TRUST NAME: MASON AND LULA COLE CHARITABLE TUA 600008015
FEDERAL EIN: 26-6779458
TRUST NUMBER: 600008015
** No Severe Diagnostics Detected **
Informational Diagnostics: Total 1
Federal (1)
1.Form 2220

The Form 2220 will not print per your underpayment penalty compute option
** No Electronic Filing Alerts Detected **
** No Electronic Filing Rejects Detected **
** No Electronic Filing XML Validation Errors Detected **

Date $10 / 21 / 2021$
To: CHESAPEAKE WEALTH MANAGEMENT
RE: MASON AND LULA COLE CHARITABLE TUA 600008015 12/31/2020

Subject: Minimum Required Payout for Private Foundation
Part I: Undistributed Income
A private foundation that is not an operating foundation must spend a minimum amount annually in the form of grants to public charities and private operating foundations to accomplish its charitable purposes. The tax statute prescribes a minimum payout of at least 5\% of the total fair market value of the foundation's assets, subject to certain adjustments. The foundation is given two years in which to make the qualifying distributions - the year for which the minimum distributable amount is calculated and the subsequent year. Failure to comply with the minimum payout requirement results initially in a penalty tax of $30 \%$ on the undistributed amount.

Please be aware that if an initial $30 \%$ tax is imposed under IRC Sec. 4942 (a) and any portion of such income remains undistributed as of the end of the subsequent fiscal year, the IRS is authorized to impose a tax equal to 100\% of the amount remaining undistributed pursuant to IRC Sec. 4942 (b).

Required distribution for 12/31/2020 \$ 201,094.
Undistributed from prior years \$ 0.
Total Required Distributions \$ 201,094.
Qualifying distributions for $12 / 31 / 2020$ 260,785.
Excess distributions carried over from PY \$ 257,378. Total Distributions

Undistributed income for $12 / 31 / 2020$
\$ 0 .
or
Excess Distribution Carryover to 12/31/2021
\$
292,612.
The undistributed income if any must be distributed by no later than 12/31/2021 or the trust will be subject to the $30 \%$ penalty tax.

Part II: Excess Distributions carryover to 12/31/2021
Excess from 12/31/2016
$\$ \quad 45,978$.
Excess from 12/31/2017
\$ 42,865.
Excess from 12/31/2018
\$ 65,517.
Excess from 12/31/2019
$\$ \quad 78,561$.
Excess from 12/31/2020
$\begin{array}{lr}\$ & 59,691 . \\ \$ & 292,612 .\end{array}$
Total
Please note the excess distribution in the amount of $\$ 45,978$. for the $12 / 31 / 2016$ tax year will be lost if not used by $12 / 31 / 2021$.

Do Not Submit This Form To the IRS Unless Requested To Do So-Retain This Form Form 8879-EO IRS e-file Signature Authorization for an Exempt Organization

## CHESAPEAKE WEALTH MANAGEMENT, OFFICER

## Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, or $\mathbf{7 a}$ below, and the amount on that line for the return being filed with this form was blank, then leave line $\mathbf{1 b} \mathbf{~} \mathbf{2 b} \mathbf{b} \mathbf{3 b} \mathbf{4} \mathbf{4}, \mathbf{5} \mathbf{b} \mathbf{6} \mathbf{b}$, or $\mathbf{7 b}$, whichever is applicable, blank (do not enter -0 -). But, if you entered $-\mathbf{0}$ - on the return, then enter -0 - on the applicable line below. Do not complete more than one line in Part I.


## Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that $\square$ I am an officer of the above organization or $\square$ I am a person subject to tax with respect to (name of organization) $\qquad$ , (EIN) $\qquad$ and that I have examined a copy
of the 2020 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the organization, I will enter my PIN as my signature on the tax year 2020 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax
Date
Part III Certification and Authentication
ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

```
5
```

I certify that the above numeric entry is my PIN, which is my signature on the 2020 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

| ERO's signature | ERO Must Retain This Form - See Instructions |  |
| ---: | ---: | ---: | :--- |
|  | Do Not Submit This Form to the IRS Unless Requested To Do So |  |
| For Paperwork Reduction Act Notice, see back of form. | Form 8879-EO (2020) |  |

## ESTIMATED TAX WORKSHEET FOR FORM 990-W

| A. 2021 Estimated Tax |  |  | A |  |
| :---: | :---: | :---: | :---: | :---: |
| B. Enter 100 \% of Line A | B |  | D | 1,650. |
| C. Enter 100 \% of tax on 2020 FORM 990-PF | C | 1,650 |  |  |
| D. Required Annual Payment (Smaller of lines B or C) |  |  |  |  |
| E. Income tax withheld (if applicable) |  |  | E | NONE |
| F. Balance (As rounded to the nearest multiple of 4 |  |  | F | 1,652. |


| Record of Estimated Tax Payments |  |  |  |  |
| :--- | ---: | ---: | ---: | ---: |
| Payment number | (a) Date | (b) Amount | (c)2019 overpayment <br> credit applied | (d) Total amount paid and <br> credited (add (b) and (c)) |
| $\mathbf{1}$ | $05 / 17 / 2021$ |  | 413. | 413 |.

```
ESTIMATED PAYMENTS MUST BE MADE USING THE ELECTRONIC FEDERAL TAX
PAYMENTS SYSTEM (EFTPS). THIS WORKSHEET MERELY PROVIDES THE AMOUNTS
WHICH NEED TO BE PAID VIA THE ABOVE METHOD.
```

FEDERAL CAPITAL GAIN DISTRIBUTIONS


LONG-TERM CAPITAL GAIN DISTRIBUTIONS

15\% RATE CAPITAL GAIN DISTRIBUTIONS
DUKE REALTY CORP COM NEW 20.00
MFS INTERNATIONAL DIVERSIFICATION FUND CLASS 832.00
UDR INC COM
159.00

VANGUARD CHARLOTTE FDS INTL BD IDX ETF 93.00

TOTAL 15\% RATE CAPITAL GAIN DISTRIBUTIONS
$1,105.00$
$-=-=-1,105.00$
$==========$

Return of Private Foundation

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

Go to www.irs.gov/Form990PFfor instructions and the latest information.

For calendar year 2020 or tax year beginning
2020, and ending
Name of foundation

MASON AND LULA COLE CHARITABLE TUA 600008015
Number and street (or P.O. box number if mail is not delivered to street address
4804 COURTHOUSE ST. STE 1A
City or town, state or province, country, and ZIP or foreign postal code

## WILLIAMSBURG, VA 23188

G Check all that apply:

| Initial return |  |
| :--- | :--- | :--- |
| Final return |  |
| Address change |  |
|  |  |

Initial return of a former public charity Amended return
Name change
H Check type of organization: X Section 501(c)(3) exempt private foundation
$\square$ Section 4947(a)(1) nonexempt charitable trust $\square$ Other taxable private foundation
I Fair market value of all assets at J Accounting method: X Cash $\quad$ Accrual end of year (from Part II, col. (c), line $\square$ Other (specify) 16) $\$ \quad 4,406,422$.



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

|  | Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return). | 1 | 2,956,043. |
| :---: | :---: | :---: | :---: |
| 2 | Enter amount from Part I, line 27a | 2 | -145,536. |
| 3 | Other increases not included in line 2 (itemize) THROW BACKS 2021 TO 2020 | 3 | 2. |
| 4 | Add lines 1, 2, and 3 | 4 | 2,810,509. |
| 5 | Decreases not included in line 2 (itemize) SEE STATEMENT 16 | 5 | 476. |
|  | Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 | 6 | 2,810,033. |

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

| (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) |  |  |  | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 1 a PUBLICLY TRADED SECURITIES |  |  |  |  |  |
| b |  |  |  |  |  |
| c |  |  |  |  |  |
| d |  |  |  |  |  |
| e |  |  |  |  |  |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) Gain or (loss) <br> ((e) plus (f) minus (g)) |  |  |
| a 848,175. |  | 757,741. |  |  | 90,434. |
| b |  |  |  |  |  |
| c |  |  |  |  |  |
| d |  |  |  |  |  |
| e |  |  |  |  |  |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. |  |  | (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h)) |  |  |
| (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 |  |  |  |
| a |  |  |  |  | 90,434. |
| b |  |  |  |  |  |
| c |  |  |  |  |  |
| d |  |  |  |  |  |
| e |  |  |  |  |  |
| 2 Capital gain net income or (net capital loss) $\left\{\begin{array}{l}\text { If gain, also enter in Part I, line } 7 \\ \text { If (loss), enter -0-in Part I, line } 7\end{array}\right\}$ <br> 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 . |  |  | 2 |  | 90,434. |
|  |  |  | 3 |  |  |

## Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE.

1 Reserved

|  | (a) <br> Reserved | (b) Reserved | (c) Reserved |  | (d) <br> Reserved |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | Reserved |  |  |  |  |
|  | Reserved |  |  |  |  |
|  | Reserved |  |  |  |  |
|  | Reserved |  |  |  |  |
|  | Reserved |  |  |  |  |
| 2 | Reserved |  |  | 2 |  |
| 3 | Reserved |  |  | 3 |  |
| 4 | Reserved |  |  | 4 |  |
| 5 | Reserved |  |  | 5 |  |
| 6 | Reserved |  |  | 6 |  |
| 7 | Reserved |  |  | 7 |  |
| 8 | Reserved | . . . | . . . . | 8 |  |

Form 990-PF (2020)

| VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions) |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 1a Exempt operating foundations described in section 4940(d)(2), check here $\square$ Date of ruling or determination letter: $\qquad$ and enter " $\mathrm{N} / \mathrm{A}$ " on line 1. . . . (attach copy of letter if necessary - see instructions) <br> b Reserved <br> c All other domestic foundations enter $1.39 \%$ of line 27 b. Exempt foreign organizations, enter $4 \%$ of Part I, line 12, col. (b) |  |  |  |  |  |
|  |  |  |  | 1 | 1,650. |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) |  |  |  | 2 | NONE |
|  |  |  |  | 3 | 1,650. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0 -) |  |  |  | 4 | NONE |
|  |  |  |  | 5 | 1,650. |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . . . . . . . . . . <br> 6 Credits/Payments: |  |  |  |  |  |
|  |  |  |  |  |  |
| b Exempt foreign organizations - tax withheld at source. |  | 6b | NONE |  |  |
| c Tax paid with application for extension of time to file (Form 8868) |  | 6c | NONE |  |  |
| d Backup withholding erroneously withheld |  | 6d |  |  |  |
| 7 T | Total credits and payments. Add lines 6a through 6d |  |  | 7 | 2,792. |
| 8 E | Enter any penalty for underpayment of estimated tax. Check here $\square$ if Form 2220 is attached |  |  | 8 |  |
| 9 T | 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 overpaidEnter the amount of line 10 to be: Credited to 2021 estimated tax |  |  | 10 | 1,142. |
|  |  |  | efunded | 11 |  |

## Part VII-A Statements Regarding Activities

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?
b Did it spend more than $\$ 100$ during the year (either directly or indirectly) for political purposes? See the instructions for the definition
If the answer is "Yes" to $\mathbf{1 a}$ or $\mathbf{1 b}$, attach $\mathbf{a}$ detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.
c Did the foundation file Form 1120-POL for this year?

|  | Yes | No |
| :---: | :---: | :---: |
| 1a |  | X |
| 1b |  | X |
| 1 c |  | X |
| 2 |  | X |
| 3 |  | X |
| 4a |  | X |
| 4b |  |  |
| 5 |  | X |
| 6 |  | X |
| 7 | X |  |
| 8b | X |  |
| 9 |  | X |
| 10 |  | X |

JSA
OE1440 1.000

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
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.
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?

|  | Yes | No |
| ---: | ---: | ---: |
|  |  |  |
| 11 |  | $X$ |
| 12 |  | $X$ |
| 13 | $X$ |  | Website address

## N/A

14 The books are in care of CHESAPEAKE TRUST COMPANY Telephone no. (804) 435-4246 Located at P. O. BOX 1419, KILMARNOCK, VA

ZIP $+4-22482$
15 Section $4947(a)(1)$ nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 . check here . . . . . . . . . . . . . . . . . . . . . . 15
16 At any time during calendar year 2020, 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

## 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):
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? $\qquad$
$\square$ Yes
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? $\square$
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?.
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?.

(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? $\square$ Yes
(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.) . $\square$ Yes

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

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 2020?
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(\mathrm{j})(3)$ or $4942(\mathrm{j})(5)$ ):
a At the end of tax year 2020, did the foundation have any undistributed income (Part XIII, lines 6 d and 6 e ) for tax year(s) beginning before 2020? $\square$ Yes
 If "Yes," list the years ,
b Are there any years listed in $2 a$ 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.)
c If the provisions of section $4942(\mathrm{a})(2)$ are being applied to any of the years listed in 2 a , list the years here.
$-$ $\qquad$ , ,
3a Did the foundation hold more than a $2 \%$ direct or indirect interest in any business enterprise at any time during the year?

b If "Yes," did it have excess business holdings in 2020 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 $4943(\mathrm{c})(7)$ ) 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 Form 4720 , Schedule C, to determine if the foundation had excess business holdings in 2020.)
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
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 2020?

## 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:
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? $\qquad$
 X No
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?, . . . . . . . . . . . . . . . . . . . . . . .
(3) Provide a grant to an individual for travel, study, or other similar purposes?
 Yes

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions
 Yes $X$ 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?

b If any answer is "Yes" to 5 a(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 . Organizations relying on a current notice regarding disaster assistance, check here

c If the answer is "Yes" to question $5 \mathrm{a}(4)$, does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? $\qquad$ If "Yes," attach the statement required by Regulations section 53.4945-5(d).
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? $\qquad$
$\qquad$
Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?
$\square$ Yes X No 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? . $\square$ Yes $\quad \mathrm{X}$ No b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? $\qquad$
$\square$ Yes
 No Is the foundation subject to the section 4960 tax on payment(s) of more than $\$ 1,000,000$ in remuneration or excess parachute payment(s) during the year? . . . . . . . . . . . . . . . . . . . Yes $_{\text {X }}^{\text {X }}$ No

|  | Yes | No |
| :--- | :--- | :--- |
|  |  |  |
| 5b |  |  |
|  |  |  |
| 6b |  |  |
|  |  |  |
| 7b |  |  |
|  |  |  |

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

1 List all officers, directors, trustees, and 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 |
| :---: | :---: | :---: | :---: | :---: |
| CHESAPEAKE TRUST COMPANY | TRUSTEE |  |  |  |
| P. O. BOX 1419, KILMARNOCK, VA 22482 | 2 | 48,581. | -0- | -0- |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| 2 Compensation of five highest-paid employees "NONE." | (other than tho | included on lin | 1 - see instruc | If none, enter |
| (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) Contributionsto employee benefit plans and deferred compensation | (e) Expense account, other allowances |
| NONE |  | NONE | NONE | NONE |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Total number of other employees paid over \$50,000 . . . . . . . . . . . . . . . . . . . . . . . . . |  |  |  | NONE |
|  |  |  |  | Form 990-PF (2020) |

## 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 |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| TotaNE |  |  |
|  |  |  |

## 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 | Expenses |
| :--- | :--- | :--- | organizations and other beneficiaries served, conferences convened, research papers produced, etc.

1NONE

2 $\qquad$

3 $\qquad$

4 $\qquad$

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

| Describe the two largest program-relatedinvestments made by the foundation during the tax year on lines 1 and 2. |  |
| :--- | :---: |
| $\mathbf{1 N O N E}$ |  |
|  |  |
|  |  |
| All other program-related investments.See instructions. |  |
| 3NONE |  |
| Total. Add lines 1 through $3 \ldots \ldots$ |  |

JSA
OE1465 1.000

## 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 | $4,001,779$. |
| $\mathbf{1 b}$ | $114,847$. |
| $\mathbf{1 c}$ | NONE |
| $\mathbf{1 d}$ | $4,116,626$. |
|  |  |
| $\mathbf{2}$ | NONE |
| $\mathbf{3}$ | $4,116,626$. |
| $\mathbf{4}$ | $61,749$. |
| $\mathbf{5}$ | $4,054,877$. |
| $\mathbf{6}$ | $202,744$. |


6
202,744.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here $\square$ and do not complete this part.)


## Part XII Qualifying Distributions (see instructions)



## Part XIII Undistributed Income (see instructions)



Form 990-PF (2020)

JSA

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 2020, enter the date of the ruling . . . . . . . . . . . . . .
b Check box to indicate whether the foundation is a private operating foundation described in section $\quad 1 \quad 4942(\mathrm{j})(3)$ or . $\quad$ 4942(j)(5)

| 2a Enter the lesser of the ad- | Tax year | Prior 3 years |  |  | (e) Total |
| :---: | :---: | :---: | :---: | :---: | :---: |
| justed net income from Part | (a) 2020 | (b) 2019 | (c) 2018 | (d) 2017 |  |
| return from Part X for each year listed $\qquad$ |  |  |  |  |  |
| b $85 \%$ of line 2 a |  |  |  |  |  |
| c Qualifying distributions from Part XII, line 4, for each year listed |  |  |  |  |  |
| d Amounts included in line 2 c not used directly for active conduct of exempt activities. |  |  |  |  |  |
| e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2 d from line 2 c |  |  |  |  |  |
| 3 Complete $3 \mathrm{a}, \mathrm{b}$, or c for the alternative test relied upon: . . <br> a "Assets" alternative test - enter: <br> (1) Value of all assets. . . . |  |  |  |  |  |

(2) Value of assets qualifying under section 4942(j)(3)(B)(i). . . . .
b "Endowment" alternative testenter $2 / 3$ of minimum invest ment return shown in Part X , line 6, for each year listed. . .
c
(1) Total support 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) port from organization. an exempt
(4) Gross investment income .

## Part XV Supplementary Information (Complete this part only if the foundation had $\mathbf{\$ 5 , 0 0 0}$ 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).)

$$
\mathrm{N} / \mathrm{A}
$$

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.

## N/A

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:
Check here X 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 Paid during the year |  |  |  |  |
| SEE STATEMENT 27 |  |  |  | 260,100. |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Total . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . ${ }^{\text {a }}$ 3a |  |  |  | 260,100. |



## Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated. | Unrelated business income |  | Excluded by section 512, 513, or 514 |  | (e)Related or exempt <br> function income <br> (See instructions.) |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | (a) <br> Business code | (b) Amount | (c) <br> Exclusion code | (d) Amount |  |
| a |  |  |  |  |  |
| b |  |  |  |  |  |
| c |  |  |  |  |  |
| d |  |  |  |  |  |
| e |  |  |  |  |  |
|  |  |  |  |  |  |
| g Fees and contracts from government agencies |  |  |  |  |  |
| Membership dues and assessments . . . . |  |  |  |  |  |
| 3 Interest on savings and temporary cash investments. |  |  |  |  |  |
| 4 Dividends and interest from securities . . |  |  | 14 | 78,132. |  |
| 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 | 90,434. |  |
| 9 Net income or (loss) from special events . . . |  |  |  |  |  |
| 10 Gross profit or (loss) from sales of inventory. |  |  |  |  |  |
| 11 Other revenue: a |  |  |  |  |  |
| b |  |  |  |  |  |
|  |  |  |  |  |  |
| d |  |  |  |  |  |
|  |  |  |  |  |  |
| 12 Subtotal. Add columns (b), (d), and (e) |  |  |  | 168,566. |  |
| 13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify cal | lations.) |  |  | $\text { . . } 13$ | 168,566. |

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. $\quad$ Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

NOT APPLICABLE

## 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?
a Transfers from the reporting foundation to a noncharitable exempt organization of:
(1) Cash
(2) Other assets.
b Other transactions:
(1) Sales of assets to a noncharitable exempt organization.

|  |  | Yes |
| :---: | :---: | :---: |
|  |  | No |
|  |  |  |
| $1 a(1)$ |  | $X$ |
| $1 a(2)$ |  | $X$ |
|  |  |  |
| $1 b(1)$ |  | $X$ |
| $1 b(2)$ |  | $X$ |
| $1 b(3)$ |  | $X$ |
| $1 b(4)$ |  | $X$ |
| $1 b(5)$ |  | $X$ |
| $1 b(6)$ |  | $X$ |
| $1 c$ |  | $X$ |

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees c
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 ? . . . . . . . . . . . . . . . . . . . . . $\square$ Yes X 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 <br> Here

 Signature of officer or trustee $\frac{10 / 21 / 2021}{\text { Date }}$| Paid <br> Preparer <br> Use Only | Print/Type preparer's nameJAMES T SHORT |  | Preparer's signature | $\begin{aligned} & \text { Date } \\ & 10 / 21 / 2021 \end{aligned}$ |  |  |  |  | $\begin{aligned} & \text { PTIN } \\ & \text { P00272022 } \end{aligned}$ |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Firm's name \THE TAX COMPLEX, LC |  |  |  | Firm's EIN - 54-1757954 |  |  |  |  |  |
|  | Firm's address 1650 WILLOW LAWN DR STE 200 <br>  RICHMOND, VA |  |  |  | Phone no. 804-282-2444 |  |  |  |  |  |

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

DESCRIPTION

AFLAC INC COM
AT\&T INC SR NT 3.875\% DTD 08/18/2011 DUE ABBOTT LABORATORIES COM
ABBVIE INC COM
ALLSTATE CORP COM
AMERICAN EXPRESS CO COM
AMERIPRISE FINL INC COM
AMGEN INC COM
APPLE INC COM
ASSOCIATED BANC CORP SUB GLBL NT 4.25\% D
BCE INC COM NEW
BP PLC SPON ADR
BNSF RAILWAY CO SER 20062 CL 200625.6
BANK OF AMERICA CORP SR GLBL N STP STEP
BARCLAYS BK PLC MTN NT STEP CPN DTD 09/3
BRISTOL MYERS SQUIBB CO COM
BROADRIDGE FINL SOLUTIONS INC COM
CAMPBELL SOUP CO SR NT 3.30\% DTD 03/19/2
CASEYS GEN STORES INC COM
CERNER CORP COM
CHEVRON CORP NEW COM
CITIGROUP GLOBAL MKTS HLDGS IN SR GLBL N
CLOROX CO COM
COCA COLA ENTERPRISES INC SR GLBL DEB 7.
COMCAST CORP CL A
CONAGRA FOODS INC SR NT 3.25\% DTD 09/13/
CROWN CASTLE INTL CORP NEW COM
DANAHER CORP COM
JOHN DEERE CAP CORP CORENOTE P FR 2.50\%
DUKE REALTY CORP COM NEW
DUKE ENERGY CORP NEW SR NT 3.05\% DTD 08/
DUKE ENERGY CORP FR 2.60\% DTD 11/27/2012 CXT390 688J 10/21/2021 13:19:42

REVENUE
AND
EXPENSES
PER BOOKS

NET
INVESTMENT
INCOME
------

| 336. | 336. |
| ---: | ---: |
| 150. | 150. |
| 630. | 630. |
| 1, | 1, |
| 530. | 530. |
| 346. | 346. |
| 510. | 510. |
| 800. | 800. |
| 969. | 969. |
| $1,036$. | $1,036$. |
| $1,490$. | 490. |
| 630. | 630. |
| 194. | 194. |
| 775. | 775. |
| 48. | 48. |
| 864. | 864. |
| 108. | 108. |
| 825. | 825. |
| 17. | 144. |
| 144. | $1,331$. |
| 133. | 563. |
| 563. | 434. |
| 434. | 143. |
| 143. | 578. |
| 578. | 813. |
| 813. | 842. |
| 842. | 67. |
| 67. | 275. |
| 275. | 80. |
| 80. | 405. |
| 405. | 650. |
| 650. |  |

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

DESCRIPTION

EATON VANCE CORP SR GLBL 3.50\% DTD 04/06 ECOLAB INC COM
EXELON CORP COM
FLIR SYS INC SR GLBL NT 3.125\% DTD 06/10 FRESNO CALIF JT PWRS FING AUTH TAXABLE R
GE CAP RETAIL BK UTAH CTF DEP 2.65\% DTD GE CAP RETAIL BK DRAPER UTAH CTF DEP 2.6 GENERAL DYNAMICS CORP COM
GENERAL ELECTRIC CAPITAL CORP VAR RATE D GENTEX CORP COM
GOLDMAN SACHS GRP INC MTN FR 4.00\% DTD 0
HERSHEY CO COM
HOME DEPOT INC COM
HONEYWELL INTERNATIONAL INC COM
HUMANA INC SR NT 3.15\% DTD 12/10/2012 DU
ILLINOIS TOOL WKS INC COM
INGERSOLL RAND GLOBAL HLDG CO SR GLBL NT
INTL PAPER CO SR NT 3.80\% DTD 05/26/2015
INTUIT COM
ISHARES MSCI EMERGING MARKETS ETF
ISHARES MSCI EAFE ETF
ISHARES RUSSELL MID-CAP ETF
ISHARES RUSSELL 2000 ETF
ISHARES U.S. FINANCIALS ETF
ISHARES IBOXX \$ HIGH YIELD CORPORATE BON
JPMORGAN CHASE \& CO COM
JPMORGAN CHASE \& CO SR NT 3.20\% DTD 06/0
JOHNSON \& JOHNSON COM
JPMORGAN CHASE \& CO NT STEP CPN DTD 03/2
JPMORGAN CHASE \& CO FR 2.00\% DTD 06/23/2
L3HARRIS TECHNOLOGIES INC COM
LAUDER ESTEE COS INC CL A
LEIDOS HLDGS INC COM
CXT390 688J 10/21/2021 13:19:42
600008015
REVENUE
AND
EXPENSES PER BOOKS

NET
INVESTMENT
INCOME
$\begin{array}{ll}491 . & 491 . \\ 205 . & 205 . \\ 413 . & 413 .\end{array}$
530 . 530.
$327 . \quad 327$.
$266 . \quad 266$.
129. 129.
864. 864.
$376 . \quad 376$.
762 . 762 .
$494 . \quad 494$.
$120 . \quad 120$.
$363 . \quad 363$.
465. 465.

49 . 49.
118. 118.

1,189. $\quad 1,189$.
3,160. 3,160.
1,515. 1,515.
1,319. 1,319.
2,294. 2,294.
2,940. 2,940.
1,440 . $\quad 1,440$.
$800 . \quad 800$.
$\begin{array}{rr}89 . & -104 . \\ -104 .\end{array}$
197.

680 . 680.
149 . 149 .
224 . 224.

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

DESCRIPTION
LILLY ELI \& CO COM
LOWES COS INC NT 3.12\% DTD 04/23/2012 DU MFS INTERNATIONAL DIVERSIFICATION FUND C MARKETAXESS HLDGS INC COM
MASCO CORP SR GLBL 3.50\% DTD 06/21/2017
MCCORMICK \& CO INC COM NON VTG
MCDONALDS CORP COM
MEDTRONIC INC SR GLBL NT 3.625\% DTD 02/2 MERCK \& CO INC NEW COM
MICROSOFT CORP COM
MISSISSIPPI ST TAXABLE GO BDS 2013A TAXA
MONDELEZ INTL INC COM
FEDERATED HERMES GOVERNMENT
MORGAN STANLEY COM NEW
MOSAIC CO NEW SR NT 4.25\% DTD 11/13/2013
NATIONAL RURAL UTILS COOP FIN FR 3.00\% D
NETAPP INC SR NT 3.25\% DTD 12/12/2012 DU
NEXTERA ENERGY INC COM
NIKE INC SR NT 2.25\% DTD 04/26/2013 DUE
NORFOLK SOUTHERN CORP SR NT 3.25\% DTD 11
NUCOR CORP NT 4.125\% DTD 09/21/2010 DUE
OLD REP INTL CORP SR NT 4.875\% DTD 09/25
ONEOK INC NEW COM
ORACLE CORP COM
PEPSICO INC COM
PROCTER \& GAMBLE CO COM
RENT A CTR INC NEW COM
ROPER TECHNOLOGIES, INC.
RYDER SYS MTN FR 3.45\% DTD 02/24/2016 DU
SPDR PORTFOLIO MORTGAGE BACKED BOND ETF
SCHWAB STRATEGIC TR INTL EQUITY ETF
SELECT SECTOR SPDR TR MATLS
SELECT SECTOR SPDR TR COMMUNICATION SVCS CXT390 688J 10/21/2021 13:19:42

REVENUE
AND
EXPENSES PER BOOKS

NET
INVESTMENT
INCOME
844.
844.
151.
151.

1,147. 1,147.
476 . 476 .
310 . 310.
1,254. 1,254.
$\begin{array}{ll}389 . & 389 . \\ 378 . & 378 .\end{array}$
$1,254 . \quad 1,254$.
690.
620.
338.
560.
479.
450.
112.
616.
218.

1,690.
647.
217.
336.
791.
234.
218.
205.
322.
$\begin{array}{ll}3,737 . & 3,737 . \\ 2,184 . & 2,184 .\end{array}$
299. 299.

339 . 339 .

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES


DESCRIPTION

SHERWIN WILLIAMS CO COM
SOMERSET KY INDPT SCH DIST FIN REV BDS T SOUTHWEST AIRLS CO SR NT 3.00\% DTD 11/04 TEXAS INSTRUMENTS INC COM
TEXTRON INC SR GLBL NT 4.00\% DTD 03/11/2
THERMO FISHER CORP COM
TRACTOR SUPPLY CO COM
UDR INC COM
UGI CORP NEW COM
UNION PAC CORP COM
UNITEDHEALTH GROUP INC COM
VALERO ENERGY CORP NEW COM
VALSPAR CORP SR NT 4.20\% DTD 01/13/2012
VANGUARD CHARLOTTE FDS INTL BD IDX ETF
VERIZON COMMUNICATIONS INC COM
VIRGINIA ST HSG DEV AUTH RENTAL HSG BDS
VISA INC COM CL A
WALMART INC.
WAL MART STORES INC NT 3.25\% DTD 10/25/2
WASHINGTON REAL ESTATE INVT TR SR NT 3.9
WASTE MANAGEMENT INC COM
WELLS FARGO \& CO NEW SR GLBL NT 3.00\% DT
WENDYS CO COM
WEYERHAEUSER CO DEB 6.875\% DTD 12/17/200
WINGSTOP INC COM
XCEL ENERGY INC COM
MEDTRONIC PLC SHS
TOTAL

| REVENUE |  |
| :---: | :---: |
| AND | NET |
| EXPENSES | INVESTMENT |
| PER BOOKS | INCOME |
| 247. | 247. |
| 1,266. | 1,266. |
| 750. | 750. |
| 879. | 879. |
| 1,000. | 1,000. |
| 136. | 136. |
| 62. | 62. |
| 555. | 555. |
| 393. | 393. |
| 776. | 776. |
| 510. | 510. |
| 784. | 784. |
| 195. | 195. |
| 575. | 575. |
| 742. | 742. |
| 38. |  |
| 184. | 184. |
| 247. | 247. |
| 1,602. | 1,602. |
| 442. | 442. |
| 627. | 627. |
| 450. | 450. |
| 312. | 312. |
| 1,489. | 1,489. |
| 128. | 128. |
| 580. | 580. |
| 582. | 582. |
| 78,132. | 78,094. |

FORM 990PF, PART I - ACCOUNTING FEES
$================================$

| DESCRIPTION | REVENUE <br> AND <br> EXPENSES <br> PER BOOKS | $\begin{gathered} \text { NET } \\ \text { INVESTMENT } \\ \text { INCOME } \end{gathered}$ | $\begin{aligned} & \text { ADJUSTED } \\ & \text { NET } \\ & \text { INCOME } \end{aligned}$ | CHARITABLE <br> PURPOSES |
| :---: | :---: | :---: | :---: | :---: |
| TAX PREPARATION FEE (NON-ALLOC | 600. |  |  | 600. |
| TOTALS | 600. | NON | NONE | 600. |

FORM 990PF, PART I - OTHER PROFESSIONAL FEES
$========================================$

| DESCRIPTION | $\begin{aligned} & \text { REVENUE } \\ & \text { AND } \\ & \text { EXPENSES } \\ & \text { PER BOOKS } \end{aligned}$ | $\begin{gathered} \text { NET } \\ \text { INVESTMENT } \\ \text { INCOME } \end{gathered}$ |
| :---: | :---: | :---: |
| INVESTMNT MNGMNT FEES (NON-DED | 6. | 6. |
| TOTALS | 6. | 6. |

FORM 990PF, PART I - TAXES


DESCRIPTION

FOREIGN TAXES
FEDERAL TAX PAYMENT - PRIOR YE FEDERAL ESTIMATES - PRINCIPAL FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED

TOTALS

REVENUE
AND
EXPENSES PER BOOKS

NET

## INVESTMENT

 INCOME---_--


MASON AND LULA COLE CHARITABLE TUA 600008015
FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS
$===============================================1$

## DESCRIPTION

MISSISSIPPI ST TAXABLE GO BDS
VA ST HSG DEV AUTH 2018 A 2.7\%

| ENDING | ENDING |
| :---: | :---: |
| BOOK VALUE | FMV |
| 20,000. | 21,222. |
| 21,535. | 21,919. |
| 41,535. | 43,141. |

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

AFLAC INC
ABBOTT LABS
ALLSTATE CORP
AMGEN INC
CERNER CORP
CLOROX CO DEL
GENERAL DYNAMICS CORP
ILLINOIS TOOL WORKS INC
ISHARES TR US FINL ETF
ISHARES MSCI EAFE
JOHNSON \& JOHNSON
MCDONALDS CORP
MICROSOFT CORP
PROCTER \& GAMBLE CO
VALERO ENERGY CORP NEW
VERIZON COMMUNICATIONS
FISERV INC
NEXTERA ENERGY INC COMMON
TEXAS INSTRUMENTS INC
UNION PACIFIC CORP
ORACLE CORP
UNITEDHEALTH GRP INC
UGI CORP
JPMORGAN CHASE \& CO
APPLE INC
ABBVIE INC
WAL-MART STORES INC
CHEVRON CORP
AMERIPRISE FINANCIAL

ENDING
BOOK VALUE
ENDING
FMV

| $6,216$. | $13,341$. |
| ---: | ---: |
| $8,338$. | $43,796$. |
| $2,083$. | $9,674$. |
| $5,954$. | $28,740$. |
| $3,657$. | $15,696$. |
| $5,059$. | $20,192$. |
| $8,932$. | $29,764$. |
| $3,932$. | $15,291$. |
| $38,211$. | $133,540$. |
| $79,319$. | $138,624$. |
| $6,513$. | $15,738$. |
| $5,630$. | $21,458$. |
| $15,848$. | $133,452$. |
| $4,344$. | $10,436$. |
| $2,952$. | $11,314$. |
| $8,380$. | $17,625$. |
| $2,553$. | $22,772$. |
| $5,826$. | $33,946$. |
| $4,922$. | $32,826$. |
| $8,405$. | $14,644$. |
| $5,837$. | $17,531$. |
| $6,636$. | $10,488$. |
| $5,856$. | $50,828$. |
| $14,419$. | $159,228$. |
| $24,959$. | $32,145$. |
| $6,781$. | $16,577$. |
| $6,992$. | $23,815$. |
| $26,188$. | $9,717$. |
| $4,950$. |  |

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

ISHARES RUSSELL 2000 ETF
ISHARES RUSSELL MID CAP ETF
SCHWAB INTERNATIONAL EQUITY ET
ISHARES IBOXX HIGH YIELD BOND
BURLINGTON STORES INC COM
HONEYWELL INTL INC
ISHARES EMERGING MARKETS ETF
L3 TECHNOLOGIES INC COM
LAZARD INTL STRATEGIC EQUITY O
MORGAN STANLEY COM NEW
PEPSICO INC
VANGUARD CHARLOTTE FDS INTL BD
WENDYS CO COM
WINGSTOP INC COM
LAUDER ESTEE COS INC CL A
LILLY ELI \& CO COM
THERMO FISHER CORP COM
VMWARE INC CL A COM
ZEBRA TECHNOLOGIES CORP CL A
ALPHABET INC CAP STK CL A
DISCOVERY INC COM SER A
SELECT SECTOR SPDR TR COMMUNIC
CROWN CASTLE INTL CORP NEW COM
UDR INC COM
MEDTRONIC PLC SHS
SPOTIFY TECHNOLOGY S A SHS
ADOBE INC
AMAZON.COM INC COM
AMERICAN EXPRESS CO COM

ENDING
BOOK VALUE
ENDING
FMV

| $36,914$. | $126,459$. |
| ---: | ---: |
| $26,992$. | $118,592$. |
| $76,576$. | $95,643$. |
| $60,134$. | $62,769$. |
| $8,910$. | $26,155$. |
| $13,222$. | $21,270$. |
| $58,360$. | $69,755$. |
| $5,613$. | $37,804$. |
| $18,054$. | $27,412$. |
| $23,324$. | $29,660$. |
| $55,624$. | $61,068$. |
| $8,795$. | $10,960$. |
| $8,839$. | $19,883$. |
| $10,994$. | $26,619$. |
| $16,340$. | $40,690$. |
| $41,126$. | $74,525$. |
| $18,903$. | $19,636$. |
| $17,137$. | $38,433$. |
| $32,110$. | $52,579$. |
| $32,698$. | $50,273$. |
| $30,324$. | $41,389$. |
| $13,597$. | $17,571$. |
| $14,000$. | $34,613$. |
| $26,105$. | $47,511$. |
| $46,654$. | $81,423$. |
| $11,871$. | $12,091$. |

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

ENDING
BOOK VALUE
ENDING
FMV

BCE INC COM NEW
BP PLC SPON ADR
BRISTOL MYERS SQUIBB CO COM
BROADRIDGE FINL SOLUTIONS INC
COMCAST CORP CL A
DANAHER CORP COM
ECOLAB INC COM
EXELON CORP COM
FAIR ISAAC CORP COM
GENTEX CORP COM
HERSHEY CO COM
INTUIT COM
KEYSIGHT TECHNOLOGIES INC COM
KINDER MORGAN INC DEL COM
MARKETAXESS HLDGS INC COM
MASIMO CORP COM
MCCORMICK \& CO INC COM NON VTG
MERCK \& CO INC NEW COM
MONDELEZ INTL INC COM
ONEOK INC NEW COM
PAYPAL HLDGS INC COM
RENT A CTR INC NEW COM
ROPER TECHNOLOGIES, INC.
SELECT SECTOR SPDR TR MATLS
SERVICENOW INC COM
SHERWIN WILLIAMS CO COM
TWILIO INC CL A
TWITTER INC COM
VISA INC COM CL A

| $22,638$. | $29,774$. |
| ---: | ---: |
| $27,818$. | $33,641$. |
| $12,992$. | $21,103$. |
| $11,972$. | $14,063$. |
| $12,140$. | $20,442$. |
|  |  |
| $25,516$. | $39,884$. |
| $17,073$. | $24,437$. |
| $26,125$. | $18,796$. |
| $5,841$. | $11,411$. |
| $6,902$. | $23,900$. |
| $11,643$. | $12,679$. |
| $13,016$. | $30,989$. |
| $27,677$. | $53,866$. |
| $25,296$. | $32,763$. |
| $26,752$. | $17,374$. |
| $11,765$. | $52,291$. |
| $25,264$. | $33,806$. |
| $19,899$. | $33,850$. |
| $13,248$. | $27,341$. |
| $23,865$. | 3, |
| $20,316$. |  |

MASON AND LULA COLE CHARITABLE TUA 600008015
FORM 990PF, PART II - CORPORATE STOCK


## DESCRIPTION

WASTE MANAGEMENT INC COM
XCEL ENERGY INC COM
ALIBABA GROUP HLDG LTD SPON AD
CASEYS GEN STORES INC
DUKE REALTY CORP COM NEW
ETSY INC COM
FACEBOOK INC CL A
HOME DEPOT INC COM
LULULEMON ATHLETICA INC COM
MFS INTL DIVERSIFICATION FUND
MATCH GROUP INC NEW COM
TRACTOR SUPPLY CO COM
ZYNGA INC CL A

| ENDING | ENDING |
| :---: | :---: |
| BOOK VALUE | FMV |
| 24, 050. | 25,945. |
| 21,853. | 24,335. |
| 22,539. | 17,687. |
| 9,612. | 9,467. |
| 16,560. | 16,907. |
| 22,579. | 28,644. |
| 28,051. | 34,418. |
| 22,475. | 21,250. |
| 22,636. | 23,318. |
| 94,685. | 112,427. |
| 13,099. | 17,387. |
| 22,575. | 21,649. |
| 13,068. | 13,325. |
| 1,764,448. | 3, 314, 282 . |

FORM 990PF, PART II - CORPORATE BONDS

DESCRIPTION

AT\&T INC 3.875\% 8/15/21
DUKE ENGY CORP 3.05\% 8/15/22
WAL MART STORES 3.25\%10/25/20
NUCOR 4.125\% 9/15/22
HUMANNA INC 3.15\% 12/1/22
LOWES CO 3.12\% 4/15/22
NIKE INC 2.25\% 5/01/23
GENERAL ELECTRIC VAR 20 4/15/2
NORFOLK SOUTHERN 3.25\% 12/01/2
OLD REPUBLIC INTL CORP 4.875\%
BARCLAYS BANK PLC 4\% 9/30/25
BNSF RAILWAY CO 5.629\% REMIC 4
GOLDMAN SACHS GROUP 4\% 8/15/21
WELLS FARGO \& CO NEW SR GLBL N
CAMPBELL SOUP CO 3.3\% 3/19/25
COCA COLA ENT 7\% 10/01/26
CONAGRA FOODS IN 3.25\% 9/15/22
DUKE ENGY CORP 2.6\% 12/15/22
JPMORGAN CHASE \& STEP DUE 3/29
MEDTRONIC INC 3.625\% DUE 3/15/
WEYERHAEUSER CO 6.875\% 12/15/3
EATON VANCE CORP 3.5\% DUE 4/6/
JPMORGAN CHASE CO 3.200\% 6/15/
SOUTHWEST AIRLINES CO 3.000\% 1
ASSOCIATED BANC CORP SUB GLBL
FLIR SYS INC SR GLBL NT 3.125\%
TEXTRON INC SR GLBL NT $4.00 \%$ D
BANK OF AMERICA CORP SR GLBL N
JOHN DEERE CAP CORP CORENOTE P

ENDING
BOOK VALUE
ENDING
FMV

15,104. 15,539.

15,016. 15,667.
5,008. 5,146.
10,018. 10,416.
51,746. 52,959.
5,109. 5,701.
20,100. 23,527.
3,246. 3,139.
20,025. 20,127.
14,972. 16,509.
24,859. 27,375.
24,400. 26,142.
24,613. 25,574.
52,215. 50,255 .
27,982. 35,856 .
24,839. 27,959.
24,656. 26,657.
25,117. 27,089.
24,944.
28,186.

MASON AND LULA COLE CHARITABLE TUA 600008015
FORM 990PF，PART II－CORPORATE BONDS
＝ニーニーニーーニーニーニーーニーニーニーニーニーニ

## DESCRIPTION

FRESNO CALIF JT PWRS FING AUTH NATIONAL RURAL UTILS COOP FIN NETAPP INC SR NT 3．25\％DTD 12／ SPDR PORTFOLIO MORTGAGE BACKED SOMERSET KY INDPT SCH DIST FIN CITIGROUP GLOBAL MKTS HLDGS SR INGERSOLL RAND GLOBAL HLDG CO INTL PAPER CO SR NT 3．8\％DTD 0 JPMORGAN CHASE \＆CO FR 2\％DTD MASCO CORP SR GLBL 3．5\％DTD 06 MOSAIC CO NEW SR NT 4．25\％DTD RYDER SYS MTN FR 3．45\％DTD 02／ VALSPAR CORP SR NT 4．2\％DTD 01 WASHINGTON REAL ESTATE INVT TR

|  | ENDING | ENDING |
| :---: | :---: | :---: |
|  | BOOK VALUE | FMV |
|  | 10，093． | 10，754． |
|  | 14，588． | 16，135． |
|  | 5，100． | 5，209． |
|  | 188，090． | 192，206． |
|  | 51， 003. | 50，796． |
|  | 50，000． | 49，695． |
|  | 5，309． | 5，455． |
|  | 27，168． | 28，326． |
|  | 20，000． | 20，089． |
|  | 25，000． | 28，309． |
|  | 25，478． | 27，287． |
|  | 14，871． | 15，356． |
|  | 30，404． | 30，881． |
|  | 25，000． | 26，011． |
| TOTALS | 906， 073. | 950，332． |

MASON AND LULA COLE CHARITABLE TUA 600008015
FORM 990PF, PART II - OTHER INVESTMENTS
$====================================$

DESCRIPTION

GE CAP RETAIL BK UTAH CTF DEP
GE CAP RETAIL BK DRAPER UTAH C

| COST/ |  |  |
| :---: | :---: | :---: |
| FMV | ENDING | ENDING |
| C OR F | BOOK VALUE | FMV |
| C | 9,875. | 10,381. |
| C | 5,007. | 5,191. |
| S | 14,882. | 15,572. |

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES $=================================================================$
177.

THROW BACKS 2020 TO 2019
299.

TOTAL
476.

RECIPIENT NAME:
CAMP KEKOKA
ADDRESS:
1083 BOYS CAMP RD
Kilmarnock, VA 22482
RELATIONSHIP: NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC


RECIPIENT NAME:
HEALTHY HARVEST FOOD BANK
ADDRESS:
5116 RICHMOND RD
Warsaw, VA 22572
RELATIONSHIP: NONE
PURPOSE OF GRANT: SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ........................................................ 15,000.

RECIPIENT NAME:
LANCASTER VA HISTORICAL SOCIETY
ADDRESS:
8346 MARY BALL RD
Lancaster, VA 22503
RELATIONSHIP: NONE
PURPOSE OF GRANT: SUPPORT
FOUNDATION STATUS OF RECIPIENT: PC


RECIPIENT NAME:
YMCA OF THE NORTHERN NECK
ADDRESS:
39 WILLIAM B GRAHAM CT
Kilmarnock, VA 22482
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ......................................................... 5,000.

RECIPIENT NAME:
LANCASTER COUNTY VA EDUCATION FDN
ADDRESS:
PO BOX 928
KILMARNOCK, VA 22482
RELATIONSHIP: NONE
PURPOSE OF GRANT:
SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ........................................................ 10,000.

RECIPIENT NAME:
SHIRLEY PERKINS MEMORIAL FUND
FOR ANIMALS
ADDRESS:
810 GRIFFINS LANDING RD
LANCASTER, VA 22503
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ......................................................... 2,000.

RECIPIENT NAME:
BOYS AND GIRLS CLUB OF THE
NORTHERN NECK
ADDRESS:
P O BOX 564
KILMARNOCK, VA 22482
RELATIONSHIP: NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ........................................................ 20,000.

RECIPIENT NAME:
LEGAL AID WORKS
ADDRESS:
500 LAFAYETTE BOULEVARD
FREDERICKSBURG, VA 22401
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ........................................................... 5,000.

RECIPIENT NAME:
SMITH POINT SEA RESCUE INC
ADDRESS:
P O BOX 662
BURGESS, VA 22432
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ......................................................... 14,000.

RECIPIENT NAME:
PARTNERS FOR LANCASTER COUNTY
SCHOOLS FDN
ADDRESS:
P. O. BOX 144

IRVINGTON, VA 22480
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
EDUCATIONAL
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ........................................................ 5,000.

RECIPIENT NAME:
NORTHERN NECK LAND CONSERVANCY
ADDRESS:
PO BOX 125
LANCASTER, VA 22503
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE PURPOSES
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID
4,000.

RECIPIENT NAME:
LANCOVA PARTNERS FOR PETS INC DBA
NORTHERN NECK PARTNERS FOR PETS
ADDRESS:
PO BOX 361
IRVINGTON, VA 22480
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ...................................................... 5,000.

RECIPIENT NAME:
THE LANCASTER PLAYERS INC
C/O BEN ESTES
ADDRESS:
320 OVERLOOK COURT
LANCASTER, VA 22503
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ........................................................ 8,000.

RECIPIENT NAME:
RAPPAHANNOCK COMM COLLEGE EDUCATIONAL FN
ADDRESS:
P.O. BOX 923

WARSAW, VA 22572
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
EDUCATIONAL
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID
6,000.

RECIPIENT NAME:
LANCASTER/NORTHUMBERLAND
INTERFAITH SERVICE COUNCIL INC
ADDRESS:
P. O. BOX 868

KILMARNOCK, VA 22482
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ...................................................... 6,000.

RECIPIENT NAME:
THE LINK
ADDRESS:
P.O. BOX 443

Sterling, VA 20167-0443
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ......................................................... 6,000.

RECIPIENT NAME:
THE RWC FOUNDATION
ADDRESS:
132 LANCASTER DRIVE
IRVINGTON, VA 22480
RELATIONSHIP: NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ........................................................ 10,000.

RECIPIENT NAME:
HAMPDEN SYDNEY COLLEGE
ADDRESS:
BOX 637
HAMPDEN SYDNEY, VA 23943
RELATIONSHIP: NONE
PURPOSE OF GRANT:
GENERAL SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ....................................................... 10,000.

RECIPIENT NAME:
LANCASTER COMMUNITY LIBRARY
ADDRESS:
235 SCHOOL STREET
KILMARNOCK, VA 22482
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT: PC

```
AMOUNT OF GRANT PAID
    6,000.
```

RECIPIENT NAME: CHESAPEAKE ACADEMY INC
ADDRESS:
107 STEAMBOAT ROAD
IRVINGTON, VA 22480
RELATIONSHIP: NONE
PURPOSE OF GRANT:
EDUCATIONAL
FOUNDATION STATUS OF RECIPIENT:
PC

```
AMOUNT OF GRANT PAID
6,500.
```

RECIPIENT NAME:
WESTMORELAND PLAYERS
ADDRESS:
PO BOX 253
CALLAO, VA 22435
RELATIONSHIP: NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . 15, 000.

```
RECIPIENT NAME:
    RAPPAHANNOCK ART LEAGUE INC
ADDRESS:
    19 N MAIN STREET
    KILMARNOCK, VA 22482
RELATIONSHIP:
    NONE
PURPOSE OF GRANT:
    CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
    PC
```



```
RECIPIENT NAME:
    RAPPAHANNOCK FOUNDATION FOR THE ARTS
ADDRESS:
    708 RAPPAHANNOCK DRIVE
    White Stone, VA 22578
RELATIONSHIP:
    NONE
PURPOSE OF GRANT:
    CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
    PC
AMOUNT OF GRANT PAID ...........................................................000.
RECIPIENT NAME:
    DREAM FIELDS DBA YOUTH CLUB
    OF LANCASTER COUNTY
ADDRESS:
    PO BOX 1491
    KILMARNOCK, VA 22482
RELATIONSHIP:
    NONE
PURPOSE OF GRANT:
    CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
    PC
AMOUNT OF GRANT PAID ............................................................000.
```

RECIPIENT NAME:
Northern Neck - Middlesex Free Health
Clinic
ADDRESS:
P.O. BOX 1694

Kilmarnock, VA 22482
RELATIONSHIP: NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ........................................................ 20,000.

RECIPIENT NAME:
NORTHERN NECK ORCHESTRA
ADDRESS:
P O BOX 263
KILMARNOCK, VA 22482
RELATIONSHIP: NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ........................................................... 5,000.

RECIPIENT NAME:
THE HAVEN SHELTER AND SERVICES INC.
ADDRESS:
P. O. BOX 1267

WARSAW, VA 22572
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ......................................................... 10,000.

RECIPIENT NAME:
RAPPAHANNOCK CONCERT ASSOCIATION
ADDRESS:
201 ACADEMIC LN
Heathsville, VA 22473
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
SUPPORT
FOUNDATION STATUS OF RECIPIENT:
PC

```
AMOUNT OF GRANT PAID
4, 000 .
```

RECIPIENT NAME:
NORTHERN NECK CASA
ADDRESS:
PO BOX 695
LANCASTER, VA 22503
RELATIONSHIP: NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ........................................................ 3,000.

RECIPIENT NAME:
FRIENDS OF THE NORTHUMBERLAND COUNTY
ANIMAL SHELTER
ADDRESS:
PO BOX 603
BURGESS, VA 22432
RELATIONSHIP: NONE
PURPOSE OF GRANT: SUPPORT
FOUNDATION STATUS OF RECIPIENT: PC
AMOUNT OF GRANT PAID ........................................................ 3,000.

## RECIPIENT NAME:

NORTHERN NECK SAIL AND POWER SQUADRON
ADDRESS:
2949 HARRY HOGAN ROAD
CALLAO, VA 22435
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ................................................................ 3,600.

RECIPIENT NAME:
GARFIELD'S RESCUE INC
ADDRESS:
PO BOX 257
KILMARNOCK, VA 22482
RELATIONSHIP: NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ......................................................... 4,000.

RECIPIENT NAME:
BAY TRIANGLE TRAIL
ADDRESS:
PO BOX 300
IRVINGTON, VA 22480
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
PC
AMOUNT OF GRANT PAID ........................................................... 8,000.

TOTAL GRANTS PAID:

Did you dispose of any investment(s) in a qualified opportunity fund during the tax year?

Note: Form 5227 filers need to complete only Parts I and II.

## Part I Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions)



Part II Long-Term Capital Gains and Losses - Generally Assets Held More Than One Year (see instructions)
See instructions for how to figure the amounts to enter on the lines below.

This form may be easier to complete if you round off cents to whole dollars.

| 8a | Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 8b | Totals for all transactions reported on Form(s) 8949 with Box D checked |  |  |  |  |
| 9 | Totals for all transactions reported on Form(s) 8949 with Box E checked |  |  |  |  |
| 10 | Totals for all transactions reported on Form(s) 8949 with Box F checked | 726,409. | 625,106. |  | 101, 303. |
| 11 | Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 |  |  | 11 |  |
| 12 | Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts. |  |  | 12 |  |
| 13 | Capital gain distributions. |  |  | 13 | 1,160 |
| 14 | Gain from Form 4797, Pa |  |  | 14 |  |
| 15 | Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2019 Capital Loss Carryover Worksheet . |  |  | 15 | 1 |
| 16 | Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on line 18a, column (3) on the back |  |  | 16 | 102,463. |



Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Schedule A (Form 990-T), Part l, line 4a). If lines 18a and 19, column (2), are net gains, go to Part V, and don't complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary.

## Part IV Capital Loss Limitation

20 Enter here and enter as a (loss) on Form 1041, line 4 (or Schedule A (Form 990-T), Part I, line 4c, if a trust), the smaller of:
a The loss on line 19, column (3) or b \$3,000 . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . 20 (
Note: If the loss on line 19, column (3), is more than $\$ 3,000$, or if Form 1041, page 1, line 23 (or Form 990-T, Part 1, line 11), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover.

## Part V Tax Computation Using Maximum Capital Gains Rates

Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line $2 b(2)$, and Form 1041, line 23, is more than zero.
Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions if:

- Either line 18b, col. (2) or line 18c, col. (2) is more than zero, or
- Both Form 1041, line 2b(1), and Form 4952, line $4 g$ are more than zero.

Form 990-T trusts. Complete this part only if both lines 18 a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, Part I, line 11, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 18b, col. (2) or line 18c, col. (2) is more than zero.
45 Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, Part I, line 1a (or Form 990-T, Part II, line 2).
21 Enter taxable income from Form 1041, line 23 (or Form 990-T, Part I, line11)
22 Enter the smaller of line 18a or 19 in column (2) but not less than zero
23 Enter the estate's or trust's qualified dividends from Form 1041, line $2 b(2)$ (or enter the qualified dividends included in income in Part I of Form 990-T) . .
24 Add lines 22 and 23
25 If the estate or trust is filing Form 4952, enter the amount from line 4 g ; otherwise, enter $-0-\ldots$
26 Subtract line 25 from line 24. If zero or less, enter -0-
27 Subtract line 26 from line 21. If zero or less, enter -0-
28 Enter the smaller of the amount on line 21 or \$2,650
29 Enter the smaller of the amount on line 27 or line 28
30 Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0\%
31 Enter the smaller of line 21 or line 26
32 Subtract line 30 from line 26
33 Enter the smaller of line 21 or $\$ 13,150$
34 Add lines 27 and 30
35 Subtract line 34 from line 33 . If zero or less, enter -0-
36 Enter the smaller of line 32 or line 35.
37 Multiply line 36 by $15 \%$ ( 0.15 )
38 Enter the amount from line 31
39 Add lines 30 and 36
40 Subtract line 39 from line 38 . If zero or less, enter -0-
41 Multiply line 40 by $20 \%$ ( 0.20 ).
42 Figure the tax on the amount on line 27. Use the 2020 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041).
43 Add lines 37, 41, and 42
44 Figure the tax on the amount on line 21. Use the 2020 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)


| $0 \%$ | $\ldots . .$. |
| :---: | :---: |
| 31 |  |
| 32 |  |

30

| 31 |  |
| :--- | :--- |
| 32 |  |
| 33 |  |
| 34 |  |
| 35 |  |
| 36 |  |


| 38 | $\cdots \cdots$ |
| :--- | :--- |
| 39 |  |
| 40 |  |


| 42 |  |
| :---: | :---: |
| 43 |  |
| 44 |  |

- Go to www.irs.gov/Form8949for instructions and the latest information.

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.
Attachment
Attachment
Sequence No. 12A Name(s) shown on return

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.
Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.
Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).
You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

| (a) | (b) <br> Date acquired | (c) Date sold or | (d) Proceeds | (e) Cost or other basis. See the Note below See the Note below | $\begin{array}{r} \text { Adjustment, if } \\ \text { If you enter an a } \\ \text { enter a coo } \\ \text { See the sepa } \end{array}$ | y, to gain or loss unt in column (g) in column (f). e instructions. | h) <br> Gain or (loss). Subtract column (e) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| (Example: 100 sh. XYZ Co.) | (Mo., day, yr.) | disposed of (Mo., day, yr.) | ${ }_{\text {(sales price) }}^{\text {(seei instuctions) }}$ | and see Column (e) instructions | $\begin{gathered} \text { (f) } \\ \begin{array}{c} \text { Codest from } \\ \text { instructions } \end{array} \end{gathered}$ | (g) <br> Amount of adjustment | from column (d) and combine the result with column $(\mathrm{g})$ with column (g) |
| 50000. BANK OF AMERICA COR STP STEP CPN DTD 06/25/ | 06/26/2019 | 06/26/2020 | 50,000.00 | 50,000.00 |  |  |  |
| 200. BROADRIDGE FINL SOLUT | 05/23/2019 | 02/06/2020 | 24,066.00 | 24,552.00 |  |  | -486.00 |
| 15. FAIR ISAAC CORP COM | 10/08/2019 | 10/07/2020 | 6,644.00 | 4,553.00 |  |  | 2,091.00 |
| 220. LEIDOS HLDGS INC COM | 02/06/2020 | 10/07/2020 | 19,366.00 | 24,418.00 |  |  | -5,052.00 |
| 175. ONEOK INC NEW COM | 10/08/2019 | 10/07/2020 | 4,795.00 | 11,525.00 |  |  | -6,730.00 |
| 750. Rent a CTR InC New Co | 05/22/2019 | 05/07/2020 | 15,735.00 | 17,587.00 |  |  | -1,852.00 |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line $\mathbf{3}$ (if Box $\mathbf{C}$ above is checked) |  |  | 120,606. | 132,635. |  |  | -12,029. |

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column ( g ) to correct the basis. See Column $(g)$ in the separate instructions for how to figure the amount of the adjustment.

MASON AND LULA COLE CHARITABLE TUA 600008015
26-6779458
Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.
Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.
Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

| (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) <br> (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS <br> (F) Long-term transactions not reported to you on Form 1099-B |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 1 <br> (a) <br> Description of property (Example: 100 sh. XYZ Co.) | (b) <br> Date acquired (Mo., day, yr.) | (c) Date sold or disposed of (Mo., day, yr.) | (d) <br> Proceeds (sales price) (see instructions) | (e) <br> Cost or other basis See the Note below and see Column (e) in the separate instructions | Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions. |  | (h) <br> Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g) |
|  |  |  |  |  | (f) <br> Code(s) from instructions | (g) <br> Amount of adjustment |  |
| 5000. AT\&T INC SR NT 3.875 08/18/2011 DUE 08/15/20 | 01/21/2014 | 06/29/2020 | 5,194.00 | 5,025.00 |  |  | 169.00 |
| 50. ABBOTT LABORATORIES CO | 04/09/2009 | 10/07/2020 | 5,393.00 | 1,042.00 |  |  | 4,351.00 |
| 162. ALLSTATE CORP COM | 04/01/2010 | 10/07/2020 | 15,135.00 | 5,142.00 |  |  | 9,993.00 |
| 135. AMERICAN EXPRESS CO C | 05/23/2019 | 10/07/2020 | 13,859.00 | 16,026.00 |  |  | -2,167.00 |
| 100. AMERIPRISE FINL INC C | 04/21/2016 | 10/07/2020 | 16,308.00 | 10,707.00 |  |  | 5,601.00 |
| 610. BCE INC COM NeW | 05/22/2019 | 10/07/2020 | 25,364.00 | 27,743.00 |  |  | -2,379.00 |
| 400. BP PLC SPON ADR | 05/23/2019 | 10/07/2020 | 6,728.00 | 17,082.00 |  |  | -10,354.00 |
| $\begin{array}{r}950.34 \text { BNSF RAILWAY CO SER } \\ 200625.629 \% \text { DTD 08/09 } \\ \hline\end{array}$ | 12/08/2014 | 04/01/2020 | 950.00 | 1,041.00 |  |  | -91.00 |
| $\begin{array}{r} .95 \text { BNSF RAILWAY CO SER } 20 \\ 25.629 \% \text { DTD 08/09/2006 } \\ \hline \end{array}$ | 12/08/2014 | 10/01/2020 | 1.00 | 1.00 |  |  |  |
| 60. BURLINGTON STORES INC | 10/18/2017 | 10/07/2020 | 13,134.00 | 5,346.00 |  |  | 7,788.00 |
| 5000. COCA COLA ENTERPRISE GLBL DEB 7.00\% DTD 09/3 | 08/27/2015 | 05/20/2020 | 6,275.00 | 5,813.00 |  |  | 462.00 |
| 15000. JOHN DEERE CAP CORP FR 2.50\% DTD 01/16/2014 | 01/14/2019 | 01/15/2020 | 14,912.00 | 14,912.00 |  |  |  |
| 1165. DISCOVERY INC COM SE | 12/06/2018 | 10/07/2020 | 25,583.00 | 33,633.00 |  |  | -8,050.00 |
| $\begin{array}{r}\text { 25000. EATON VANCE CORP SR } \\ \text { DTD } 04 / 06 / 2017 \text { DUE 04/0 } \\ \hline\end{array}$ | 04/07/2017 | 04/29/2020 | 26,750.00 | 25,086.00 |  |  | 1,664.00 |
| 2 Totals. Add the amounts in co negative amounts). Enter each Schedule D, line 8b (if Box D above is checked), or line 10 | d), (e), (g), and here and incl is checked), line $F$ above is ch | (h) (subtract de on your 9 (if Box E cked) |  |  |  |  |  |

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

JSA
0X2616 2.000

MASON AND LULA COLE CHARITABLE TUA 600008015
26-6779458
Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.
Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.
Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

|  | (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) |
| :--- | :--- |
|  | (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS |
| X | (F) Long-term transactions not reported to you on Form 1099-B |


| (a) <br> Description of property (Example: 100 sh. XYZ Co.) | (b) <br> Date acquired (Mo., day, yr.) | (c) <br> Date sold or disposed of (Mo., day, yr.) | (d) <br> Proceeds (sales price) (see instructions) | (e) <br> Cost or other basis. See the Note below and see Column (e) in the separate instructions | Adjustment, if any, to gain or loss.If you enter an amount in column (g), enter a code in column (f). See the separate instructions. |  | (h) <br> Gain or (loss). Subtract column (e) from column (d) and combine the result with column (g) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  | (f) <br> Code(s) from instructions | (g) <br> Amount of adjustment |  |
| 44. ECOLAB INC COM |  |  |  |  |  |  |  |
|  | 05/22/2019 | 10/07/2020 | 8,818.00 | 8,104.00 |  |  | 714.00 |
| 360. EXELON CORP COM |  |  |  |  |  |  |  |
|  | 05/22/2019 | 10/07/2020 | 13,475.00 | 17,744.00 |  |  | -4,269.00 |
| 25000. FLIR SYS INC SR GLB |  |  |  |  |  |  |  |
| 20000. GENERAL ELECTRIC CA |  |  |  |  |  |  |  |
| 1060. GENTEX CORP COM |  |  |  |  |  |  |  |
|  | 05/22/2019 | 10/07/2020 | 28,814.00 | 23,477.00 |  |  | 5,337.00 |
| 210. HERSHEY CO COM |  |  |  |  |  |  |  |
|  | 05/22/2019 | 10/07/2020 | 29,809.00 | 27,649.00 |  |  | 2,160.00 |
| 6811.989 LAZARD INTERNATIO |  |  |  |  |  |  |  |
| 59. LILLY ELI \& CO COM |  |  |  |  |  |  |  |
|  | 05/23/2019 | 10/07/2020 | 8,726.00 | 6,894.00 |  |  | 1,832.00 |
| 115. MASIMO CORP COM |  |  |  |  |  |  |  |
|  | 05/23/2019 | 10/07/2020 | 28,561.00 | 15,874.00 |  |  | 12,687.00 |
| 200. MCDONALDS CORP COM |  |  |  |  |  |  |  |
|  | 09/24/2009 | 10/07/2020 | 45,492.00 | 11,260.00 |  |  | 34,232.00 |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
| 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule $\mathbf{D}$, line 8b (if Box $\mathbf{D}$ above is checked), line 9 (if Box $\mathbf{E}$ above is checked), or line $\mathbf{1 0}$ (if Box $\mathbf{F}$ above is checked) |  |  |  |  |  |  |  |

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

JSA
0X2616 2.000

MASON AND LULA COLE CHARITABLE TUA 600008015
26-6779458
Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.
Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1.
Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.


Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column $(\mathrm{g})$ to correct the basis. See Column $(g)$ in the separate instructions for how to figure the amount of the adjustment.

JSA
0X2616 2.000

