,379	46,560,160	52,365,174	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	2,269		
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)	0	444	
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	2,269	444	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .			
	<b>25</b> Temporarily restricted . . . . .			
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b> Capital stock, trust principal, or current funds . . . . .	0	0	
	<b>28</b> Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
<b>29</b> Retained earnings, accumulated income, endowment, or other funds	55,096,110	46,559,716		
<b>30 Total net assets or fund balances</b> (see instructions) . . . . .	55,096,110	46,559,716		
<b>31 Total liabilities and net assets/fund balances</b> (see instructions) .	55,098,379	46,560,160		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	55,096,110
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	383,253
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	0
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	55,479,363
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	8,919,647
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	46,559,716

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, 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)
<b>1a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	2	3,333,489
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	2,688,254	57,025,750	0.047141
2016	2,563,187	53,010,380	0.048353
2015	1,397,630	55,023,413	0.025401
2014	1,858,172	52,582,021	0.035339
2013	2,537,578	53,335,931	0.047577
<b>2</b> Total of line 1, column (d)			0.203811
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years			0.040762
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5			56,802,145
<b>5</b> Multiply line 4 by line 3			2,315,369
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			34,852
<b>7</b> Add lines 5 and 6			2,350,221
<b>8</b> Enter qualifying distributions from Part XII, line 4			2,873,715

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculations. Includes sub-tables for 6a-6d (Credits/Payments) and 11 (Refunded). Total amount owed is 298.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, expenditures, and state reporting. Includes Yes/No columns.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, distributions, public inspection, and books in care.

Located at 1110 MARKET ST SUITE 317B CHATTANOOGA TN ZIP+4 37402

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.

Table with 3 columns: Question, Yes, No. Row 16 regarding foreign accounts.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

<b>5a</b> During the year did the foundation pay or incur any amount to			<b>Yes</b>	<b>No</b>
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		<b>5b</b>	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>6b</b>	<b>No</b>
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870			
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>7b</b>	
<b>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			
<b>8</b>	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

**1 List all officers, directors, trustees, foundation managers and their compensation. See instructions**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

**Total** number of other employees paid over \$50,000. ▶ 0

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

<b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".</b>		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . . ▶		0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ▶	0

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	27,757,592
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	1,863,543
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	28,046,017
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	57,667,152
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	57,667,152
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	865,007
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	56,802,145
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	2,840,107

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	2,840,107
<b>2a</b>	Tax on investment income for 2018 from Part VI, line 5.	<b>2a</b>	34,852
<b>b</b>	Income tax for 2018 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	34,852
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	2,805,255
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	2,805,255
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	2,805,255

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	2,873,715
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	2,873,715
<b>5</b>	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.	<b>5</b>	34,852
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	2,838,863

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
<b>1</b> Distributable amount for 2018 from Part XI, line 7				2,805,255
<b>2</b> Undistributed income, if any, as of the end of 2018				
<b>a</b> Enter amount for 2017 only. . . . .			0	
<b>b</b> Total for prior years 20___, 20___, 20___		0		
<b>3</b> Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013. . . . .				
<b>b</b> From 2014. . . . .				
<b>c</b> From 2015. . . . .				
<b>d</b> From 2016. . . . .				
<b>e</b> From 2017. . . . .				
<b>f</b> Total of lines 3a through e. . . . .	0			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ <u>2,873,715</u>				
<b>a</b> Applied to 2017, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2018 distributable amount. . . . .				2,805,255
<b>e</b> Remaining amount distributed out of corpus	68,460			
<b>5</b> Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6 Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	68,460			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 . . . . .				0
<b>7</b> 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			
<b>8</b> Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9 Excess distributions carryover to 2019.</b> Subtract lines 7 and 8 from line 6a . . . . .	68,460			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . .				
<b>b</b> Excess from 2015. . . . .				
<b>c</b> Excess from 2016. . . . .				
<b>d</b> Excess from 2017. . . . .				
<b>e</b> Excess from 2018. . . . .	68,460			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

**2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed

---

**b** The form in which applications should be submitted and information and materials they should include

---

**c** Any submission deadlines

---

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

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b>				<b>▶ 3a</b>
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>				<b>▶ 3b</b>



Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part XVII

- 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
a Transfers from the reporting foundation to a noncharitable exempt organization of
(1) Cash.
(2) Other assets.
b Other transactions
(1) Sales of assets to a noncharitable exempt organization.
(2) Purchases of assets from a noncharitable exempt organization.
(3) Rental of facilities, equipment, or other assets.
(4) Reimbursement arrangements.
(5) Loans or loan guarantees.
(6) Performance of services or membership or fundraising solicitations.
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation.

Table with 3 columns: Question/Item, Yes, No. Rows include 1a(1), 1a(2), 1b(1) through 1b(6), and 1c.

Table with 4 columns: (a) Line No, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? [ ] Yes [x] No

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here

Signature line with asterisks, date 2019-11-13, and title line with asterisks.

May the IRS discuss this return with the preparer shown below (see instr )? [x] Yes [ ] No

Paid Preparer Use Only

Form section for paid preparer with fields for name (NICOLE JEPPESEN), signature, date (2019-11-13), check if self-employed, PTIN (P01292745), firm's name (LBMC PC), firm's address (605 CHESTNUT STREET SUITE 1100 CHATTANOOGA, TN 37450), and firm's EIN (62-1199757).

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e.g., real estate, <b>(a)</b> 2-story brick warehouse, or common stock, 200 shs MLC Co.)	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo., day, yr.)	<b>(d)</b> Date sold (mo., day, yr.)
1 BELO PASSTHROUGH - SHORT TERM	P		
1 BELO PASSTHROUGH - LONG TERM	P		
CHESTNUT REAL ESTATE FD II PASSTHROUGH - SHORT TERM	P		
CHESTNUT REAL ESTATE FD II PASSTHROUGH - LONG TERM	P		
MHC MUTUAL CONVERSION FD PASSTHROUGH - SHORT TERM	P		
MHC MUTUAL CONVERSION FD PASSTHROUGH - LONG TERM	P		
NORTH HAVEN EXP FD PASSTHROUGH - SHORT TERM	P		
NORTH HAVEN EXP FD PASSTHROUGH - LONG TERM	P		
NORTH HAVEN EXP CREDIT OP FD PASSTHROUGH - LONG TERM	P		
RESOLUTE CAP PTRS FD III PASSTHROUGH - LONG TERM	P		

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
4,838			4,838
7,014			7,014
		666	-666
		1,657	-1,657
		32,294	-32,294
1,482,690			1,482,690
1,564			1,564
13,169			13,169
1,151			1,151
207,598			207,598

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			<b>(l)</b> Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
<b>(i)</b> F M V as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	<b>(k)</b> Excess of col. (i) over col. (j), if any	
			4,838
			7,014
			-666
			-1,657
			-32,294
			1,482,690
			1,564
			13,169
			1,151
			207,598

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, 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)
RESOLUTE CAP PTRS FD IV PASSTHROUGH - SHORT TERM	P		
1 POINTER PASSTHROUGH - LONG TERM	P		
FIDELITY 1396 - LONG TERM			
FIDELITY 1396 - SHORT TERM			
FIDELITY 5910 - CAP GAIN DISTR			
MORGAN STANLEY 8863 - SHORT TERM			
MORGAN STANLEY 8863 - LONG TERM			
MORGAN STANLEY 8863 - CAP GAIN DISTR			
ARTISAN PASSTHROUGH - LONG TERM			
ARTISAN PASSTHROUGH - SHORT TERM			

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
		3,237	-3,237
1,063,054			1,063,054
2,019,318		1,871,505	147,813
353,366		452,015	-98,649
380,819			380,819
1,455,933		1,471,779	-15,846
1,756,057		1,781,209	-25,152
41			41
23,130			23,130
188,640			188,640

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-3,237
			1,063,054
			147,813
			-98,649
			380,819
			-15,846
			-25,152
			41
			23,130
			188,640

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, <b>(a)</b> 2-story brick warehouse, or common stock, 200 shs MLC Co )	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
FIDELITY 1396 - CURRENCY REALIZED GAIN/LOSS			

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
436,172		446,703	-10,531

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			<b>(l)</b> Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
<b>(i)</b> F M V as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	<b>(k)</b> Excess of col (i) over col (j), if any	
			-10,531



**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

<b>(a)</b> Name and address	Title, and average hours per week <b>(b)</b> devoted to position	<b>(c)</b> Compensation (If not paid, enter -0-)	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	Expense account, <b>(e)</b> other allowances
ZAN GUERRY 1110 MARKET ST STE 317B CHATTANOOGA, TN 37402	PRES/DIR 40 00	150,000	17,334	0
ROBERT E BOSWORTH 1110 MARKET ST STE 317B CHATTANOOGA, TN 37402	VICE PRES/DIR 40 00	75,000	17,578	0
HERBERT BARKS 1110 MARKET ST STE 317B CHATTANOOGA, TN 37402	DIR 2 00	50,000	0	0
JOHN P GUERRY 1110 MARKET ST STE 317B CHATTANOOGA, TN 37402	DIR 2 00	60,000	0	0
ALEXIS G BOGO 1110 MARKET ST STE 317B CHATTANOOGA, TN 37402	EXECUTIVE DIRECTOR 40 00	190,000	17,334	0

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
A STEP AHEAD FOUNDATION 1350 CONCOURSE AVE SUITE 451 MEMPHIS, TN 38104	N/A	PC	DONATION	10,000
AMERICAN RED CROSS 4115 S ACCESS RD CHATTANOOGA, TN 37406	N/A	PC	DONATION	2,500
ARTS BUILD301 E 11TH ST 300 CHATTANOOGA, TN 37403	N/A	PC	DONATION	12,500
<b>Total . . . . .</b>				2,468,132

▶ **3a**

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
ASSOCIATION FOR VISUAL ARTS 30 FRAZIER AVENUE CHATTANOOGA, TN 37405	N/A	PC	DONATION	2,500
AUSTIN HATCHER FOUNDATION 232 E 11TH ST SUITE 100 CHATTANOOGA, TN 37402	N/A	PC	DONATION	7,500
BAYLOR SCHOOL 171 BAYLOR SCHOOL ROAD CHATTANOOGA, TN 37405	N/A	PC	DONATION	746,388
<b>Total . . . . .</b>				<b>2,468,132</b>

▶ **3a**

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
BOYS & GIRLS CLUB OF CHATTANOOGA 610 LINDSAY STREET CHATTANOOGA, TN 37403	N/A	PC	DONATION	30,000
BRIGHT SCHOOL 1950 HIXSON PIKE CHATTANOOGA, TN 37405	N/A	PC	DONATION	10,000
CATHOLIC CHARITIES 5720 UPTAIN ROAD 6100 BUILDING SUITE 4200 CHATTANOOGA, TN 37411	N/A	PC	DONATION	500
<b>Total . . . . .</b>				2,468,132

▶ **3a**

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
CAUSEWAY16 PATTEN PKWY CHATTANOOGA, TN 37402	N/A	PC	DONATION	1,000
CHAMBLISS CENTER FOR CHILDREN 315 GILLESPIE ROAD CHATTANOOGA, TN 37411	N/A	PC	DONATION	115,000
CHILDRENS ADVOCACY CENTER HAMILTON CO 5705 UPTAIN ROAD CHATTANOOGA, TN 37411	N/A	PC	DONATION	25,000
<b>Total . . . . .</b>				2,468,132

▶ **3a**

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CHATTANOOGA AREA FOOD BANK 2009 CURTAIN POLE ROAD CHATTANOOGA, TN 37406	N/A	PC	DONATION	25,000
CHATTANOOGA SPORTS MINISTRY 1271 MARKET STREET CHATTANOOGA, TN 37402	N/A	PC	DONATION	15,000
CHATTANOOGA TENNIS PATRONS 4817 ADAMS RD HIXSON, TN 37343	N/A	PC	DONATION	39,150
<b>Total . . . . .</b> ▶ <b>3a</b>				2,468,132

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CHATTANOOGA THEATRE CENTER 400 RIVER STREET CHATTANOOGA, TN 37405	N/A	PC	DONATION	10,000
COMMUNITY FOUNDATION 1270 MARKET STREET CHATTANOOGA, TN 37402	N/A	PC	DONATION	780,118
COMMUNITY KITCHEN 727 E 1TH STREET CHATTANOOGA, TN 37403	N/A	PC	DONATION	500
<b>Total . . . . .</b> ▶ <b>3a</b>				2,468,132

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
EPILEPSY FOUNDATION OF SOUTHEAST TN 1 SISKIN DR CHATTANOOGA, TN 37403	N/A	PC	DONATION	5,000
GIRLS INC OF CHATTANOOGA 4505 BRAINERD ROAD CHATTANOOGA, TN 37411	N/A	PC	DONATION	10,000
GREATER CHATTANOOGA SPORTS HALL OF FAME 952 WYNDSOR DRIVE CHATTANOOGA, TN 37343	N/A	PC	DONATION	650
<b>Total . . . . . ▶ 3a</b>				2,468,132



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HABITAT FOR HUMANITY OF CHATTANOOGA 1201 E MAIN ST CHATTANOOGA, TN 37408	N/A	PC	DONATION	80,000
HUMANE EDUCATIONAL SOCIETY 212 N HIGHLAND PARK AVENUE CHATTANOOGA, TN 37404	N/A	PC	DONATION	15,000
HUNTER MUSEUM 10 BLUFF VIEW STREET CHATTANOOGA, TN 37403	N/A	PC	DONATION	15,000
<b>Total . . . . .</b> ▶ <b>3a</b>				2,468,132

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JAMAICA EDUCATION FUND 1110 MARKET STREET STE 317B CHATTANOOGA, TN 37402	N/A	PC	DONATION	250
JR LEAGUE ACHIEVEMENT OF CHATTANOOGA 622 EAST 4TH STREET CHATTANOOGA, TN 37403	N/A	PC	DONATION	15,000
JUVENILE DIABETES RESEARCH FOUNDATION 355 TRANE DRIVE KNOXVILLE, TN 37919	N/A	PC	DONATION	2,800
<b>Total . . . . . ▶ 3a</b>				2,468,132

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LAUNCH302 WEST 6TH STREET CHATTANOOGA, TN 37402	N/A	PC	DONATION	10,000
LOOKOUT MOUNTAIN SCHOOL 321 N BRAGG AVENUE LOOKOUT MOUNTAIN, TN 37350	N/A	PC	DONATION	1,000
MAKE A WISH OF EAST TENNESSEE 6005 CENTURY OAKS DR 500 CHATTANOOGA, TN 37416	N/A	PC	DONATION	16,600
<b>Total . . . . .</b>				<b>2,468,132</b>

▶ **3a**

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MEMORIAL HEALTHCARE SYSTEM FOUNDATION 2525 DE SALES AVE CHATTANOOGA, TN 37404	N/A	PC	DONATION	43,000
METROPOLITAN MINISTRIES 1112 MCCALLIE AVENUE CHATTANOOGA, TN 37404	N/A	PC	DONATION	5,000
NATIONAL CENTER FOR YOUTH ISSUES POST OFFICE BOX 22185 CHATTANOOGA, TN 37422	N/A	PC	DONATION	2,500
<b>Total . . . . .</b> ▶ <b>3a</b>				2,468,132

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NORTH SHORE FELLOWSHIP 118 WOODLAND AVENUE CHATTANOOGA, TN 37405	N/A	PC	DONATION	2,500
NPMM EDUCATION FUND 1219 W MISSISSIPPI AVENUE CHATTANOOGA, TN 37405	N/A	PC	DONATION	15,000
ON POINT4509 HIXSON PIKE SUITE 1 CHATTANOOGA, TN 37343	N/A	PC	DONATION	77,500
<b>Total . . . . . ▶ 3a</b>				2,468,132

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
POLLY BOYD SCHOLARSHIP FUND PO BOX 23176 CHATTANOOGA, TN 37422	N/A	PC	DONATION	2,000
PUBLIC TV 1110 MARKET STREET STE 317B CHATTANOOGA, TN 37402	N/A	PC	DONATION	2,500
SCENIC CITY WOMEN'S NETWORK POST OFFICE BOX 3148 CHATTANOOGA, TN 37404	N/A	PC	DONATION	2,500
<b>Total . . . . .</b> ▶ <b>3a</b>				2,468,132

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SISKIN CHILDREN'S INSTITUTE 1101 CARTER STREET CHATTANOOGA, TN 37402	N/A	PC	DONATION	11,000
SISKIN HOSPITAL FOR PHYS REHAB 1 SISKIN PLAZA CHATTANOOGA, TN 37403	N/A	PC	DONATION	15,000
SOUTHERN BEND FESTIVAL 150 RIVER STREET CHATTANOOGA, TN 37450	N/A	PC	DONATION	500
<b>Total . . . . .</b> ▶ <b>3a</b>				2,468,132

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SOUTHERN LIT ALLIANCE 301 E 11TH STREET SUITE 301 CHATTANOOGA, TN 37403	N/A	PC	DONATION	1,000
SOUTHERN METHODIST 1110 MARKET STREET STE 317B CHATTANOOGA, TN 37402	N/A	PC	DONATION	1,000
SOUTHERN TENNIS PATRONS FOUNDATION 5685 SPAULDING DRIVE NORCROSS, GA 30092	N/A	PC	DONATION	17,500
<b>Total . . . . .</b> ▶ <b>3a</b>				2,468,132



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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a</b> <i>Paid during the year</i>				
ST PETER'S EPISCOPAL SCHOOL 848 ASHLAND TERRACE CHATTANOOGA, TN 37415	N/A	PC	DONATION	51,000
STADIUM CORPORATION 1826 CARTER STREET CHATTANOOGA, TN 37408	N/A	PC	DONATION	1,800
TECHTOWN FOUNDATION 1100 MARKET ST CHATTANOOGA, TN 37402	N/A	PC	DONATION	25,000
<b>Total . . . . .</b> ▶ <b>3a</b>				2,468,132

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UC FOUNDATION 605 OAK STREET CHATTANOOGA, TN 37403	N/A	PC	DONATION	2,560
UNITED WAY OF CHATTANOOGA 630 MARKET STREET CHATTANOOGA, TN 37405	N/A	PC	DONATION	127,600
UTC DEPARTMENT OF ATHLETICS 720 E 4TH ST CHATTANOOGA, TN 37403	N/A	PC	DONATION	4,216
<b>Total . . . . . ▶ 3a</b>				2,468,132

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WALTER BOEHM CENTER 975 E 3RD STREET CHATTANOOGA, TN 37403	N/A	PC	DONATION	1,000
WOMENS FUND OF GREATER CHATTANOOGA 1100 MARKET STREET CHATTANOOGA, TN 37402	N/A	PC	DONATION	2,500
YOUNG WOMENS LEADERSHIP ACADEMY 1802 BAILEY AVENUE CHATTANOOGA, TN 37404	N/A	PC	DONATION	50,000
<b>Total . . . . . ▶ 3a</b>				2,468,132

**TY 2018 Accounting Fees Schedule****Name:** HAMICO INC**EIN:** 62-6040782

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
BOOKKEEPING	2,906	1,453		1,452
ACCOUNTING	8,180	4,090		4,090

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

## TY 2018 Depreciation Schedule

**Name:** HAMICO INC

**EIN:** 62-6040782

### Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
CONFERENCE ROOM TABLE	2012-07-06	4,290	1,858	200DB	7 000000000000	191	613		
SWIVEL CHAIR	2012-07-06	5,424	2,349	200DB	7 000000000000	242	775		
ARM CHAIRS - CONFERENCE ROOM	2012-07-06	5,506	2,385	200DB	7 000000000000	245	787		
OFFICE RUG-PORTHOS SWING GRAY	2012-10-22	2,213	958	200DB	7 000000000000	99	316		
RUG-BRICK ROOM SHAG	2012-10-22	2,893	1,253	200DB	7 000000000000	129	413		
SWIVEL LUMBAR PILLOW	2012-07-06	186	80	200DB	7 000000000000	9	27		
REFRIGERATOR	2012-10-18	786	393	200DB	5 000000000000	0	0		
ISAAC DUNCAN III	2012-08-22	1,181	215	SL	15 000000000000	39	79		
OFFICE LAMP & CONSOLE	2012-07-30	3,092	1,339	200DB	7 000000000000	138	442		
COMPUTERS	2012-09-14	4,274	2,137	200DB	5 000000000000	0	0		
4 OFFICE CHAIRS	2014-07-28	3,205	1,101	200DB	7 000000000000	143	0		
OFFICE MIRROR/SHADE PENDANT	2014-04-07	3,535	1,215	200DB	7 000000000000	158	0		
DESK & EQUIPMENT	2016-01-13	2,903	830	SL	7 000000000000	415	0		
COMPUTER UPDATE	2016-07-19	1,986	563	SL	5 000000000000	397	0		
COMPUTER UPDATES	2016-08-01	2,042	578	SL	5 000000000000	408	0		
CONSOLE & CHAIR - ALEXIS	2016-11-08	4,718	786	SL	7 000000000000	674	0		
AUDIOVISUAL SYSTEM	2018-04-04	4,171		SL	5 000000000000	626	0		

**TY 2018 Investments Corporate Stock Schedule****Name:** HAMICO INC**EIN:** 62-6040782

## Investments Corporation Stock Schedule

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
VARIOUS EQUITY SECURITIES	6,000,424	7,933,102

## TY 2018 Investments - Other Schedule

**Name:** HAMICO INC

**EIN:** 62-6040782

### Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
CHESTNUT REAL ESTATE FUND II FKA CHESTNUT DEVELOPMENT	AT COST	244,741	244,741
POINTER OFFSHORE LTD	AT COST	11,459,621	11,459,621
MHC MUTUAL CONVERSION FUND	AT COST	6,747,118	6,747,118
RESOLUTE CAP PTRS FKA TENTH STREET	AT COST	1,787,054	1,787,054
HILLIARD STREET LLC	AT COST	53,075	53,075
CONTEMPORARY HEALTHCARE SR LIEN FUND	AT COST	440,535	440,535
MANKER PATTEN TENNIS CLUB	AT COST	128,117	128,117
NORTH HAVEN EXPANSION CR LP	AT COST	370,710	370,710
CCS NOTE	AT COST	175,000	175,000
RESOLUTE CAPITAL FUND IV	AT COST	371,633	371,633
CONTEMPORARY HEALTHCARE FUND III	AT COST	825,438	825,438
BELO INVESTMENTS	AT COST	323,897	323,897

**TY 2018 Land, Etc.  
Schedule**

**Name:** HAMICO INC

**EIN:** 62-6040782

<b>Category / Item</b>	<b>Cost / Other Basis</b>	<b>Accumulated Depreciation</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
CONFERENCE ROOM TABLE	4,290	4,194	96	
SWIVEL CHAIR	5,424	5,303	121	
ARM CHAIRS - CONFERENCE ROOM	5,506	5,383	123	
OFFICE RUG-PORTHOS SWING GRAY	2,213	2,164	49	
RUG-BRICK ROOM SHAG	2,893	2,829	64	
SWIVEL LUMBAR PILLOW	186	182	4	
REFRIGERATOR	786	786	0	
ISAAC DUNCAN III	1,181	845	336	
OFFICE LAMP & CONSOLE	3,092	3,023	69	
COMPUTERS	4,274	4,274	0	
4 OFFICE CHAIRS	3,205	2,847	358	
OFFICE MIRROR/SHADE PENDANT	3,535	3,141	394	
DESK & EQUIPMENT	2,903	1,245	1,658	
COMPUTER UPDATE	1,986	960	1,026	
COMPUTER UPDATES	2,042	986	1,056	
CONSOLE & CHAIR - ALEXIS	4,718	1,460	3,258	
AUDIOVISUAL SYSTEM	4,171	626	3,545	



**TY 2018 Other Assets Schedule****Name:** HAMICO INC**EIN:** 62-6040782**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
PAINTING	16,230	16,230	16,230
HOLT WEBB PAINTING	1,000	1,000	1,000

**TY 2018 Other Decreases Schedule****Name:** HAMICO INC**EIN:** 62-6040782

<b>Description</b>	<b>Amount</b>
CHANGE IN UNREALIZED APPRECIATION	8,902,665
PASSTHROUGH NON-DEDUCTIBLE EXPENSES	16,982

**TY 2018 Other Expenses Schedule****Name:** HAMICO INC**EIN:** 62-6040782**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DUES & SUBSCRIPTIONS	1,683	842		841
OFFICE	22,146	11,073		11,073
INTERNET	2,534	1,267		1,267
INSURANCE	3,657	1,829		1,828
BANK FEES	61	30		31
PORTFOLIO EXPENSES	654,298	654,298		0
TELEPHONE, TELECOMMUNICATIONS	2,269	1,135		1,134
MISCELLANEOUS	81,644	40,822		40,822
LOSS FROM FLOWTHROUGHS	152,930	152,930		0

**TY 2018 Other Income Schedule****Name:** HAMICO INC**EIN:** 62-6040782**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
ADD-BACK UBTI LOSS	0	235,753	0
FEDERAL TAX REFUND	7,977	0	7,977

**TY 2018 Other Liabilities Schedule****Name:** HAMICO INC**EIN:** 62-6040782

<b>Description</b>	<b>Beginning of Year - Book Value</b>	<b>End of Year - Book Value</b>
NEGATIVE BASIS IN NORTH HAVEN EXPANSION CREDIT OPPORTUNITY FUND	0	444

**TY 2018 Other Professional Fees Schedule****Name:** HAMICO INC**EIN:** 62-6040782

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
OUTSIDE CONTRACT SERVICES	2,025	1,012		1,013

**TY 2018 Taxes Schedule****Name:** HAMICO INC**EIN:** 62-6040782

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
FOREIGN TAXES	41,641	41,641		0
PAYROLL TAXES	50,574	25,287		25,287