

For calendar year 2018, or tax year beginning 04-01-2018, and ending 03-31-2019

Name of foundation OLD LADIES HOME ASSOCIATION		A Employer identification number 64-0303089	
Number and street (or P O box number if mail is not delivered to street address) 2034 EAST NORTHSIDE DRIVE		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code JACKSON, MS 39211		B Telephone number (see instructions) (601) 366-6623	
G Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach computation	
H 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		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 45,083,623		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) (Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	513,537			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	262,793	244,498	262,793	
	4 Dividends and interest from securities	396,660	396,660	396,660	
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 _____	1,931,646			
	b Gross sales price for all assets on line 6a _____ 6,443,839				
	7 Capital gain net income (from Part IV, line 2)		1,474,741		
	8 Net short-term capital gain			47,171	
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	209,184	0	209,184	
	12 Total. Add lines 1 through 11	3,313,820	2,115,899	915,808	
	13 Compensation of officers, directors, trustees, etc	0	0	0	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	15,710	12,568	15,710	3,142
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	5,001	0	5,001	0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	55,866	55,529	55,866	0
	24 Total operating and administrative expenses. Add lines 13 through 23	76,577	68,097	76,577	3,142
	25 Contributions, gifts, grants paid	1,449,607			1,449,607
	26 Total expenses and disbursements. Add lines 24 and 25	1,526,184	68,097	76,577	1,452,749
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	1,787,636			
	b Net investment income (if negative, enter -0-)		2,047,802		
c Adjusted net income (if negative, enter -0-)				839,231	

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 (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	178,332	441,746	441,746
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)	4,121,069	3,720,401	3,725,928
	b	Investments—corporate stock (attach schedule)	2,126,970	2,718,520	6,713,431
	c	Investments—corporate bonds (attach schedule)	5,270,507	6,620,683	6,569,298
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	6,379,650	6,153,630	8,127,002
	14	Land, buildings, and equipment basis ▶ _____ 172,076 Less accumulated depreciation (attach schedule) ▶ _____	172,076	172,076	172,076
15	Other assets (describe ▶ _____)	19,124,958	19,334,142	19,334,142	
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	37,373,562	39,161,198	45,083,623	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule).			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted	17,911,802	19,484,733	
	25	Temporarily restricted	336,802	342,323	
	26	Permanently restricted	19,124,958	19,334,142	
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see instructions)	37,373,562	39,161,198	
	31	Total liabilities and net assets/fund balances (see instructions) .	37,373,562	39,161,198	

Part III Analysis of Changes in Net Assets or Fund Balances			
1	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)	1	37,373,562
2	Enter amount from Part I, line 27a	2	1,787,636
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	39,161,198
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	39,161,198

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)
1 a PUBLICLY TRADED SECURITIES			
b PUBLICLY TRADED SECURITIES			
c CAPITAL GAINS DIVIDENDS	P		
d			
e			

(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)
a 5,872,405		4,969,098	903,307
b 47,171			47,171
c 524,263			524,263
d			
e			

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	
a			903,307
b			47,171
c			524,263
d			
e			

2 Capital gain net income or (net capital loss)	2	1,474,741
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 instructions) If (loss), enter -0- in Part I, line 8	3	47,171

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	1,374,741	25,885,359	0 053109
2016	3,376,493	26,505,958	0 127386
2015	515,067	25,424,124	0 020259
2014	1,340,419	25,934,477	0 051685
2013	484,416	23,957,321	0 020220

2 Total of line 1, column (d)	2	0 272659
3 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	3	0 054532
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	25,479,848
5 Multiply line 4 by line 3	5	1,389,467
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	20,478
7 Add lines 5 and 6	7	1,409,945
8 Enter qualifying distributions from Part XII, line 4	8	1,452,749

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)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	20,478
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	20,478
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	20,478
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	28,326
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	28,326
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	416
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	7,432
11	Enter the amount of line 10 to be Credited to 2019 estimated tax <input type="checkbox"/> 7,432 Refunded <input type="checkbox"/>	11	0

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> MS		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>	9	Yes
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part VII-A Statements Regarding Activities (continued)

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	13	Yes	
14	The books are in care of ▶ ANNE P WELLS Telephone no ▶ (601) 366-6623			

Located at **▶** 2034 EAST NORTHSIDE DRIVE JACKSON MS ZIP+4 **▶** 39211

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ <input type="checkbox"/>	15		
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶	16	Yes	No

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.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
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. Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/>	1b		
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?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	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 ▶ 20____, 20____, 20____, 20____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of 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).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		No

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

5a	During the year did the foundation pay or incur any amount to		Yes	No
(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	If any answer is "Yes" to 5a(1)–(5), did any 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.		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
c	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		
6a	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	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870			
7a	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	7b	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	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)

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		
Total number of others receiving over \$50,000 for professional services. ►		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 DIRECT FINANCIAL ASSISTANCE IS PROVIDED TO THE WILLARD F BOND HOME, A LONG TERM BENEVOLENT RETIREMENT HOME, TO PROVIDE FOR EVERYDAY OPERATIONS OF A HOME FOR THE ELDERLY AND DISABLED	499,607
2 DIRECT FINANCIAL ASSISTANCE PROVIDED TO THE UNIVERSITY OF MISSISSIPPI MEDICAL CENTER MEMORY IMPAIRMENT AND NEURODEGENERATIVE DEMENTIA CENTER	400,000
3 DIRECT FINANCIAL ASSISTANCE PROVIDED TO HOSPICE MINISTRIES, INC	275,000
4 DIRECT FINANCIAL ASSISTANCE PROVIDED TO METHODIST REHABILITATION CENTER	200,000

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	25,205,905
b	Average of monthly cash balances.	1b	489,885
c	Fair market value of all other assets (see instructions).	1c	172,076
d	Total (add lines 1a, b, and c).	1d	25,867,866
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	25,867,866
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	388,018
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	25,479,848
6	Minimum investment return. Enter 5% of line 5.	6	1,273,992

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.)

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

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	1,452,749
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	1,452,749
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	20,478
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,432,271

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
1 Distributable amount for 2018 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2018				
a From 2013.				
b From 2014.				
c From 2015.				
d From 2016.				
e From 2017.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ _____				
a 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).				
d Applied to 2018 distributable amount.				
e Remaining amount distributed out of corpus				
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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				
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).				
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2014.				
b Excess from 2015.				
c Excess from 2016.				
d Excess from 2017.				
e Excess from 2018.				

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		
0				0	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed	1,452,749	1,384,034	3,389,195	515,067	6,741,045
d Amounts included in line 2c not used directly for active conduct of exempt activities	0	0	0	0	0
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	1,452,749	1,384,034	3,389,195	515,067	6,741,045
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.	849,328	862,845	883,532	847,471	3,443,176
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).					
(3) Largest amount of support from an exempt organization					
(4) 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)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	
b <i>Approved for future payment</i>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

1	Program service revenue	(b) Business code	(c) Amount	(d) Exclusion code	(e) Amount	(f) (See instructions)
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments.					
3	Interest on savings and temporary cash investments			14	262,793	
4	Dividends and interest from securities.			14	396,660	
5	Net rental income or (loss) from real estate					
a	Debt-financed property.					
b	Not debt-financed property.					
6	Net rental income or (loss) from personal property					
7	Other investment income.					
8	Gain or (loss) from sales of assets other than inventory			18	1,931,646	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue					
a	INCREASE IN VALUE OF BENEFICIAL INTEREST IN TRUST HELD BY 3RD PARTIES			14	209,184	
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal Add columns (b), (d), and (e).		0		2,800,283	0
13	Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations)			13	2,800,283	2,800,283

[illegible]

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

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?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
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. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

(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 ☒ No

b If "Yes," complete the following schedule

(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	*****	2019-11-21	*****	May the IRS discuss this return with the preparer shown below? (see instr)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee	Date	Title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	M GREGORY KING CPA		2019-11-21		P01418541
	Firm's name ▶ HADDOX REID EUBANK BETTS PLLC				Firm's EIN ▶ 64-0414329
	Firm's address ▶ 188 EAST CAPITOL STREET STE 500 JACKSON, MS 39201				Phone no (601) 948-2924

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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JANE S ROPER 2034 EAST NORTHSIDE DRIVE JACKSON, MS 39211	PRESIDENT 0 25	0	0	0
ANNE W ROGERS 2034 EAST NORTHSIDE DRIVE JACKSON, MS 39211				
ANNE P WELLS 2034 EAST NORTHSIDE DRIVE JACKSON, MS 39211	TREASURER 0 25	0	0	0
MARILYN M MCCLENDON 2034 EAST NORTHSIDE DRIVE JACKSON, MS 39211				
CHARLOTTE W MCNEEL 2034 EAST NORTHSIDE DRIVE JACKSON, MS 39211	DIRECTOR 0 25	0	0	0
SALLIE R MOSELEY 2034 EAST NORTHSIDE DRIVE JACKSON, MS 39211				

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)				
a Paid during the year				
METHODIST REHABILITATION CENTER 1350 EAST WOODROW WILSON JACKSON, MS 39216			MEDICAL REHABILITATION	200,000
UNIV OF MS MED CNTR MEMORY IMPAIRMENT AND NEURODEGENRATIVE DEMENTIA CENT 2500 N STATE STREET JACKSON, MS 39216			ELDERLY CARE	400,000
WILLARD F BOND HOME 7521 OLD CANTON ROAD MADISON, MS 39110			NURSING HOME	499,607
Total ▶ 3a				1,449,607

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)				
a <i>Paid during the year</i>				
HOSPICE MINISTRIES INC 450 TOWNE CENTER BLVD RIDGELAND, MS 39157			HOSPICE CARE	275,000
BAPTIST HEALTH FOUNDATION 1225 N STATE ST JACKSON, MS 39202			MEDICAL CARE	75,000
Total ► 3a				1,449,607

TY 2018 Accounting Fees Schedule**Name:** OLD LADIES HOME ASSOCIATION**EIN:** 64-0303089

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	15,710	12,568	15,710	3,142

TY 2018 Investments Corporate Bonds Schedule

Name: OLD LADIES HOME ASSOCIATION

EIN: 64-0303089

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
AIR LEASE CORP	23,622	23,871
ALLY BANK	100,000	101,024
AMERICAN EXPRESS BANK	100,000	99,586
AMERICAN EXPRESS BANK	250,000	245,055
AMERICAN EXPRESS CREDIT CORP	23,981	23,958
AMERICAN HONDA FINANCE CORP	36,948	36,971
AMGEN INC	26,808	26,351
ANHEUSER-BUSCH INBEV WORLDWIDE INC	25,079	26,961
APPLE INC	150,000	148,552
APPLE INC	24,950	24,837
APPLE INC	24,808	24,598
ASTRAZENECA PLC	100,322	99,687
AT&T CALLABLE DTD 5/4/15 4.5%	24,191	24,630
BANK OF AMERICA CORP	23,436	24,918
BANK OF AMERICA	157,698	155,305
BANK OF NOVA SCOTIA/THE	22,570	22,828
BANK OF NY MELLON CORP	150,621	153,816
BERKSHIRE HATHAWAY FINANCE CORP	22,804	24,074
BERKSHIRE HATHAWAY INC	153,088	151,536
BIOGEN INC	49,089	47,982

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
BP CAPITAL MARKETS AMERICA INC	25,023	25,917
BMW BANK	100,000	101,023
BMO HARRIS BANK	150,000	150,313
BOFI FEDERAL BANK	150,000	145,996
CAPITAL ONE FINL CORP	25,009	24,929
CATERPILLER FIN. INC.	100,000	95,480
CELTIC BANK	100,000	97,054
CHUBB INSURANCE HOLDINGS INC	139,969	139,604
CISCO SYSTEMS INC	25,925	25,310
CISCO SYSTEMS INC	101,345	99,338
CITIGROUP INC	35,963	35,910
COCA COLA	100,094	100,748
COMCAST CORP	25,564	26,317
CSX CORP	22,991	23,593
CVS HEALTH CORP	24,032	24,066
DESTRA PREFERRED & INCOME SECURITIES FUND	100,385	102,417
DODGE & COX INCOME FD	130,804	129,041
DOWDUPONT INC	23,004	24,052
DUKE ENERGY CORP	23,456	23,717
ENTERGY ARKANSAS INC	130,314	127,312

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
EQUINOR ASA	23,320	24,040
FIFTH THIRD BANK	25,041	24,734
FORD MOTOR CREDIT	25,437	24,823
GENERAL ELECTRIC	26,385	23,804
GILEAD SCIENCES INC	25,002	25,490
GOLDMAN SACHS INC	23,709	23,732
HSBC BANK USA	200,000	194,316
HARLEY-DAVIDSON INC	102,849	97,170
HORMEL FOODS CORPORATION	128,067	128,129
IBM CORP	23,925	24,370
IBM CORP	100,790	98,892
IBM CREDIT LLC	23,997	24,509
INTEL CORP	26,249	25,476
JOHN DEERE CAPITAL CORP	25,133	24,958
JOHNSON & JOHNSON	98,547	97,752
JP MORGAN CHASE & CO. COM	106,790	103,899
JP MORGAN CHASE & CO. COM	150,000	148,269
JP MORGAN CHASE BANK	150,000	150,972
JP MORGAN CHASE & CO. COM	50,306	49,917
KROGER	26,690	24,850

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
LLOYDS BANK GROUP	23,969	24,575
MICROSOFT CORP	151,140	150,032
MOLSON COORS BREWING CO	24,970	24,513
MORGAN STANLEY	24,087	24,421
MORGAN STANLEY	25,222	24,849
NIKE INC	149,853	148,670
OCCIDENTAL PETROLEUM CORP	99,163	99,465
OPPENHEIMER TOTAL RETURN BOND FUND	57,925	58,113
ORACLE CORP	102,936	100,411
ORACLE CORP	23,940	23,997
PIEDMONT FEDERAL SAVINGS BANK	175,000	177,247
PIONEER BOND FUND CLASS	129,136	125,536
PROVINCE OF BRITISH COLUMBIA CANADA	22,791	23,115
PRUDENTIAL FINANCIAL	26,620	24,670
QUALCOMM INC	254,658	244,275
ROYAL BANK OF CANADA	23,999	23,995
SIMON PROPERTY GRP	150,173	150,651
SUNTRUST BKS	24,981	24,920
TD AMERITRADE HOLDING CORP	23,947	24,836
THE CHARLES SCHWAB CORPORATION SNR PIDI NTS	24,022	24,301

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
TOYOTA MOTOR CREDIT	23,998	24,163
TOYOTA MOTOR CREDIT CORP	25,512	24,474
UBS BANK	175,000	176,594
VALERO ENERGY	24,728	24,459
VERIZON	24,032	24,883
WALGREENS BOOTS ALLIANCE	25,096	25,480
WALMART INC	24,946	25,949
WALT DISNEY	101,706	98,895
WELLS FARGO & CO	23,792	24,652
WELLS FARGO & CO	98,217	97,709
WELLS FARGO BANK	125,000	126,738
WELLS FARGO & CO	23,994	23,931

TY 2018 Investments Corporate Stock Schedule

Name: OLD LADIES HOME ASSOCIATION
EIN: 64-0303089

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ACE LTD	27,021	33,479
AMAZON.COM INC	133,776	122,872
AMERICAN EXPRESS CO	126,297	143,730
APPLE INC	49,004	153,290
AT&T	56,766	125,440
BB&T CORP	134,620	120,001
BLACKROCK INC	93,030	117,099
BRISTOL MEYERS SQUIBB CO	149,408	124,809
CISCO SYSTEMS INC	79,808	144,963
CITIGROUP INC	115,268	115,045
COCA COLA	16,728	755,149
COLGATE PALMOLIVE	67,446	657,984
DOLLAR GENERAL	63,880	91,503
EXXON MOBILE CORP	163,057	989,638
GOOGLE INC	71,789	111,805
GOOGLE INC	72,128	113,811
HELMERICH & PAYNE INC	133,387	112,509
HESS CORP	133,513	122,267
HONEYWELL INTERNATIONAL INC	71,033	110,926
INTEL CORP	58,447	124,101
JP MORGAN CHASE & CO. COM	44,056	116,819
LYONDELLBASELL INDUSTRIES	35,549	30,269
MERCK & CO	27,162	406,119
NEXTERA ENERGY, INC.	55,212	114,059
ORACLE SYSTEMS	13,102	156,672
PROCTER & GAMBLE CO COM	73,963	608,693
PRUDENTIAL FINANCIAL	66,894	125,876
SALESFORCE.COM INC	99,770	103,732
SCHLUMBERGER	139,327	134,065
STRYKER CORP	60,014	106,068

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
TARGET CORP	134,715	124,403
UNION PACIFIC CORP	30,557	33,607
WASTE MANAGEMENT INC	102,890	152,748
WELLS FARGO & CO	18,903	109,880

TY 2018 Investments Government Obligations Schedule**Name:** OLD LADIES HOME ASSOCIATION**EIN:** 64-0303089**US Government Securities - End
of Year Book Value:**

2,165,118

**US Government Securities - End
of Year Fair Market Value:**

2,166,964

**State & Local Government
Securities - End of Year Book
Value:**

1,555,283

**State & Local Government
Securities - End of Year Fair
Market Value:**

1,558,964

TY 2018 Investments - Other Schedule

Name: OLD LADIES HOME ASSOCIATION

EIN: 64-0303089

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
FIDELITY ADVISOR NEW INSIGHT S INST	AT COST	888,098	1,363,609
FRANKLIN MUTUAL DISCOVERY Z FUND	AT COST	1,104,926	1,141,058
GOLDMAN SACHS LARGE CAP GROWTH INSIGHTS FUND INSTITUTIONAL CLASS	AT COST	145,677	145,946
JOHN HANCOCK DISCIP VALUE	AT COST	647,365	754,940
JOHN HANCOCK DISCIP VALUE MID CAP	AT COST	302,689	484,624
JOHN HANCOCK INTERNATIONAL GROWTH	AT COST	556,775	661,669
JOHN HANCOCK STRATEGIC INCOME OPP	AT COST	80,082	75,902
JPMORGAN EQUITY INCOME	AT COST	122,678	126,443
MERIDIAN SMAL CAP GROWTH INVESTOR	AT COST	194,943	257,438
PARHAM BRIDGES MEMORIAL FUND	AT COST	331,001	354,279
PIONEER MULTI-ASSET ULTRASHORT INC FUND	AT COST	113,156	113,356
PIONEER STRATEGIC INCOME FUND	AT COST	82,936	78,912
T. ROWE PRICE EQUITY INCOME FUND	AT COST	815,130	1,002,392
T. ROWE PRICE GROWTH STOCK	AT COST	267,251	748,172
T. ROWE PRICE MID CAP GROWTH FUND	AT COST	206,260	537,692
THORNBURG INVEST INC	AT COST	31,315	32,669
UNDISCOVERED MGRS BEHAVIORAL VALUE	AT COST	263,348	247,901

TY 2018 Other Assets Schedule**Name:** OLD LADIES HOME ASSOCIATION**EIN:** 64-0303089**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
BENEFICIAL INTEREST IN PERPETUAL TRUST HELD BY THIRD PARTIES	19,124,958	19,334,142	19,334,142

TY 2018 Other Expenses Schedule**Name:** OLD LADIES HOME ASSOCIATION**EIN:** 64-0303089**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK AGENCY FEES / MGT FEES	47,722	47,722	47,722	0
INSURANCE	7,280	7,280	7,280	0
EXPENSES ALLOCATED TO TAX-EXEMPT INCOME	0	-337	0	0
MISCELLANEOUS	650	650	650	0
POSTAGE	214	214	214	0

TY 2018 Other Income Schedule**Name:** OLD LADIES HOME ASSOCIATION**EIN:** 64-0303089**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
INCREASE IN VALUE OF BENEFICIAL INTEREST IN TRUST HELD BY 3RD PARTIES	209,184		209,184

TY 2018 Taxes Schedule**Name:** OLD LADIES HOME ASSOCIATION**EIN:** 64-0303089

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAXES	5,001	0	5,001	0

Schedule B (Form 990, 990-EZ, or 990-PF) <small>Department of the Treasury Internal Revenue Service</small>	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Go to <u>www.irs.gov/Form990</u> for the latest information	OMB No 1545-0047 2018
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Name of the organization OLD LADIES HOME ASSOCIATION	Employer identification number 64-0303089
--	---

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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 other 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 33¹/₃% 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, 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 totaling \$5,000 or more during the year. . . . ▶ \$ _____

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

Name of organization OLD LADIES HOME ASSOCIATION	Employer identification number 64-0303089
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Part I Contributors (See instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	REGIONS BANK AS TRUSTEE OF CRAT UW OF GERTRUDE TURNER FBO O 1900 5TH AVE N SUITE 2500 BIRMINGHAM, AL 35203	\$ 161,865	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	REGIONS BANK R MASON STRICKER FOUNDATION FOR OLD LADIES HOM 210 EAST CAPITOL STREET 3RD FLOOR JACKSON, MS 39201	\$ 298,905	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
3	UM WILLIAM H ELLSWORTH FOUNDATION PO BOX 1802 PROVIDENCE, RI 02901	\$ 40,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Employer identification number

64-0303089

Part II	Noncash Property
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[illegible]

Name of organization OLD LADIES HOME ASSOCIATION	Employer identification number 64-0303089
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Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	