** PUBLIC DISCLOSURE COPY **

Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

2018
Open to Public Inspection

Department of the Treasury Internal Revenue Service

A	For th	e 2018 calendar year, or tax year beginning $$ JUL $1,$ 2018 $$ and $$	ending J	UN 30, 20:	L9				
В	Check if applicab	C Name of organization		D Employer ider		ation number			
	Addre	SS VMI FOUNDATION, INC.							
_	Name	Doing business as		54	<u>-05</u>	05966			
	Initial return Final return	, PO BOX 932	Room/suite		nber 40)	464-7383			
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$ 21,413,954.					
	Amen	LEXINGTON, VA 24450		H(a) Is this a grou	p retu	urn			
	Application	I Finallie and address of principal officer; MA • DA • LO LI • FRADILI	CKI	for subordina	ates?	Yes X No			
	pendi	ISAME AS C ABOVE		H(b) Are all subordinal	tes inclu	uded? Yes No			
***************************************		empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) o	r 527	If "No," attac	h a lis	st. (see instructions)			
		te: ► WWW.VMIAA.ORG		H(c) Group exemp					
	Form of	organization: X Corporation Trust Association Other ► Summary	L Year	of formation: 193	7 <u>м</u> :	State of legal domicile: VA			
L	1	Briefly describe the organization's mission or most significant activities: TO SU	PPORT	THE VIRGI	NIZ	A MILITARY			
Activities & Governance		INSTITUTE (VMI), A STATE-SUPPORTED SCHOOL							
ï.	2	Check this box if the organization discontinued its operations or dispose		than 25% of its net	asset	ts.			
Š	3				3	26			
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			4	26			
ος O	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)			5	62			
/itie	6	Total number of volunteers (estimate if necessary)			6	0			
icti.	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			7a	164,467.			
	b	Net unrelated business taxable income from Form 990-T, line 38			7b	-182,206.			
				Prior Year		Current Year			
a)	8	Contributions and grants (Part VIII, line 1h)		<u>19,310,649</u>		17,296,472.			
nua	9	Program service revenue (Part VIII, line 2g)).	0.			
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,450,123		4,047,508.			
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,262,903	1 -	69,974.			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		24,023,675		21,413,954.			
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		13,386,680		15,059,175.			
		Benefits paid to or for members (Part IX, column (A), line 4)).	0.			
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,084,516		1,379,749.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	vasci i	Company of the Administration of the Company of the	0.000	0.			
Ä	b	Total fundraising expenses (Part IX, column (D), line 25) \(\bigcup \frac{1,163,98}{}		4 014 150		0.040.455			
ш	11	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		$\frac{4,214,176}{20,605}$		2,810,455.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		20,685,372		19,249,379.			
	19	Revenue less expenses. Subtract line 18 from line 12	······	3,338,303		2,164,575.			
Assets or	20	Total assets (Part X, line 16)		ginning of Current Year 97,361,347		End of Year 416,531,805.			
SSE	21	Total lassets (Part X, line 16) Total liabilities (Part X, line 26)	<u> 3</u>	5,733,719		6,166,460.			
Net/		Net assets or fund balances. Subtract line 21 from line 20	······ 3	91,627,628		410,365,345.			
	irt II	Signature Block		JI, 021, 020	<u> </u>	410,505,545.			
Und	er pena	Ities of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	nts and to the hest of	mv kr	nowledge and helief it is			
		t, and complete. Declaration of preparer (other than officer) is based on all information of whi			1119 111	townougo and boiler, it is			
			31. proparo, .	las any mioritage.					
Sigi	n	Signature of officer		Date					
Her		MR. DAVID L. PRASNICKI, CHIEF FINANCIA	L OFFI	CER					
		Type or print name and title							
		Print/Type preparer's name Preparer's signature		ate Check		PTIN			
Paid	ı	JOSEPH S. NADDER, III JOSEPH S. NADDER	, II 1	1/12/19 if self-en	nployed	P01240960			
Prep	arer	Firm's name DIXON HUGHES GOODMAN LLP	······································	Firm's EIN		56-0747981			
Use	Only	Firm's address > 901 EAST CARY STREET, SUITE 1000							
		RICHMOND, VA 23219		Phone no. (804	4) 282-7636			
Мау	the IF	S discuss this return with the preparer shown above? (see instructions)				X Yes No			

(Expenses \$

4e

including grants of \$

15,376,813.

Total program service expenses

Other program services (Describe in Schedule O.)

Form 990 (2018)

Form 990 (2018) VMI FOUNDATION, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		l	
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8_		_X_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		_X_
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	20000000000000
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable.	25/72.5	10000000	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total		٦,	
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
G	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			37
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			77
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u> </u>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		·	
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	<u> </u>	
ıza	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			37
L	Schedule D, Parts XI and XII	12a		X
D	Was the organization included in consolidated, independent audited financial statements for the tax year?		-U-	
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b	Х	X
14a	Did the examination maintain an office employees as a sent putaids of the United Outs of	13		$\frac{\Lambda}{X}$
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		······
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	- 13		
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	-10		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	1	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	-11		
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? # "Yes."	-,5	\dashv	
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	-	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	<u> </u>	<u>+</u>	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	x	
	1 / Out COMPLETE IN FIGURE 1 IN GROUP IN THE PROPERTY OF THE P			

Form 990 (2018) VMI FOUNDATION, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	i		
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			ĺ
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			ĺ
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			ĺ
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			ĺ
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	i		ĺ
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
Da	Note. All Form 990 filers are required to complete Schedule O **Total Complete Schedule O** **Total Complete Schedule O**	38	X	
Par	Check if Schoolule O contains a response of the first title Forth.			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a, Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
832004	12-31-18	Form	990 ((2018)

Pai	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)									
			Yes	No						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return 2a 62	<u>.</u>								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х							
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)									
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	X							
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Х							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		T							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X						
b	If "Yes," enter the name of the foreign country:	1000								
	See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
5a	5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?									
b										
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c	<u> </u>	1						
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit									
	any contributions that were not tax deductible as charitable contributions?	6a		Х						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts									
	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).	14000	知為	25 1.24						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X						
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b								
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required									
	to file Form 8282?	7c	ĺ	X						
ď	If "Yes," indicate the number of Forms 8282 filed during the year	1								
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g								
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h								
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	22.00000 40.00000								
	sponsoring organization have excess business holdings at any time during the year?	8								
9	Sponsoring organizations maintaining donor advised funds.			(4.55)						
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter:		377703							
а	Initiation fees and capital contributions included on Part VIII, line 12									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities									
11	Section 501(c)(12) organizations. Enter:									
а	Gross income from members or shareholders	_								
b	Gross income from other sources (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)									
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
а	Is the organization licensed to issue qualified health plans in more than one state?	13a								
	Note. See the instructions for additional information the organization must report on Schedule O.	40%								
	Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans									
	Enter the amount of reserves on hand	48.98	47643	\$416U						
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X						
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b								
15	Is the organization 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?	15		X						
	If "Yes," see instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X						
	If "Yes," complete Form 4720, Schedule O.		1972	All Park						

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			r
		<u> </u>	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 26			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		1945418	
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		<u>X</u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	200 0000	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	Statistics.		BUSH
	The governing body?	8a	X.	
	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
S	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
40.			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
44-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		**
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	and eers	X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	High	7	
12a	9 to mo 10	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		7.	
40	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14 15	Did the organization have a written document retention and destruction policy?	14	X	414950
15	Did the process for determining compensation of the following persons include a review and approval by independent			
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		37	PER SE
	The organization's CEO, Executive Director, or top management official	15a	X	
D	Other officers or key employees of the organization	15b	X	sa eta a
162	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
iva		40-		X
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a	aidicht.	<u> </u>
D	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	det.	907099	No-stadi
Sec	tion C. Disclosure	16b	l.	
17				
18	List the states with which a copy of this Form 990 is required to be filed ►VA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s	ophi -	wallak	ام
	for public inspection. Indicate how you made these available. Check all that apply.	ону) а	ivaliaD	IE
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	:aa'	al .	
	statements available to the public during the tax year.	manci	al	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	VMI FOUNDATION, INC (540) 464-7383			
	PO BOX 932, LEXINGTON, VA 24450			

Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organizat (A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	١		Pos	itior			Reportable	Reportable	Estimated
	hours per	box	not c , unle	ss pe	rson i	is bot	han	compensation	compensation	amount of
	week	-	cer ar	id a d	irecto	or/trus	tee)	from	from related	other
	(list any	ecte					l	the	organizations	compensation
	hours for	9	83			aled		organization	(W-2/1099-MISC)	from the
	related organizations	trustee or director	trust		8	suadu		(W-2/1099-MISC)		organization and related
	below	jag j	tional		a ge	yee ye				organizations
	line)	Individual	institutional trustee	Officer	Кеу етріоуее	Highest compensated employee	Former			organizations
(1) JOHN D. ADAMS	2.00	-		_						
VICE PRESIDENT OF ADMINIST		X		X				0.	0.	0.
(2) T. BRYAN BARTON	2.00	1				-	İ		<u> </u>	
BOARD MEMBER	7.00	x						0.	0.	0.
(3) THOMAS M. BOYD	2.00									
BOARD MEMBER		x						0.	0.	0.
(4) ELIZABETH D. CAMP	2.00	·····								
BOARD MEMBER		х						0.	0.	0.
(5) DARYL L. DEKE	2.00	ļ							-	
BOARD MEMBER		x						0.	0.	0.
(6) ALEXANDER M. EARLE, JR.	2.00									
BOARD MEMBER		X						0.	0.	0.
(7) RICHARD W. FLOWERS	2.00									
BOARD MEMBER		X						0.	0.	0.
(8) DR. M. DAVID GIBBONS	2.00									
BOARD MEMBER		X						0.	0.	0.
(9) STEPHEN M. GODDARD	2.00									
BOARD MEMBER		х						0.	0.	0.
(10) THOMAS S. GREENSPON	2.00									
BOARD MEMBER		X						0.	0.	0.
(11) CDR. BREE A. GUITERMAN	2.00									
BOARD MEMBER		Х						0.	0.	0.
(12) LT. GEN. RICHARD A. HACK	2.00									
BOARD MEMBER		х						0.	0.	0.
(13) STEPHEN E. HUPP	2.00									
PRESIDENT	5.00	х		x				0.	0.	0.
(14) KERRY D. KIRK	2.00									
BOARD MEMBER		Х						0.	0.	0.
(15) KIMBER L. LATSHA	2.00									
BOARD MEMBER		x	_	_			ĺ	0.	0.	0.
(16) BROOKE H. PENDLETON	2.00									
BOARD MEMBER		x						0.	0.	0.
(17) COLONEL GEORGE PIEGARI	2.00					\neg				
BOARD MEMBER		x			- 1			0.	0.	0.
332007 12-31-18						1				Form 990 (2018

Form 990 (2018)

Part VII Section A. Officers, Directors, Tru (A) Name and title	(B)			(0	C)			(D)		/ - \
Name and title		1		D~~				(D)	(E)	(F)
i sector or or orbital	Average	(do	not c	Pos	тоге	than (опе	Reportable	Reportable	Estimated
	hours per week	box	r, unle. icer ar	ss per id a d	rson l irecto	ls boti or/trus	an lee)	compensation	compensation	amount of
	(list any		T			T		from	from related	other
	hours for	or director						the	organizations	compensation
	related	o or d	Eg .		l	sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	irustee	Itrus		 	npen		(44-27 1099-14800)		organization and related
	below	la la	ig	_	훒	S es				organizations
	line)	Individual t	Institutional trustee	Officer	Кеу етрюуее	Highest compensated employee	Forme			Organizations
(18) KURT A. POLK	2.00									
BOARD MEMBER		X	L			L		0.	0	. 0.
(19) W. GREGORY ROBERTSON	2.00									
BOARD MEMBER		X						0.	0	. 0.
(20) ERNESTO V. SAMPSON, JR.	2.00	1								
BOARD MEMBER		X						0.	0	. 0.
(21) STERLING T. SWEENEY	2.00									
BOARD MEMBER		X	Ш					0.	0	. 0.
(22) GARY J. TAYLOR	2.00									
BOARD MEMBER		X		_				0.	0	. 0.
(23) LT. COLONEL CHARLES L. TOOMEY	2.00									
BOARD MEMBER		X						0.	0	. 0.
(24) T.W. WILLIAMSON, JR.	2.00	1								
BOARD MEMBER		X						0.	0	. 0.
(25) ELISE G. WOODWORTH	2.00									
BOARD MEMBER		X						0.	0	. 0.
(26) THOMAS H. ZARGES	2.00									
VICE PRESIDENT OF FUNDRAISING		X		Х				0.	0	0.
1b Sub-total D. O.										. 0.
c Total from continuation sheets to Part VII, Section A 353,993. 589,680. 37,90										
d Total (add lines 1b and 1c)]	_	353,993.	589,680	. 37,908.
2 Total number of individuals (including but r							re	ceived more than \$100,0	00 of reportable	
compensation from the organization										2
										Yes No
3 Did the organization list any former officer		stee	, key	em/	ploy	/ee,	or h	nighest compensated em	ployee on	
line 1a? If "Yes," complete Schedule J for s							••••	•••••	***********	3 X
4 For any individual listed on line 1a, is the s		e co	mpe	nsat	ion	and	oth	er compensation from th	e organization	
and related organizations greater than \$15	0,000? <i>If</i> "Yes,"	" coi	mple	te S	che	dule	J fo	or such individual		4 X
5 Did any person listed on line 1a receive or	accrue compen	satio	on fro	om a	any i	unrel	ate	d organization or individu	ual for services	
rendered to the organization? If "Yes." con	nplete Schedule	J fo	r su	ch p	ersc	n				5 X
Section B. Independent Contractors										
 Complete this table for your five highest co 										ation from
the organization. Report compensation for	the calendar ye	ar e	ndin	g wit	th o	r wit	nin '	the organization's tax ye	ar.	
(A)								(B)		(C)
Name and business	address						┙	Description of se	rvices	Compensation
BNY MELLON, N.A. INVESTMENT										
225 LIBERTY STREET, NEW YORK, NY 10286 MANAGEMENT 2,330										2,336,771.
MCGUIRE WOODS CONSULTING										
901 EAST CARY ST., RICHMO	OND, VA	23:	219) <u> 4</u>	103	30		LEGAL SERVICE	S	120,307.
							1			
							_ _			
A T-1-1	···									
2 Total number of independent contractors (i		t lim	ited	to th			ed a	above) who received mor	e than	
	zation 🕒				2				l de la companya de	
\$100,000 of compensation from the organi SEE PART VII, SECTION		7 7 7	77.	T-			7 7 -	7m a		Form 990 (2018)

Form 990 VMI FOUND	DATLON,	IN	<u>ю.</u>						54-050	<u> 5966 </u>
Part VII Section A. Officers, Directors, Tru	istees, Key Er	ligh	est	Compensated Employees (continued)						
(A) Name and title	(B) Average hours			(Pos	C) ition that	ì		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) WARREN J. BRYAN CHIEF OPERATING OFFICER	40.00			X				179,286.	0.	3,396.
(28) AMY S. REID CORPORATE SECRETARY	40.00			X				45,307.	0.	5,063.
(29) STEPHEN M. MACONI CHIEF EXECUTIVE OFFICER	2.00 44.00			x				0.	279,536.	12,116.
(30) DAVID L. PRASNICKI CHIEF FINANCIAL OFFICER	2.00			X				0.	180,420.	7,325.
(31) CRISSY S. ELLIOTT FINANCIAL CONTROLLER	2.00			X				0.	129,724.	9,492.
(32) THERESA I. CONRAD	40.00								200,704.	J, 1J21
VICE PRESIDENT						X		129,400.	0.	516.
	<u></u>									
Total to Part VII, Section A, line 1c								353,993.	589,680.	37,908.

Total revenue Related to particular description of the street of the str		Check if Schedule O contains a res	sponse or note to any li	ne in this Part VIII .	************************		
b Membership dues c Fundridising events d Related organizations d Related Orga				(A)	(B) Related or exempt function	(C) Unrelated business	(D) Revenue excluded from tax under sections 512 - 514
Business Code Page 1	ន្ត្ <u>នា</u> 1a		1a				
Business Code Page 1	q gä		1b				
Business Code Page	S, C						
Business Code Page	뜵녈 d	Related organizations	1d				
Business Code Page	's e	Government grants (contributions)	1e				
Business Code Page	f Sign	All other contributions, gifts, grants, and					
Business Code Part	ip al	similar amounts not included above	1f 17,296,472.				
Business Code Page	[일 g	Noncash contributions included in lines 1a-1f: \$	895,513,				
Total Add lines 2a-2f All other program service revenue	<u>ပိုရီ h</u>	Total. Add lines 1a-1f					
b c c d d d d d d d d d d d d d d d d d	_		Business Code	2			
g Total, Add lines 2a-2f 3 Investment income (including dividends, interest, and other similar amounts)							
g Total, Add lines 2a-2f 3 Investment income (including dividends, interest, and other similar amounts)	e e						
g Total, Add lines 2a-2f 3 Investment income (including dividends, interest, and other similar amounts)	S E C .						ļ
g Total, Add lines 2a-2f 3 Investment income (including dividends, interest, and other similar amounts)	B Be						
g Total, Add lines 2a-2f 3 Investment income (including dividends, interest, and other similar amounts)	g e	All attended to a second and a second a second and a second a second and a second a					
3 Investment income (including dividends, interest, and other similar amounts) 4,047,508 164,467 3,	<u>" "</u>						
other similar amounts) 4 noome from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents (i) Real (ii) Personal 6 a Gross rental expenses (i) Securities (ii) Other assets other than inventory b Less: cost or other basis (ii) Other assets other than inventory b Less: cost or other basis (ii) Other assets other than inventory b Less: cost or other basis (ii) Other assets other than inventory b Less: cost or other basis (ii) Other assets other than inventory b Less: cost or other basis (ii) Other assets other than inventory b Less: cost or other basis (ii) Other assets other than inventory b Less: cost or other basis (ii) Other assets other than inventory b Less: cost or other basis (ii) Other assets other than inventory b Less: cost or other basis (ii) Other assets other than inventory b Less: cost or other basis (ii) Other assets other than inventory b Less: cost or other basis (ii) Other assets other than inventory c Calin or (loss) c Calin or	2 3						
Income from investment of tax-exempt bond proceeds Solution Royalties (i) Real (ii) Personal				4 047 508		164 467	3,883,041.
For supplier services and supplier supp	4			2,027,400.		202,107,	0,000,041.
(i) Personal (ii) Personal (ii) Personal (iii) Pe		•					
Best contributions reported on line 1c). See Part IV, line 19 a Less: direct expenses c Net income or (loss) from gaming activities b Less: cost of goods sold c Net income or (loss) from gaming activities c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other (ii) Other dassets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a Less: direct expenses b c Net income or (loss) from fundraising events a Gross a loss of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory							
B Less: rental expenses	6 a		July 1 Grooman	1			
C Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of i) Securities (ii) Other assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$		1414414414					
d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory						es et an er es en as	
7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundralising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses b c Net income or (loss) from fundralising events 9 a Gross income from gaming activities, See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory							#6000 6 va #60 \$500 februari 4,550 februari
assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$	E .						
b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$							
C Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory	b						
C Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory		and sales expenses					
d Net gain or (loss) 8 a Gross income from fundraising events (not including \$	C			1			
8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities a b Less: cost of goods sold a b Less: cost of goods sold b Less: cost of goods sold b Net income or (loss) from sales of inventory \							interest de la contrata de la companya de la compa
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory Net income or (loss) from sales of inventory	8 9						
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory Net income or (loss) from sales of inventory	ğ	including \$ of	:				
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory Net income or (loss) from sales of inventory	eve	contributions reported on line 1c). See			0.00		
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory Net income or (loss) from sales of inventory	<u>بر</u>	Part IV, line 18	a		8.0000000000000000000000000000000000000		
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory Net income or (loss) from sales of inventory	<u>₹</u> b	Less: direct expenses	b				
Part IV, line 19	ء ا	Net income or (loss) from fundraising ev	ents				
b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory	9 a						
c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory							
10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory							
and allowances a			ies				
b Less: cost of goods soldb	10 a						
c Net income or (loss) from sales of inventory		and allowances	а				
							建建建新建筑的建设
MISCEIIANEOUS HEVENUE Rusinass Cadal in the Contract of the Co	<u>c</u>				Harris Adella di Herrico Harris di Legoria de la rec		a uta atau a tina auton yesti a a cii, din la
	44 -		Business Code	1			
11 a ADMINISTRATIVE FEES 900099 69,974.	1			09,9/4.			69,974.
	0						
d All other revenue	ابر ا	All other revenue					
e Total. Add lines 11a-11d				69 974			
	l l				0 .	164 467	3,953,015.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (C) Management and general expenses (A) Total expenses (D) Fundraising Do not include amounts reported on lines 6b. Program service 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations 15,059,175. 15,059,175. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 483,521. 96,704. 120,880. 265,937. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages _____ 634,692. 126,938. 95,204. 412,550. 7 Pension plan accruals and contributions (include 86,475. section 401(k) and 403(b) employer contributions) 17,295. 12,971. 56,209. Other employee benefits 86,529. 17,306. 12,979. 56,244. 9 88,532. 17,706. 13,280. 57,546. Payroll taxes 10 Fees for services (non-employees): a Management 650. 260. 195. 195. Legal Accounting Lobbying Professional fundraising services, See Part IV, line 17 2,336,771. 2,336,771. Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, 6,088. 5,479. 609. column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 139,061. 37,109. 21,126. 80,826. Office expenses 13 Information technology 14 15 Royalties 16 Occupancy 111,547. 22,309. 89,238. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 7,185. 4.311. 2.874 19 20 Interest Payments to affiliates 21 29,879. 29,879. 22 Depreciation, depletion, and amortization 23 Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24e, If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) FUNDRAISING & CAMPAIGN 118,347. 118,347. MISCELLANEOUS 32,486. 32,486. SPECIAL FUNCTIONS 21,601. 4,320. 2,160. 15,121. d DUES & SUBSCRIPTIONS 6,840. 3,420. 3,420. All other expenses 19,249,379. 15,376,813. 2,708,580. Total functional expenses. Add lines 1 through 24e 1,163,986. 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here If following SOP 98-2 (ASC 958-720)

га	1.4.7	Balance Sneet					
		Check if Schedule O contains a response or not	te to ar	y line in this Part X	······································		
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		444441441441441444444444444444444444444		1	
	2	Savings and temporary cash investments			16,590,603.	2	22,031,647
	3	Pledges and grants receivable, net			12,014,792.	3	10,673,737
	4	Accounts receivable, net	• • • • • • • • • • • • • • • • • • • •	***************************************	2,439,617.		2,443,573
	5	Loans and other receivables from current and fo			Bridi de Germania de Carres de Carres	41444	
		trustees, key employees, and highest compensa		, ,			
		Part II of Schedule L		•	The second secon	5	
	6	Loans and other receivables from other disquali				100000	
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect					
,,		employees' beneficiary organizations (see instr).		6			
Assets	7	Notes and loans receivable, net	106,672.	7	106,672		
Ass	8	Inventories for sale or use	100,012.	8	100,012		
	9			9			
	_	Land, buildings, and equipment: cost or other	I			9	
	104	hasis Complete Part VI of Schodulo D	40.0	1 056 263			
	h	basis. Complete Part VI of Schedule D Less: accumulated depreciation	108	776 320	309,822.	40	279,943.
	11	Investments publish traded convities	aoi	770,320.	303,022.	10c	4/3,343
	12	Investments - publicly traded securities		******************************	359,089,789.	11	376,117,473.
		Investments - other securities. See Part IV, line 1			333,003,103.	12	3/0,11/4/3
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets	C 010 0F0	14	4 000 000		
	15	Other assets. See Part IV, line 11	6,810,052.	15	4,878,760.		
	16	Total assets. Add lines 1 through 15 (must equa	397,361,347.	16	416,531,805.		
	17	Accounts payable and accrued expenses	519,386.	17	903,318.		
	18	Grants payable		*************		18	
	19	Deferred revenue		***************************************		19	
	20	Tax-exempt bond liabilities	• • • • • • • • • • • • • • • • • • • •			20	
	21	Escrow or custodial account liability. Complete F				21	Contract the reserve that the Art Art and the Art
Se	22	Loans and other payables to current and former					
		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		22	
	23	Secured mortgages and notes payable to unrela		23			
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines	17-24)	. Complete Part X of			
		Schedule D			5,214,333.	25	5,263,142.
	26	Total liabilities. Add lines 17 through 25			5,733,719.	26	6,166,460.
		Organizations that follow SFAS 117 (ASC 958)	•	k here 🕨 🔼 and			
S		complete lines 27 through 29, and lines 33 and					
띭	27	Unrestricted net assets	62,397,265.	27	68,766,870.		
39	28	Temporarily restricted net assets	171,536,560.	28	0.		
<u> </u>	29	Permanently restricted net assets	157,693,803.	29	341,598,475.		
ᆵ		Organizations that do not follow SFAS 117 (AS					
ō		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
dss	31	Paid-in or capital surplus, or land, building, or eq				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated inc	ome, c	or other funds		32	
z	33	Total net assets or fund balances			391,627,628.	33	410,365,345.
	34	Total liabilities and net assets/fund balances		***************************************	397,361,347.	34	416,531,805.

Pa	rt XI Reconciliation of Net Assets									
	Check if Schedule O contains a response or note to any line in this Part XI					X				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	21	, 41	3,9	54.				
2	Total expenses (must equal Part IX, column (A), line 25)	2	19	, 24	9,3	79.				
3	Revenue less expenses. Subtract line 2 from line 1	3				75.				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	391							
5	Net unrealized gains (losses) on investments									
6	Donated services and use of facilities	6								
7	Investment expenses	7								
8	Prior period adjustments	8								
9	Other changes in net assets or fund balances (explain in Schedule O)	9	_	-59	7,9	48.				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,									
	column (B))	10	410,	36	5,3	45.				
Pa	rt XII Financial Statements and Reporting									
	Check if Schedule O contains a response or note to any line in this Part XII					X				
					Yes	No				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		ſ							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.									
2a	Were the organization's financial statements compiled as reviewed by an index of the second statements			2a		Х				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed		·····							
	separate basis, consolidated basis, or both:									
	Separate basis Consolidated basis Both consolidated and separate basis									
b	Were the organization's financial statements audited by an independent accountant?			2b	Х					
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis.			1000	Water!				
	consolidated basis, or both:	•								
	Separate basis X Consolidated basis Both consolidated and separate basis									
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit.	ľ	A 14 (A 14)		1012.1.1				
	review, or compilation of its financial statements and selection of an independent accountant?									
	If the organization changed either its oversight process or selection process during the tax year, explain in Scher			2c	X	(Assis)				
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit										
	Act and OMB Circular A-133?			за		х				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audit								
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b						
					990	2018)				

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Employer identification number

VMI FOUNDATION, INC. 54-0505966 Reason for Public Charity Status (All organizations must complete this part.) See instructions.

						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
The	organi	ization is not a private found	lation because it is: (For lines 1 through 12, c	heck only	one box.)		
1		A church, convention of ch	urches, or associatio	on of churches described	in section	n 170(b)(1)(A)(i).	
2		A school described in sect	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forr	n 990 or 9	90-EZ).)		
3		A hospital or a cooperative	hospital service orga	anization described in s	ection 170)(b)(1)(A)(i	ii).	
4		A medical research organiz	ation operated in co	njunction with a hospital	described	in sectio	on 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state:						
5		An organization operated for	or the benefit of a co	llege or university owned	d or operat	ed by a go	overnmental unit describ	ed in
		section 170(b)(1)(A)(iv). (0	Complete Part II.)					
6		A federal, state, or local go		nental unit described in	section 1	70(b)(1)(A)	(v).	
7	X	An organization that norma						public described in
-		section 170(b)(1)(A)(vi). (C	•				ernt et inem tine general	
8		A community trust describe		(1)(A)(vi) (Complete Par	+ 11 \			
9		An agricultural research org			•	ed in conic	inction with a land-grant	college
•		or university or a non-land-g				-	=	=
		university:	grant conege or agric	ulture (see matructions).	Line die	ilailie, City	, and state of the college	3 (1
10		An organization that norma	lly reasives: /1) more	than 22 1/20/ of its our	nort from	antributio	no mambarahin fasa ar	ad aronn ronointo from
ıu	ш							
		activities related to its exen	•	•			• •	_
		income and unrelated busin		(less section 511 tax) in	in busines	ses acqui	red by the organization a	aiter June 30, 1975.
4 4		See section 509(a)(2). (Col	•	inalis ka kaak fay as ikita aa	fatir Can		20/-1/4)	
11		An organization organized a	•		•		` '' '	
12	ш	An organization organized a	•	•	•		•	• •
		more publicly supported or						Sneck the box in
		lines 12a through 12d that					_	
а	L	Type I. A supporting orga						
		the supported organization			majority o	of the direc	tors or trustees of the su	pporting
		organization. You must o	•					
b		Type II. A supporting org						
		control or management o	f the supporting orga	anization vested in the s	ame perso	ns that co	ntrol or manage the supp	oorted
	·	organization(s). You mus	t complete Part IV,	Sections A and C.				
С	<u> </u>	Type III functionally inte	grated. A supportin	g organization operated	in connect	ion with, a	and functionally integrate	ed with,
		its supported organization	n(s) (see instructions)). You must complete I	Part IV, Se	ctions A,	D, and E.	
d	<u> </u>	Type III non-functionally	rintegrated. A supp	orting organization oper	ated in co	nnection v	vith its supported organiz	zation(s)
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution red	quirement and an attentiv	/eness
		requirement (see instructi	ions). You must co n	nplete Part IV, Sections	A and D,	and Part	V.	
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type II, Type III	
		functionally integrated, or	Type III non-function	nally integrated supporti	ng organiz	ation.		
f	Ente	r the number of supported o	organizations	***************************************				
g	Prov	ide the following information		d organization(s).	· · · · · · · · · · · · · · · · · · ·		·	
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) is the orga in your governi	nization listed ng document?	(v) Amount of monetary	(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
						,		
ota	1				Augusta a	389999335		

Schedule A (Form 990 or 990-EZ) 2018 VMI FOUNDATION, INC. 54-0505 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support	A-4-					
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gifts, grants, contributions, and			1-1	(-7	3313	(1) 10121
	membership fees received. (Do not						
	include any "unusual grants.")	22549319.	14992097.	42856461.	19310649.	17296472.	117004998
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to				i		
	the organization without charge						
4	Total. Add lines 1 through 3	22549319.	14992097.	42856461.	19310649.	17296472.	117004998
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)			1.65 (20.00) (20.00)			34283720.
6	Public support, Subtract line 5 from line 4.						82721278.
Sec	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	22549319.	1 <u>4992097.</u>	42856461.	19310649.	17296472.	117004998
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1860884.	2016305.	2634582.	3450123.	4047508.	14009402.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	900,695.	863,950.	930,091.	1262903.		4027613.
	Total support. Add lines 7 through 10						135042013
	Gross receipts from related activities,			************************		12	
13	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	501(c)(3)	
Sec	organization, check this box and stop tion C. Computation of Publi	here C Support Per	centage		***************************************		>
	Public support percentage for 2018 (li			olumn (fl)		14	61.26 %
15	Public support percentage from 2017	Schedule A. Part II	l. line 14	J. G. F.	***************************************	15	62.01 %
16a	33 1/3% support test - 2018. If the o	rganization did not	check the box or	line 13. and line 1	4 is 33 1/3% or mo		
	stop here. The organization qualifies	as a publicly suppo	rted organization	•		,	►X
b	33 1/3% support test - 2017. If the o	rganization did not	check a box on li	ne 13 or 16a, and l	line 15 is 33 1/3%	or more, check this	s box
	and stop here. The organization quali	fies as a publicly st	upported organiza	tion			▶ □
17a	10% -facts-and-circumstances test	 2018. If the orga 	inization did not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10% o	r more,
	and if the organization meets the "fact	s-and-circumstance	es" test, check thi	s box and stop he	ere. Explain in Par	t VI how the organi	ization
	meets the "facts-and-circumstances" t	test. The organizati	on qualifies as a p	ublicly supported	organization		▶□
b	10% -facts-and-circumstances test	 2017. If the orga 	ınization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	0% or
	more, and if the organization meets th	e "facts-and-circum	nstances" test, ch	eck this box and	stop here. Explain	in Part VI how the	
	organization meets the "facts-and-circ	umstances" test. T	he organization qu	ualifies as a publicl	y supported organ	ization	▶□
18	Private foundation. If the organization	ı did not check a b	ox on line 13, 16a	, 16b, 17a, or 17b,	check this box an	d see instructions	>
					Scher	dule A (Form 990	or 990-F7) 2018

Schedule A (Form 990 or 990-EZ) 2018 VMI FOUNDATION, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support	iow, piease comp	piete Fait II.j				
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and	****	, , , , , , , , , , , , , , , , , , , ,		1-7	, , , , , , , , , , , , , , , , , , ,	
membership fees received. (Do not						
include any "unusual grants.")						
- ' ' '						
2 Gross receipts from admissions, merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities				1		
furnished by a governmental unit to						
• • •						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year			******			
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support					<u> </u>	
Calendar year (or fiscal year beginning in) 🕨 🔃	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6						
10a Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties,						
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses		:				
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b.						
whether or not the business is						
regularly carried on						
12 Other income. Do not include gain						
or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for t	ho organization's	l first seemed this	1 farrale 884 t-		504(-)(0)	.
check this box and stop here			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************		
Section C. Computation of Public						
15 Public support percentage for 2018 (line)	e 8, column (f), di	ivided by line 13, c	olumn (f))	********************	15	9
16 Public support percentage from 2017 S					16	9
Section D. Computation of Invest	ment Income	Percentage				
17 Investment income percentage for 201			e 13 column (fl)		47	ο.
19 Investment income percentage (of 20)	u (mie 100, 00l0∏ Mar Calandata	nn (i), aividea by IIF	io 10, coluinn (I))		17	9
18 Investment income percentage from 20					_18	9/
				45	2 1/204 and line 17	7 to
						is not
19a 33 1/3% support tests - 2018. If the o more than 33 1/3%, check this box and						IS NOT
more than 33 1/3%, check this box and	stop here. The	organization qualif	ies as a publicly s	upported organizat	ion	> □
more than 33 1/3%, check this box and b 33 1/3% support tests - 2017. If the o	stop here, The rganization did n	organization qualif ot check a box on	ies as a publicly so line 14 or line 19a	upported organizat , and line 16 is mo	ion re than 33 1/3%, a	▶ □
	stop here. The rganization did not this box and sto	organization qualif ot check a box on op here. The orgar	ies as a publicly so line 14 or line 19a nization qualifies a	upported organizat , and line 16 is moi s a publicly suppoi	rion re than 33 1/3%, a rted organization	

Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization πot organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type i or Type ii only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No	
1			
2			
3a	47865		
3b			
3b 3c	4.610 (160 6.65) (160		
36 4a			
4b			
4c			
5a 5b			
5c			
90			
6 7			
8			
9a			
9b			
9c			
10a			
	2 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1		
90 or 99	D-EZI	2018	

Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	100000000		
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
C	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	975337557		
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		İ
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1_		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions),		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
,	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	51154 A 15154		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			4, 4.
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

1	Check here if the organization satisfied the Integral Part Test as a qualifyir	ng trust on	Nov. 20, 1970 (explain in Pa	rt VI.) See instructions
	other Type III non-functionally integrated supporting organizations must co			-
ect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ecti	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):	100.000		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	lb		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other	50.650 (55)		
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		···
3	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
3	Minimum Asset Amount (add line 7 to line 6)	8		
ecti	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	v integrate	ed Type III supporting organiz	ration (see

Schedule A (Form 990 or 990-EZ) 2018

Section D - Distributions		nizations _(continued)	Current Year		
1 Amounts paid to supported organizations to acco					
2 Amounts paid to perform activity that directly furl					
organizations, in excess of income from activity					
3 Administrative expenses paid to accomplish exer	npt purposes of supported organizations				
4 Amounts paid to acquire exempt-use assets					
5 Qualified set-aside amounts (prior IRS approval re	equired)				
6 Other distributions (describe in Part VI). See inst	ructions.				
7 Total annual distributions. Add lines 1 through	6.				
8 Distributions to attentive supported organizations	to which the organization is responsive				
(provide details in Part VI). See instructions.			:		
9 Distributable amount for 2018 from Section C, lin	e 6				
10 Line 8 amount divided by line 9 amount					
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018		
1 Distributable amount for 2018 from Section C, line	9.6		· · · · · · · · · · · · · · · · · · ·		
2 Underdistributions, if any, for years prior to 2018	Automorphism Control and Contr				
able cause required- explain in Part VI). See instru					
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					
g Applied to underdistributions of prior years					
h Applied to 2018 distributable amount					
i Carryover from 2013 not applied (see instructions)			Barrana da kampinga nggayaya		
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.4 Distributions for 2018 from Section D,					
Applied to underdistributions of prior years Applied to 2018 distribute language.					
b Applied to 2018 distributable amount					
c Remainder. Subtract lines 4a and 4b from 4.	16 7				
5 Remaining underdistributions for years prior to 20					
any. Subtract lines 3g and 4a from line 2. For resu	it greater				
than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2018. Subtract li					
and 4b from line 1. For result greater than zero, ex	piain in				
Part VI. See instructions.	0:		Antonia propositi de la compansión de la compansión de la compansión de la compansión de la compansión de la c		
7 Excess distributions carryover to 2019. Add line	9S 3J				
and 4c.					
8 Breakdown of line 7:					
a Excess from 2014					
b Excess from 2015					
c Excess from 2016					
d Excess from 2017					
e Excess from 2018					

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