**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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Go to www.irs.qov/Form990PF for instructions and the latest information.

F	or ca	alendar year 2018 or tax year beginning			, 20 <u>18</u>	<u>, and ending</u>			, 20		
N	ame o	of foundation				-	A	Employer identif	fication number		
(	C_S	PIRE WIRELESS FOUNDATION						20-34268	26		
-		r and street (or P O box number if mail is not delivered t	o street	address)		Room/suite	В	Telephone numb	per (see instructions)		
$\sim$											
	018	HIGHLAND COLONY PKWY				360		(601)974	-7645		
2 3 20 2 2 3 20	įty or i	town, state or province, country, and ZIP or foreign post	al code				丁				
	1	,					C	If exemption applic pending, check her			
	RIDGELAND, MS 39157-2068							pending, dibox fici	· · —		
₹G	Che	eck all that apply   Initial return		Initial return	of a former p	ublic charity	٦۵	1 Foreign organiza	ations, check here		
1	′	Final return		Amended ref	urn			2 Foreign organiza	ations meeting the		
ֻ⊊		Address change	Γ	Name change	e		ı	85% test, check computation	here and attach		
eived ir	Che	eck type of organization X Section 501	(c)(3)	exempt private f	oundation	D24	٦_	•			
leceived in the second	Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation						If private foundation status was terminated under section 507(b)(1)(A), check here .				
85	Fai	r market value of all assets at JAcco	untinç	g method 🗴 Ca	ash L Acc	rual	F	If the foundation is	s in a 60-month termination		
F. 8				specify)			.	under section 507(t	o)(1)(B), check here		
೪	16)	▶ \$ 221,709 (Part I,	colum	n (d) must be on ca	sh basıs )						
I	Part	Analysis of Revenue and Expenses (The	(a	) Revenue and	(h) Not inv	antmont	<b>(</b> a)	Adjusted net	(d) Disbursements for charitable		
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	`•	expenses per	(b) Net inve		(C)	income	purposes		
´ :		column (a) (see instructions) )	<u> </u>	books					(cash basis only)		
	1	Contributions, gifts, grants, etc , received (attach schedule) .		618,000							
	2	Check ► if the foundation is not required to attach Sch		***************************************							
	3	Interest on savings and temporary cash investments.	ļ								
	4	Dividends and interest from securities	<u> </u>								
	5a	Gross rents	<u> </u>								
		Net rental income or (loss)	ļ								
eune	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a									
ě	7	Capital gain net income (from Part IV, line 2) .									
ď	8	Net short-term capital gain									
	9 10 a	Income modifications	1								
	h	and allowances  Less Cost of goods sold .							***************************************		
		Gross profit or (loss) (attach schedule)									
	11	Other income (attach schedule)		***************************************							
	12	Total. Add lines 1 through 11		618,000							
_	13	Compensation of officers, directors, trustees, etc		15,000					15,000		
es	14	Other employee salaries and wages									
Sus	15	Pension plans, employee benefits		1,148					1,148		
ğ	16 a	Legal fees (attach schedule)			************						
Ú	b	Accounting fees (attach schedule)									
Ν̈́	c	Other professional fees (attach schedule)									
īā	17	Interest									
<u> </u>	18	Taxes (attach schedule) (see instructions)	<u></u>								
∹	19	Depreciation (attach schedule) and depletion.	<u></u>					*******			
Ď	20	Occupancy	ļ				_				
7	21	Travel, conferences, and meetings	<u> </u>	2,244					2,244		
a	22	Printing and publications STMT 1	<u> </u>	00.656				<del></del>	20 656		
bu	15 16a b c 17 18 19 20 21 22 23 24	Other expenses (attach schedule)	<u></u>	32,656					32,656		
ati	24	Total operating and administrative expenses.							51 040		
oer Jec		Add lines 13 through 23	<u> </u>	51,048					51,048		
Õ	25	Contributions, gifts, grants paid	<u> </u>	462,742				<del></del>	462,742		
_	26	Total expenses and disbursements Add lines 24 and 25	<u> </u>	513,790					513,790		
	27	Subtract line 26 from line 12		104 010	•			•			
	1	Excess of revenue over expenses and disbursements	<u></u>	104,210					<u> </u>		
	1	Net investment income (if negative, enter -0-)									
	C	Adjusted net income (if negative, enter -0-)	1			l			1		

		Attached schedules and amounts in the	Beginning of year	End o	of year
۲	art !	Balance Sheets description column 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	117,499	221,709	221,709
Ì		Savings and temporary cash investments	_		
		Accounts receivable ▶			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶	-		
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
ij	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
ä	10 a	Investments - U S and state government obligations (attach schedule), .			
	b	Investments - corporate stock (attach schedule)			
	C	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis			
ı		Less accumulated depreciation (attach schodulo)		***************************************	
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis			
		equipment basis Less accumulated depreciation (attach schedule)			
	15	Other assets (describe >)			
	16	Total assets (to be completed by all filers - see the		221,709	221 700
_		instructions Also, see page 1, item I)		· ·	221,709
		Accounts payable and accrued expenses		ł	
		Grants payable		ł	
abiliti∍s	19	Deferred revenue			
ΞĒ	20	Loans from officers, directors, trustees, and other disqualified persons			
Ę	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe >)			<u> </u>
	23	Total liabilities (add lines 17 through 22)	0	0	
_		Foundations that follow SFAS 117, check here			
Š		and complete lines 24 through 26, and lines 30 and 31.			
JCe	•	Unrestricted			
<u>~~</u>	24	Temporarily restricted			
ä	25 26	Permanently restricted		<u> </u>	
nd	20	Foundations that do not follow SFAS 117, check here ► X			
ᆵ		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
챣	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds	117,499	221,709	
ίA	30	Total net assets or fund balances (see instructions)	117,499	221,709	
Ne	31	Total liabilities and net assets/fund balances (see			
		instructions)	117,499	221,709	
P		Analysis of Changes in Net Assets or Fund Bala			
		I net assets or fund balances at beginning of year - Part		must agree with	
	end-	of-year figure reported on prior year's return)		<u>1</u>	117,499
2		er amount from Part I, line 27a		1	104,210
3	Oth	er increases not included in line 2 (itemize) ▶		3	
4	Add	lines 1, 2, and 3			221,709
5		reases not included in line 2 (itemize) ▶		5	
6	Tota	l net assets or fund balances at end of year (line 4 minus	s line 5) - Part II, column (	(b), line 30 6	221,709
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Part IV Capital Gain	s and Losses for Tax on Inve	stment Income			
	escribe the kind(s) of property sold (for ex		(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
	brick warehouse, or common stock, 200 s	sns wile co)	D - Donation	(mo, day, yi )	(1110 , ddy, yr )
<u>1 a</u> b		<del></del>			
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu	
a					0
b					0
<u> </u>					0
<u>d</u>					0
Complete anily for exacts	showing gain in column (h) and owned	by the foundation on 12/21/60			<u> </u>
Complete only for assets	1			Gains (Col (h) ga (k), but not less t	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	Losses (from co	l (h))
a		0			0
b		0			0
С		0			0
<u>d</u>	<del> </del>	0		-	0
е	16				
2 Capital gain net income	a or (not capital loss)	in, also enter in Part I, line 7 sss), enter -0- in Part I, line 7	2		0
3 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 inst	ructions If (loss), enter -0- in			
Part V Qualification	Under Section 4940(e) for Rec	<u> </u>	3		
	r the section 4942 tax on the distrib		ase perio	d?	Yes X No
	sn't qualify under section 4940(e) D amount in each column for each yea		ng anv er	ntries	
(a)	(b)	(c)	lig arry cr	(d)	<del></del>
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	col (c))
2017	641,822	199,823			3.2120
2016	524,599	142,701			3.6762
2015	567,181	69,769			8.1294
2014	669,575 594,907	106,402 122,090			6.2929 4.8727
2013	594,907	122,090			4.0727
	4.0				26.1832
	(d)		2		20.1032
_	itio for the 5-year base period - divide		3		5.2366
the number of years the	e foundation has been in existence i	riess than 5 years	-		
4 Enter the net value of	noncharitable-use assets for 2018 fr	rom Part X, line 5	4		287,306
5 Multiply line 4 by line 3	3		5		,504,507
6 Enter 1% of net investi	ment income (1% of Part I, line 27b).		6		0
			7		L,504,507
	utions from Part XII, line 4		8 _	_	513,790
If line 8 is equal to or	greater than line 7, check the box	in Part VI, line 1b, and complete		using a 1% ta	x rate See th

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Par	t VII-A Statements Regarding Activities (continued)			
	•		Ye	s 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	<u> </u>	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	1:	3 X	
	Website address  www.cspire.com/company_info/about/programs/foundation.jsp			
14	The books are in care of ► ELIZABETH CREEKMORE PICKERING Telephone no ► (601) 97	1-76	45	
	Located at ► 1018 HIGHLAND COLONY PKWY STE 360, RIDGELAND, MS ZIP+4 ► 39157-2	068		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			<b>▶</b> ∐
	and enter the amount of tax-exempt interest received or accrued during the year		1.0	N/A
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Ye	
	over a bank, securities, or other financial account in a foreign country?		<u> </u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of	f		
_	the foreign country	_l	-,	1 1
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	_	Ye	s No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	16	5 110
1a	During the year, did the foundation (either directly or indirectly)  (1) Engage in the sale or exchange or leasing of property with a disqualified person?  Yes X No.			ŀ
	(1) Engage in the date of exchange, or leading of property with a disquarries person.			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1		
	disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		ĺ	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		_ _	_
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	. 1	b	X
	Organizations relying on a current notice regarding disaster assistance, check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		_ _	_
	were not corrected before the first day of the tax year beginning in 2018?		C _	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	-		
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2018?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			1 1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions)			_
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	• 📑	-	1
C				
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ja	at any time during the year?			
h	of "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation of		1	
~	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 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2018 )		b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		a	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	-	_ _	_ l
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018	4	b	X

Pa	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Requ	uired (conti	nued)			
5a	During the year, did the foundation pay or incur any amo	ount to	<del>_</del>				Yes	No
	(1) Carry on propaganda, or otherwise attempt to influe	ence legislation (section	1 4945(e))?	Yes	X No			
•	(2) Influence the outcome of any specific public ele							
	directly or indirectly, any voter registration drive?				X No	-		
	(3) Provide a grant to an individual for travel, study, or o				X No			
	(4) Provide a grant to an organization other than a							
	section 4945(d)(4)(A)? See instructions	-			X No			
	(5) Provide for any purpose other than religious, ch					-		
	purposes, or for the prevention of cruelty to children			Yes	X No			
h	If any answer is "Yes" to 5a(1)-(5), did any of the							
	Regulations section 53 4945 or in a current notice regar					5b		
	•	· ·			. —	1   <del>"</del>		
	Organizations relying on a current notice regarding disast					7		
C	If the answer is "Yes" to question 5a(4), does the			1 1	No			
	because it maintained expenditure responsibility for the			Yes	NO			
	If "Yes," attach the statement required by Regulations so	, ,						
6a	Did the foundation, during the year, receive any fur				X No		•	
	on a personal benefit contract?			Yes		1		х
þ	Did the foundation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contra	ct <sup>y</sup>		6b	-	
	If "Yes" to 6b, file Form 8870				<b>▽</b>			
7a	At any time during the tax year, was the foundation a page				X No			
b	If "Yes," did the foundation receive any proceeds or have	•		on?	: .	7b		<u> </u>
8	Is the foundation subject to the section 4960 tax on pay				<b>⊡</b>			
	remuneration or excess parachute payment(s) during the	year?		Yes	X No			
_Pa	rt VIII Information About Officers, Director and Contractors	rs, Trustees, Fou	ndation Managers	, Highly Pa	id Employ	yees,		
1	List all officers, directors, trustees, and foundat	ion managers and	their compensation.	See instruct	ions.			
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contribute employee bene and deferred com	ons to fit plans (	e) Expensiother al	se accor	unt, es
SEE	STATEMENT 2	GOVOLOG TO POSICION						
	•			<u> </u>				
	Compensation of five highest-paid employees	(other than thos	e included on line	1 - see ii	nstructions	). If n	one.	enter
_	"NONE."	tother than thos	, , , ,			,	·····,	
		(b) Title, and average		(d) Contribut employee b		e) Expen	se arro	unt
(a	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and de	eferred	other al		
NON	7			compensa	ition			
INOIN	<u> </u>							
		ļ	<del></del>					
					ľ			
				<del> </del>				
		j	ļ		,			
							`	
Tota	I number of other employees paid over \$50,000	<u></u>		<u></u>				
						.m 99	N-PF	/2018)

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Part VIII	and Contractors (continued)	
3 Five	highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
	<u> </u>	ı
_		
<u> </u>		
Total num	ber of others receiving over \$50,000 for professional services ▶	•
Part IX-/		
List the fo	oundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of joins and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1N/A		
	•	
2		
	1	
3		
A		
<b>-</b>		,
Part IX-E	Summary of Program-Related Investments (see instructions)	
	the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	•	
		•
2	<u> </u>	
All other	program-related investments See instructions	
3		
· <del></del>	•	

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Pai	*Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign found	ations,
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	
	Average of monthly cash balances	1b	291,681
	Fair market value of all other assets (see instructions).	1c	
d		1d	291,681
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	291,681
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
•	instructions)	4	4,375
5 -	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	287,306
6	Minimum investment return. Enter 5% of line 5	6	14,365
	Tt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part )	ndations	
1	Minimum investment return from Part X, line 6	1	14,365
2 a	Tax on investment income for 2018 from Part VI, line 5		
b		1	
c		2c	0
3	Distributable amount before adjustments Subtract line 2c from line 1		14,365
4	Recoveries of amounts treated as qualifying distributions	1 1	<del></del>
5	Add lines 3 and 4		14,365
6	Deduction from distributable amount (see instructions)		
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	14,365
	rt XII Qualifying Distributions (see instructions)	T	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		513,790
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26		313,730
b	· · · · · · · · · · · · · · · · · · ·		
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc,	1	
•	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	_	
	Suitability test (prior IRS approval required)	3a	
b	, , , , , , , , , , , , , , , , , , , ,	3b	513,790
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	313,190
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	513,790
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6 L	
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculation qualifies for the section 4940(e) reduction of tax in those years	aicuiaung 	whether the foundation

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Pa	Part XIII Undistributed Income (see instructions)									
4	Distributable amount for 2018 from Part XI,	(a) Corpus	(b) Years prior to 2017	(c) 2017	<b>(d)</b> 2018					
1					14,365					
_	line 7									
_	Undistributed income, if any, as of the end of 2018									
	Total for pnor years 20,20,20				<del></del>					
	Excess distributions carryover, if any, to 2018  From 2013  588,802									
	664 255									
	562 602									
	[17 4C4									
	601 001									
	FIOIII 2017 · · · · · · · · · · · · · · · · · · ·	2,966,035								
	Total of lines 3a through e	2,300,033								
4	Qualifying distributions for 2018 from Part XII, line 4 > \$ 513,790									
	Applied to 2017, but not more than line 2a									
b	Applied to undistributed income of prior years (Election required - see instructions)	***************************************								
c	Treated as distributions out of corpus (Election									
	required - see instructions)			~~~~						
þ	Applied to 2018 distributable amount				14,365					
	Remaining amount distributed out of corpus	499,425								
5	Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )									
6	Enter the net total of each column as indicated below:									
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,465,460								
b	Prior years' undistributed income Subtract									
_	line 4b from line 2b		0		<del></del>					
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed ,									
d	Subtract line 6c from line 6b Taxable									
	amount - see instructions		0							
е	Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount - see instructions	, an a radius a radius a radius of a radius of the construction of	, , , , , , , , , , , , , , , , , , ,	0						
f	Undistributed income for 2018 Subtract lines									
•	4d and 5 from line 1 This amount must be distributed in 2019				0					
7	Amounts treated as distributions out of corpus									
·	to satisfy requirements imposed by section									
	170(b)(1)(F) or 4942(g)(3) (Election may be									
	required - see instructions)									
8	Excess distributions carryover from 2013 not									
	applied on line 5 or line 7 (see instructions)	588,802		***************************************						
9	Excess distributions carryover to 2019.									
	Subtract lines 7 and 8 from line 6a	2,876,658								
10	Analysis of line 9									
а	Excess from 2014 664, 255									
b	Excess from 2015 563, 693									
c	Excess from 2016 517, 454									
d	Excess from 2017 631,831									
е	Excess from 2018 499, 425		L	,						

_	990-PF (2018)				<del></del> .			Page 10
Pa	rt XIV Private Op	erating Foundations	(see instructions a	nd Part VII-A, quest	tion 9)			
1 a	If the foundation has	received a ruling or de	etermination letter tha	t it is a private oper	rating			
	foundation, and the ruling	g is effective for 2018, ei	nter the date of the ruling		►			
b	Check box to indicate v	whether the foundation	is a private operating	foundation described in	n section	4942(J)	(3) or	/4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years			(e)	Total
	justed net income from Part	(a) 2018	<b>(b)</b> 2017	(c) 2016	(d) 2	015		
	I or the minimum investment return from Part X for each							
	year listed					/_		
b	85% of line 2a							
c	Qualifying distributions from Part				/	<b>′</b>		
	XII, line 4 for each year listed .				<del>                                     </del>			
d	Amounts included in line 2c not							
	used directly for active conduct of exempt activities				/			
е	Qualifying distributions made							
	directly for active conduct of exempt activities Subtract line	!						
	2d from line 2c							
3	Complete 3a, b, or c for the alternative test relied upon							
а	"Assets" alternative test - enter							
	(1) Value of all assets			<i>I</i>	ļ			<del></del>
	(2) Value of assets qualifying under section							
	4942(j)(3)(B)(i)							
b	"Endowment" alternative test-							
	enter 2/3 of minimum invest- ment return shown in Part X,							
	line 6 for each year listed							
C	"Support" alternative test - enter							
	(1) Total support other than gross investment income							
	(interest, dividends, rents,							
	payments on securities loans (section 512(a)(5)),							
	or royalties)							
	(2) Support from general public and 5 or more							
	exempt organizations as provided in section 4942							
	(j)(3)(B)(III)				-			
	<li>(3) Largest amount of sup- port from an exempt</li>	1 //						
	organization						_	
Ðα	(4) Gross investment income.  rt XV Supplement	ntary Information (	Complete this par	only if the found	lation had	\$5 000 o	more in	assets at
Га		luring the year - see		comy in this round		<b>40,000</b> 0.		
1	Information Regardin			-				
а	List any managers of						ed by the	foundation
	before the close of any	y tax year (but only ıf th	ney have contributed	more than \$5,000) (\$	See section 5	507(d)(2))		
	REDITH CREEKMORE							<u>.                                    </u>
b	List any managers of	the foundation who	own 10% or more of	of the stock of a cor	poration (or	an equally	large po	rtion of the
	ownership of a partner	rship or other entity) of	which the foundation	n nas a 10% or greate	er interest			
NON		O	Oiff Lass Cabalass	hin ata Basanana				
2	Information Regardin	•						
	Check here ▶ if t unsolicited requests f	the foundation only	makes contributions	to preselected cha	ritable orga	nizations a	ind does	not accep
	complete items 2a, b,			ants, etc., to maividu	als of organ	iizations ui	idei Otilei	Conditions
	The name, address, a			he nerson to whom ar	onlications sh	ould be add	ressed	
	E STATEMENT 3	ind telephone number	or email address or t	ne person to whom ap	phoations sn		103304	
	The form in which app	lications should be su	hmitted and informati	on and materials they	v should incli	ıde		
D	The form in which app	moations should be su	omitted and informati	on and materials the	, onodia mol			
SEF	E STATEMENT 3							
	Any submission deadle	ines	•					
	,							
	E STATEMENT 3			<del> </del>				
d	Any restrictions or I factors	imitations on awards	, such as by geog	raphical areas, chari	table fields,	KINGS Of	institution	s, or othe
SEE	E STATEMENT 3							

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

Recipient

Name and address (home or business)

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

Foundation status of recipient recipient recipient recipient recipient. Purpose of grant or contribution Amount a Paid during the year 252,742 SEE STATEMENT 4 252,742 b Approved for future payment 210,000 SEE STATEMENT 5 210,000 **▶** 3b Total

Part XVI-	A Analysis of Income-Prod	ucing Act	ivities			
	amounts unless otherwise indicated		ated business income (b)	Excluded by	y section 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions )
a						
b						
c		_				
	<u></u>					
f				<u> </u>		
g Fees	and contracts from government agencies					
2 Member	ship dues and assessments					
3 Interest o	on savings and temporary cash investments -					
4 Dividend	is and interest from securities					<u> </u>
5 Net rent	al income or (loss) from real estate					
a Debt-	-financed property					
<b>b</b> Not o	debt-financed property					
6 Net renta	l income or (loss) from personal property					
7 Other in	vestment income	<u> </u>				
8 Gain or (I	oss) from sales of assets other than inventory					
	me or (loss) from special events · · ·					
	rofit or (loss) from sales of inventory	-				
	venue a					
				-		
			-	· <del>-</del>		
e	Add columns (b), (d), and (e)		0	<u> </u>	0	0
12 Sublotal	dd line 12, columns (b), (d), and (e)				13	0
	neet in line 13 instructions to verify calc					
Part XVI-			ccomplishment of Ex	cempt Pur	poses	
Line No.	Explain below how each activit		- "-		· · · · · · · · · · · · · · · · · · ·	uted importantly to the
_	accomplishment of the foundation					
	accomplishment of the roundation	on a exemp				
			<u> </u>			
			· · ·			
					· · · · · · · · · · · · · · · · · · ·	
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					<del></del>	· · · · · · · · · · · · · · · · · · ·
				<del> </del>	<del></del>	
		<del></del>	<del></del> <del></del>			
			<del></del>			
				<del> </del>		
	<u> </u>		<u></u>			

Part XVII	Information Regarding	<b>Transfers to and Transactions</b>	and Relationships With	Noncharitable
•	<b>Exempt Organizations</b>			

1	Did the	e organization directl	ly or indirectly e	engage in any of the followi	ng with any	other organ	nization	described		Yes	No
				501(c)(3) organizations) o							
		zations?									
а	Transf	ers from the reporting	g foundation to	a noncharitable exempt orga	inization of						
	(1) Cas	sh							1a(1)		X
	(2) Oth	ner assets							1a(2)		X
b	Other	transactions								:	
				npt organization							<u>X</u>
				ole exempt organization							X
				assets							X
											X
											<u>X</u>
				p or fundraising solicitations							X
				s, other assets, or paid emplo						f =	
				s," complete the following							
				ses given by the reporting fement, show in column (d)							
		(b) Amount involved		oncharitable exempt organization		iption of transfe					
(a) LI	ne no	(b) Amount involved	N/A	onchantable exempt organization	(u) Desci	iption of transit	sis, liansac	dions, and sna	ing and	ingenie	1113
								_			
						· · · · · · · · · · · · · · · · · · ·					
						<del></del>					
	-				-						
	<u> </u>			<u> </u>	-						
		· · · · · · · · · · · · · · · · · · ·				<u>-</u>					
	T T										
							•				
								·			
				- <u></u>							
2a				iliated with, or related to, o					_	ΓV	٦
		` '	•	tion 501(c)(3)) or in section	527?	• • • • • •			Y	es X	J No
b_	If "Yes	," complete the follow									
NT / 70		(a) Name of organization	<u>n                                     </u>	(b) Type of organization			c) Descript	tion of relations	snip		
N/A											
								\			
		<del> </del>		<del></del>							
		<del></del>									
	Unde	r penalties of perjury, I decla	are that I have examin	ned this return, including accompanying	schedules and s	tatements, and t	o the best	of my knowledg	ge and l	belief, it	ıs true,
	corre	ct, and complete Declaration of	f preparer (other than ta	expayer) is based on all information of which	h preparer has an	y knowledge					
Sigr		Elevator C.	Porkorin	/  05/06/2019	EXECUT	IVE DIRECT	OR	May the IRS			
Her	e   Sig	nature of officer or trustee	(	Date	Title			See instruction		Yes	No
		LIZABETH C PIC	CKERING								
	<del></del> \	Print/Type preparer's na	me	Preparer's signature		Date	Ch	eck if [	PTIN		
Paic	1							f-employed			
Pre	parer	Firm's name					Firm's EIN	. ▶			
Use	Only	Firm's address									
							Phone no				
								Fo	m 99	0-PF	(2018)

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

#### **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

2018

Employer identification number Name of the organization C SPIRE WIRELESS FOUNDATION 20-3426826 Organization type (check one) Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its 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)

Employer Identification number 20-3426826

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is need	Part I	Contributors (	(see instructions)	Use duplicate copies of Par	t I if additional space is neede
---	--------	----------------	--------------------	-----------------------------	----------------------------------

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	CELLULAR SOUTH INC  1018 HIGHLAND COLONY PKWY, STE 330  RIDGELAND, MS 39157-2061	<b>\$</b> 600,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	ELIZABETH C PICKERING  4793 CRESTWOOD DR  JACKSON, MS 39211	\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization
C SPIRE WIRELESS FOUNDATION

Employer identification number

20-3426826

Part II
---------

(a) 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
		\$	
(a) 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
		\$	
(a) 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
		.   .   .   \$	

Name of organization
C SPIRE WIRELESS FOUNDATION

Employer Identification number 20-3426826

O DI III	B WINDEDOO TOUNDITION						
Part III	Exclusively religious, charitable, etc. (10) that total more than \$1,000 for	, contributions to o the vear from any	rganizations desc one contributor. (	ribed in section 501(c)(7), (8), or Complete columns (a) through (e) and			
				of exclusively religious, charitable, etc.,			
	contributions of \$1,000 or less for the						
	Use duplicate copies of Part III if addit						
(a) No. from	(b) Purpose of gift	(c) Use	of aift	(d) Description of how gift is held			
Part I	(b) Fulpose of gift	(0) 036		(u) Description of now gires need			
		(e) Transi	er of gift				
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee			
				· · · · · · · · · · · · · · · · · · ·			
(a) No. from	(b) Purpose of gift	(c) Use	of aift	(d) Description of how gift is held			
Part I	(2,7 2,7 2,7 2,7 2,7 2,7 2,7 2,7 2,7 2,7						
		·		<u> </u>			
		(e) Trans	er of gift				
		1 TUD	D-I-41-				
	Transferee's name, address, ar	10 ZIP + 4	Kelatio	nship of transferor to transferee			
		<del></del>					
		·					
(a) No.				Γ			
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
Part I							
	(e) Transfer of gift						
	(2)						
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee			
		-					
(a) No.	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
from Part I	(b) Fulpose of gift	(0) 036		(a) Description of now gire is not			
		<u></u>					
		(e) Trans	fer of gift				
	Transferee's name, address, at	nd ZIP + 4	Relatio	nship of transferor to transferee			

20-3426826 STATEMENT 1

PART I Analysis o	PART I Analysis of Revenue and Expenses								
23 Other Expenses									
<b>Description</b> 、	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)					
BANK CHARGES	123	0	0	123					
CONTRACT LABOR	28,988	0	0	28,988					
WEBSITE	45	0	0	45					
ADVERTISING	3,500	0	0	3,500					
TOTALS	32,656	0	0	32,656					

PART VIII Information About Officers, Directors, Trustees, Foundation Managers, Highley Paid Employees, and Contractors

Contractors				
1 List all officers, directors, trustees, a	nd foundation managers an	d their compensation	n	
(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
ELIZABETH C PICKERING 1018 HIGHLAND COLONY PKWY, STE 360 RIDGELAND, MS 39157	EXECUTIVE DIRECTOR 8.00	15,000	0	0
HU MEENA 1018 HIGHLAND COLONY PKWY, STE 300 RIDGELAND, MS 39157	PRESIDENT - 0.00	0	0	0
WESLEY GOINGS 1018 HIGHLAND COLONY PKWY, STE 700 RIDGELAND, MS 39157	VICE PRESIDENT 0.00	0	0	0
MEREDITH CREEKMORE 1018 HIGHLAND COLONY PKWY, STE 700 RIDGELAND, MS 39157	SECRETARY/TREASURER 0.00	0	. 0	0
JIM RICHMOND 1018 HIGHLAND COLONY PKWY, STE 340 RIDGELAND, MS 39157	DIRECTOR 0.00	0	0	0
TOTALS		15,000	0	0 1

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

- 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, Etc., Programs:
  - a) The name, address, and telephone number or email address of the person to whom applications should be addressed:
    ELIZABETH C. PICKERING
    1018 HIGHLAND COLONY PKWY STE 360 RIDGELAND, MS 39157-2068
    (601) 355-1522
  - b) The form in which applications should be submitted and information and materials they should include:

    AN APPLICATION FOR FORMAL REQUESTS MAY BE FOUND ON THE C SPIRE FOUNDATION WEBSITE. INFORMATION
    REGARDING THE ORGANIZATION, THE ORGANIZATION'S DESIGNATION AS A 501(C)(3) TAX EXEMPT ORGANIZATION, EVENT
    DETAILS, AND THE AUDIENCE IS REQUESTED.
  - c) Any submission deadlines:

PROPOSALS MUST BE SUBMITTED 90 DAYS BEFORE THE EVENT FOR THE PROPOSAL TO BE CONSIDERED.

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

THE C SPIRE FOUNDATION CONSIDERS SUPPORT FOR 501(C)(3) TAX EXEMPT ORGANIZATIONS THAT PRIMARLY FOCUS ON STEM (SCIENCE, TECHNOLOGY, ENGINEERING, AND MATH) EDUCATION THAT SUPPORTS DIGITAL LITERACY, TECHNOLOGY, PROFESSIONAL SKILLS AND WORKFORCE DEVELOPMENT, WITH PREFERENCE GIVEN TO THOSE BASED IN MISSISSIPPI.

PART XV Supplementary Information (continued)

<b>Grants and Contributions Paid During th</b>		ayment		
Recipient -	If recipient is an individual, show any relationship to any foundation manager	Foundation status	Purpose of grant or	Amount
Name and address (home or business)	or substantial contributor	of recipient	contribution	Aillouill
Paid during the year				
Alcorn State University	N/A	PC	Annual Scholarship	12,00
1000 ASU Drive #810	170	1.5	, and an action of the	22,00
Alcorn State, MS 39096				
Alcolfi State, NIS 39090				
Alcorn State University	N/A	PC	Apple iWatch	50
1000 ASU Drive #810			Sponsorship	
Lorman, MS 39096-7500				
American Cancer Society	N/A	PC	Cancer League	2,50
1380 Livingston Rd	1			
Jackson, MS 3921				
				40.00
ARISE@UM	N/A	PC	Summer Research	10,00
401 Shoemaker Hall			Program	
Oxford, MS 38677				
Base Camp Coding Academy	N/A	PC	Coding Academy	16,66
301 North Main Street Suite 3				
Water Valley MS 38965				
BPO International	N/A	PC	Outreach Ministry	5,00
P. O. Box 958	170	'`	Outreach Nimistry	3,00
Clinton, MS 39060				
Cary Christian Center	N/A	PC	Children's Village	5,00
154 Cottonwood St				
Cary, MS 39054				
Community Development Foundation	N/A	PC	Connect Career Expo	32
P. O Box A				
Tupelo MS 38802-1210				
Delta State University	N/A	PC	Annual Scholarship	6,00
Rox 3141	19/6	'`	/ / / / / / / / / / / / / / / / / / /	0,00
Cleveland, MS 38733				
		_		
Eudora Welty Foundation	N/A	PC	2019 Writing Awards	12,00
P. O. Box 5568				
Jackson, MS 39685				
Extra Table Administrative Funds	N/A	PC	Cochran Retirement	5,00
3904 Hardy Street	·		Dinner for the benefit	
Hattiesburg, MS 39402			of Extra Table	
C T	N/A	PC	7th Grade Robotics	60
German Town Middle School	N/A		7 th Grade Robotics	
439 Calhoun Station Pkwy				
Madison, MS 39110				
Goodwill Industries of South Mississippi	N/A	NC	Pathways to	10,00
2407 31st Street			Possibilities	
Gulfport MS 39501		1	Career Expo	

PARTIXV Supplementary Information (continued)

Recipient	If recipient is an individual, show any	Foundation status	Purpose of grant or	A
Name and address (home or business)	relationship to any foundation manager or substantial contributor	of recipient	contribution	Amour
Paid during the year	or substantial contributor			
Health Services In-Action Inc. d/b/a Oxford Medical Ministries Clinic 205 South Commerce Cove Oxford, MS 38655	N/A	PC	Golf Tournament	1,
Innovate Mississippi 121 N State Street Suite 500 Jackson, MS 39201	N/A	PC	Hall of Fame Awards Gala	5,1
Jackson Prep P. O. Box 49 Jackson, MS 39296	N/A	PC	PAT	7,
Jackson State University P. O. Box 17144 Jackson, MS 39217-0144	N/A	PC	Annual Scholarship	15,
Jackson State University P. O. Box 17144 Jaskson, MS 39217	N/A	PC	Inauguration Sponsor	10,
Missisippi University for Women 1100 College Street MUW, MS-1618 Columbus, MS 39701	N/A	PC ,	Annual Scholarship	6,
Mississippi Valley State University 1400 U S Highway 82 W Itta Bena, MS 38941	N/A	PC	Annual Scholarship	6,
Palmer Home for Children P. O. Box 746 Columbus, MS 39703	N/A	PC	Tailgate for Palmer	5,
Petal High School Robotics Team 1145 Highway 42 East Petal, MS 39465	N/A	PC	Team Hero 10-18-2019 Robotics	2,
REAL Christian Foundation P. O. Box 180059 Richland, MS 39218	N/A	PC	Annual Celebration Dinner	1,
Southern Christian Services 860 East River Place Jackson, MS 39202	N/A	PC 、	Sonny Fòuntain Golf Tournament	3,
SR1 369 Towne Center Blvd Ridgeland, MS 39157	N/A	PC	STEM Summer Camp	2

PART XV Supplementary Information (continued)

Grants and Contributions Paid During th		ayment	<del>,</del>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status	Purpose of grant or	Amount
Name and address (home or business)	or substantial contributor	of recipient	contribution	Amount
a Paid during the year				
The Library Foundation of Hancock County 312 Highway 90 Bay St Louis, MS 39520	N/A	SO-DP	Summer Reading Program	25
The Library Foundation of Madison County 102 Priestley St Canton, MS 39046	N/A	PC	Book Mobile	1,00
Tougaloo College Office of Institutional Advancement 500 West County Line Rd Jackson, MS 39174	N/A	PC	30th Annual Business Luncheon	40
Town of Louise DiAnn Crews, City Clerk P. O. Box 224 Louise, MS 39097	N/A	PC	3 Laptops After School Tutorial	1,00
University of Mississippi 406 University Avenue Oxford, MS 38655	N/A	PC	Annual Scholarship	15,00
University of Mississippi Foundation 406 University Avenue Oxford, MS 38655	N/A	PC	Thad Cochran Law School Endowment	50,00
University of Southern Misissippi 118 College Drive, #5210 Hattiesburg MS 39406	N/A	PC ,	Annual Scholarship	15,0
USA IBC P. O. Box 3696 Jackson, MS 39207	N/A	PC	2018 USA IBC	12,00
West Point Society of Mississippi 750 Woodlands Parkway Suite 201 Ridgeland, MS 39157	N/A	PC	3rd Annual Leadérship Ethics & Diversity in STEM Conference	2,50
Youth Villages 805 S Wheatley, Suite 240 Ridgeland, MS 39157	. N/A	PC	Kite Tales	5,00
TOTAL		<u> </u>	3a	252,74

# SPIRE WIRELESS FOUNDATION 20-3426826 Attachment to FORM 990-PF STATEMENT 5

PARTIXV Supplementary Information (continued)

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status	Purpose of grant or	Amount
Name and address (home or business)	or substantial contributor	of recipient	contribution	7.111001110
<b>b</b> Approved for future payment				
Mississippi Children's Museum	N/A	PC	Robots and Kits	2,5
P.O. Box 55409				
Jackson, MS 39296-5409				
University of Mississippi Medical Center	N/A	PC '	Campaign for	100,0
Research Development Foundation			Children's of	
2500 North State Street			Mississippi	
Jackson, MS 39216		-		
The Foundation for Mississippi History	/ N/A	PC	Museum of Mississippi	100,0
P.O. Box 571			History and Mississippi	
Jackson, MS 39205		•	Civil Rights Museum	
456 Robotics	N/A	PC	First Robotics Team	2,5
P.O. Box 821792	Ī		<b>456</b> .	
Vicksburg, MS 39182			2019 Season	
Jobs for Mississippi Graduates, Inc.	N/A	PC	JMG STEM Academy	2,5
6055 Ridgewood Road				
Jackson, MS 39211				
Greenville Renaissance Scholars	N/A	PC	Camp Renaissance	2,5
323 South Main Street			2019	
Greenville, MS 38701				•
TOTAL		<u> </u>	3b	210,0