# (Rev. January 2020) Department of the Treasury Internal Revenue Service

# **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.

Open to Public Inspection

OMB No. 1545-0047

Α	For the	2019 calendar year, or tax year beginning and ending	<u> </u>					
В	Check if applicable	C Name of organization	D Employer ide	entification number				
Г	Addres	Walker Area Community Foundation, Inc.						
F	Name change		**_**	4984				
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)  Room/s	suite <b>E</b> Telephone nu	ımber				
	Final return/		205-30	5-302-0001				
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	1,732,314.				
	Amend		H(a) Is this a gro					
	Application		for subordi					
	pendin	same as C above		nates included? Yes No				
Τ.	Tax-exe	empt status: $X = 501(c)(3)$ $501(c)(0)$ (insert no.) $4947(a)(1)$ or	<del></del>	ach a list. (see instructions)				
		e: www.wacf.org	<del></del> 1	mption number				
				95 M State of legal domicile; AL				
	art I	Summary						
_	1	Briefly describe the organization's mission or most significant activities: ${ t To}$ ${ t Serve}$	as a nonpr	rofit				
Š	(	dedicated to the nurture and advancement of	the communi	ty through				
rna	2	Check this box  if the organization discontinued its operations or disposed of	more than 25% of its r	net assets.				
o Ve	3	Number of voting members of the governing body (Part VI, line 1a)		3 10				
<u>ح</u>		Number of independent voting members of the governing body (Part VI, line 1b)		4 10				
es 4	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)		5				
Ϋ́		Total number of volunteers (estimate if necessary)		6 300				
Activities & Governance		Total unrelated business revenue from Part VIII, column (C), line 12		7a 0.				
_	b	Net unrelated business taxable income from Form 990-T, line 39		7b 0.				
			Prior Year	Current Year				
Revenue	8	Contributions and grants (Part VIII, line 1h)	43,611,20					
	9	Program service revenue (Part VIII, line 2g)		0. 0.				
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	780,19					
_	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6,76					
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	44,398,16					
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,055,90					
		Benefits paid to or for members (Part IX, column (A), line 4)		0. 0.				
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	380,16					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0. 0.				
ă	b	Total fundraising expenses (Part IX, column (D), line 25)   156,926.	F20 F4	525 256				
	17 '	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	532,51					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,968,58					
		Revenue less expenses. Subtract line 18 from line 12	41,429,57					
Net Assets or Fund Balances			Beginning of Current					
Ssel	20	Total assets (Part X, line 16)	66,352,74					
et A	21	Total liabilities (Part X, line 26)	1,31					
	art II	Net assets or fund balances. Subtract line 21 from line 20	00,331,42	49. 14,401,139.				
		Signature Block Ities of perjury, I declare that I have examined this return, including accompanying schedules and sl	atamanta, and to the heat	t of my knowledge and halief it is				
		t, and complete. Declaration of preparer (other than officer) is based on all information of which pre						
uuu	,, сопсс	t, and complete. Declaration of preparer (other than officer) is based on an information of which pre	parer rias arry knowledge.	•				
Sig	.n.	Signature of officer	Date					
He		▶ Paul W. Kennedy, President						
		Type or print name and title						
_		Print/Type preparer's name Preparer's signature	Date	eck PTIN				
Pai	d	Lewis F. Jones, Jr. Lewis F. Jones, Jr.	07/08/20 if self	-employed P00013592				
	parer	Firm's name Haynes Downard LLP	Firm's EII					
	Only	Firm's address 3161 Cahaba Heights Road, Suite 203	3					
	-	Birmingham, AL 35243		.205-254-3380				
Ma	y the IF	RS discuss this return with the preparer shown above? (see instructions)		X Yes No				

d	Other program services (Describe on Schedule O.)

Total program service expenses ► 3,671,951.

including grants of \$

) (Revenue \$

			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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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 during the tax year? If "Yes," complete Schedule C, Part II	4		х
_	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
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	х	
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		
J	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 donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
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	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	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 Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	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			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Ves." complete Schedule F. Parts Land IV.	14h		X
15	or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		<del></del>
	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 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			х
40	1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
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			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

			Yes	No
<b>22</b> Did	I the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	rt IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
	I the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	d former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			v
Sch	hedule J	23		X
	If the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the total through 24d and complete			
	hedule K. If "No," go to line 25a	24a		Х
<b>b</b> Did	I the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	If the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	y tax-exempt bonds?	24c		
<b>d</b> Did	I the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a Sec	ction 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	nsaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
	the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			37
	hedule L, Part I	25b		Х
	I the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% ntrolled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i>	26		Х
	I the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		
	eator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	tity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		Х
	as the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	tructions, for applicable filing thresholds, conditions, and exceptions):			
	current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	es," complete Schedule L, Part IV	28a		X
	amily member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			v
	es," complete Schedule L, Part IV	28c		X
	If the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		- 71
	ntributions? If "Yes," complete Schedule M	30		Х
	If the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
	If the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	hedule N, Part II	32		Х
<b>33</b> Did	the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	ctions 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
	as the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			77
	rt V, line 1	34		X
	If the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Λ
	Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity hin the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	ction 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
	Yes," complete Schedule R, Part V, line 2	36		Х
	I the organization conduct more than 5% of its activities through an entity that is not a related organization			
	d that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
<b>38</b> Did	I the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
Not	te: All Form 990 filers are required to complete Schedule O	38	Х	
Part V	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
, -·	1. 1 7		Yes	No
	ter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a / ter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
	ter the number of Forms W-2G included in line 1a. Enter -0- if not applicable <b>1b   U</b> I the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	mbling) winnings to prize winners?	1c		

Form 990 (2019) Walker Area Community Foundation, Inc.
Part 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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	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 on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	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			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		—
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			37
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	۵.		
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	7-		Х
a	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		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		_
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
ч	to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year	70		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 <del>f</del>		$\vdash$
	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		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
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:			
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:			
	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.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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.	120		
а	Is the organization licensed to issue qualified health plans in more than one state?  Note: See the instructions for additional information the organization must report on Schedule O.	13a		
h	- · · · · · · · · · · · · · · · · · · ·			
D	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			
c	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<del></del>
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		Х
	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		Х
	If "Yes," complete Form 4720, Schedule O.			

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 on Schedule O. See instructions.

	Check it Scriedule O contains a response or note to any line in this Part VI			21
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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 on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	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, 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		X
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		X
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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	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			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	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,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
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?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			77
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
<u> </u>	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed AL			
18	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 only	) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finar	ncial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Paul Kennedy - 205-302-0001			
	P.O. Box 171, Jasper, AL 35502			

# 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.

See instructions for the order in which to list the persons above.

(A)	(B)	(B) (C						(D)	(E)	(F)
Name and title	Average	(do	Positio			sition k more than one		Reportable	Reportable	Estimated
	hours per	box, unless person is both an officer and a director/trustee)			is bot	h an	compensation	compensation	amount of	
	week				a director il datecy			from	from related	other
	(list any hours for	lirecto				_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	ee or	stee			nsate		(W-2/1099-MISC)	(** 27 1000 141100)	organization
	organizations	Individual trustee or director	Institutional trustee		oyee	Highest compensated employee				and related
	below	vidua	itution	cer	Key employee	hest c oloyee	mer			organizations
	line)	lud	Inst	Officer	Ke	Hig	쥰			
(1) Donaldson, Emily	1.00	,,							0	0
Director	1 00	Х						0.	0.	0.
(2) Drummond, Abbie	1.00	,,							0	0
Director	1 00	Х						0.	0.	0.
(3) Globetti, Steve G.	1.00	<b>.</b> ,						0	0	0
Director	1 00	Х						0.	0.	0.
(4) Jackson, Edward	1.00	X	Ι.,					0.	0.	0.
Director	1.00	^						0.	0.	0.
(5) Nolen Jr., Robert B.	1.00	Х						0.	0.	0.
Director (6) Warren, J. Douglas	1.00	Δ						0.	0.	0.
Director	1.00	X						0.	0.	0.
(7) Robertson, Russell B.	1.00							0.	0.	•
Director Emeritus	1.00	Х						0.	0.	0.
(8) Wright II, W. Haig	1.00								•	0.
Director Emeritus	1100	x						0.	0.	0.
(9) Allen, Jack G.	1.00									<u> </u>
Past Chairman		х						0.	0.	0.
(10) Oliver, Jr., John T.	1.00									
Past Chairman		Х						0.	0.	0.
(11) Stukes, Beth Thorne	1.00									
Past Chairman		Х						0.	0.	0.
(12) Callahan, Kevin F.	1.00									
Secretary and Treasurer		Х		Х				0.	0.	0.
(13) Thornley, Scott	1.00									
Vice Chairman		Х		Х				0.	0.	0.
(14) Allen, Robin Reed	1.00									
Chairman		Х		Х				0.	0.	0.
(15) Paul W. Kennedy	40.00									
President				Х				120,525.	0.	0.
							<u> </u>			
		-								

Page 8

(A)	(B)			(C	•			(D)	(E)			(F)	
Name and title	Average hours per week	box	not c	Posi heck r ss per id a di	more rson i	than is bot	h an	Reportable compensation from	Reportable compensation from related		am	imated ount o other	
	(list any hours for related	ee or director	stee			nsated		the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS	6	comp	ensation om the inization	
	organizations below line)	Individual trustee or	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				and	relate nizatio	d
					<u>×</u>	_ 8							
													—
				-1									
								100 505		•			_
1b Subtotal	VII Cootion A							120,525.		0.			0.
c Total from continuation sheets to Part d Total (add lines 1b and 1c)								120,525.		0.			0.
<ul> <li>Total number of individuals (including but compensation from the organization</li> </ul>									),000 of reportable	е			1
3 Did the organization list any former office			кеу е	empl	oye	e, o	hig	hest compensated emp	oloyee on				No v
<ul> <li>line 1a? If "Yes," complete Schedule J for</li> <li>For any individual listed on line 1a, is the and related organizations greater than \$1</li> </ul>	sum of reportab	le c	omp	ensa	ation	n and	d oth		the organization		4		x
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," co	r accrue compe	nsat	ion 1	rom	any	unr/			idual for services		5		X
Section B. Independent Contractors									<b>A</b>				
1 Complete this table for your five highest of the organization. Report compensation for										pens	ation ti	om	
(A) Name and busines	-		INC					(B) Description of s		С	(C comper		
							$\frac{1}{1}$						
							1						
Total number of independent contractors     \$100,000 of compensation from the orga		not li	mite	d to		se li:	sted	l above) who received m	nore than				
, , , , , , , , , , , , , , , , , , , ,											Гокт (	00 /-	

Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Unrelated Revenuè éxcluded Related or exempt Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues ..... 1b c Fundraising events d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 403,376. 1f g Noncash contributions included in lines 1a-1f 1g|\$ 403,376 h Total. Add lines 1a-1f ..... **Business Code** Program Service Revenue 2 a f All other program service revenue ..... g Total. Add lines 2a-2f ..... Investment income (including dividends, interest, and 1,319,788 1,319,788. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties ..... (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses ... 6b c Rental income or (loss) d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (ii) Other assets other than inventory 7a **b** Less: cost or other basis Other Revenue and sales expenses ..... 7b c Gain or (loss) \_\_\_\_\_\_7c d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ 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 9b c Net income or (loss) from gaming activities **10 a** Gross sales of inventory, less returns and allowances 10b **b** Less: cost of goods sold ..... **c** Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a Miscellaneous Revenue 624100 9,150. 9,150 b d All other revenue 9,150. e Total. Add lines 11a-11d 1,732,314. Total revenue. See instructions 9,150. 1,319,788. 12

# 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).

3601	ion 501(c)(3) and 501(c)(4) organizations must com			implete column (A).	
	Check if Schedule O contains a respon	nse or note to any line in (A)	this Part IX(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	3,027,116.	3,027,116.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	400 505	06.410	10 000	6 006
	trustees, and key employees	120,525.	96,419.	18,080.	6,026.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	050 600	000 546	27 600	10 504
7	Other salaries and wages	250,682.	200,546.	37,602.	12,534.
8	Pension plan accruals and contributions (include	16 600	12 244	2 500	004
	section 401(k) and 403(b) employer contributions)	16,680.	13,344.	2,502.	834.
9	Other employee benefits	21,823.	17,458.	3,273.	1,092.
10	Payroll taxes	28,282.	22,626.	4,242.	1,414.
11	Fees for services (nonemployees):				
	Management				
	Legal				
	Accounting				
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	127 270	00 270	26 727	1 272
	column (A) amount, list line 11g expenses on Sch O.)	127,270.	99,270. 7,229.	26,727.	1,273. 7,230.
12	Advertising and promotion	6,356.	5,212.	572.	572.
13	Office expenses	36,788.	12,508.	12,140.	12,140.
14	Information technology	30,700.	12,500.	14,140.	12,140.
15	Royalties				
16	Occupancy	4,745.		4,745.	
17	Travel	4,743.		4,745.	
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Payments to affiliates				
21 22	Depreciation, depletion, and amortization	82,620.	59,486.	4,131.	19,003.
23		31,848.	3,185.	25,478.	3,185.
23 24	Other expenses. Itemize expenses not covered	31,310	3,103.	23,110	3,103.
47	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	Repairs and maintenance	44,802.	35,394.	9,408.	
b	Donor development	42,179.	,	-,	42,179.
c	Miscellaneous expense	33,702.	24,603.	6,066.	3,033.
d	Display and event expen	29,626.	10,962.	•	18,664.
e	All other expenses	80,981.	36,593.	16,641.	27,747.
25	Total functional expenses. Add lines 1 through 24e	4,000,484.	3,671,951.	171,607.	156,926.
26	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)				
	0.01.00.00		L		Earm <b>990</b> (2010)

Pai	χJ	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	1,275,302.	1	616,003
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
ž	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 2,085,689.			
	b	Less: accumulated depreciation 10b 712,395.	1,437,208.	10c	1,373,294
	11	Investments - publicly traded securities	63,610,577.	11	70,391,417
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	29,660.	15	29,660
	16	Total assets. Add lines 1 through 15 (must equal line 33)	66,352,747.	16	72,410,374
	17	Accounts payable and accrued expenses	1,318.	17	2,635
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
2		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,318.	26	2,635
ιo.		Organizations that follow FASB ASC 958, check here			
ဥ		and complete lines 27, 28, 32, and 33.			
alar	27	Net assets without donor restrictions	66,264,853.	27	72,242,607
Ď	28	Net assets with donor restrictions	86,576.	28	165,132
		Organizations that do not follow FASB ASC 958, check here			
_		and complete lines 29 through 33.			
13	29	Capital stock or trust principal, or current funds		29	
SSE	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	66 254 422	31	BO 408 BCC
Š	32	Total net assets or fund balances	66,351,429.	32	72,407,739
	33	Total liabilities and net assets/fund balances	66,352,747.	33	72,410,374

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

За

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

## **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.

OMB No. 1545-0047 **2019** 

Open to Public Inspection

Name of the organization Employer identification number \*\*-\*\*\*4984 Walker Area Community Foundation, Inc. Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. ☐ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Schedule A (Form 990 or 990-EZ) 2019 Walker Area Community Foundation, Inc. \*\*-\*\*4984 Page 2

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.)

Sec	etion A. Public Support		-				
	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and	, ,	` ,	, ,	` ,	. ,	.,
	membership fees received. (Do not						
	include any "unusual grants.")	1,065,769.	472,913.	1,974,291.	43,611,207.	403,340.	47,527,520.
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						
	the organization without charge						
4	Total. Add lines 1 through 3	1,065,769.	472,913.	1,974,291.	43,611,207.	403,340.	47,527,520.
	The portion of total contributions	1,003,703.	172/3131	1,3,1,231.	15,011,207.	103/3101	17,327,320.
5	·						
	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)						42,293,515.
	Public support. Subtract line 5 from line 4.						5,234,005.
	tion B. Total Support	1				· · · · · · · · · · · · · · · · · · ·	
	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016 472,913.	<b>(c)</b> 2017	(d) 2018	(e) 2019 403,340.	(f) Total
7	Amounts from line 4	1,065,769.	472,913.	1,974,291.	43,611,207.	403,340.	47,527,520.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	521,358.	477,072.	647,742.	635,426.	1,585,017.	3,866,615.
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.)	8,495.	6,361.	6,685.	6,762.	9,150.	37,453.
11	<b>Total support.</b> Add lines 7 through 10	,	,	,	,		51,431,588.
	Gross receipts from related activities,	etc (see instruction	nne)			12	
	First five years. If the Form 990 is for	•	,	d fourth or fifth to			
.0	organization, check this box and stor	-			•		ightharpoonup
Sec	tion C. Computation of Publ	ic Support Pe					
	Public support percentage for 2019 (			column (f))		14	10.18 %
15	Public support percentage from 2018					15	10.17 %
	33 1/3% support test - 2019. If the c						
Ioa							
	stop here. The organization qualifies						
D	33 1/3% support test - 2018. If the c						
4-	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization		<b>X</b>
b	10% -facts-and-circumstances tes	<b>t - 2018.</b> If the org	anization did not o	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets the						
	organization meets the "facts-and-circ	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	anization	▶□
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 1 <mark>7</mark> b	o, check this box a	nd see instruction	s ▶ 🗀
						dule A (Form 990	

# Schedule A (Form 990 or 990-EZ) 2019 Walker Area Community Foundation, Inc. \*\*-\*\*\*4984 Page 3 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

Sec	qualify under the tests listed be ction A. Public Support	elow, please com	plete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(a) 2017	(4) 2019	(a) 2010	(f) Total
	Gifts, grants, contributions, and	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(I) Total
'	membership fees received. (Do not						
	include any "unusual grants.")						
2							
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			A			
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(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						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
,	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income. Do not include gain						
-	or loss from the sale of capital						
40	assets (Explain in Part VI.)			-			
	Total support. (Add lines 9, 10c, 11, and 12.)			1.6 11 661 1	<u> </u>	504()(0)	<u></u>
14	First five years. If the Form 990 is for	the organization	's first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	zation,
<u></u>							<u> </u>
	ction C. Computation of Publi			. (0)		T .= T	
	Public support percentage for 2019 (li					15	<u>%</u>
	Public support percentage from 2018					16	%
	ction D. Computation of Inves					147	
17						17	%
	Investment income percentage from 2					18	%
19a	33 1/3% support tests - 2019. If the						17 is not
	more than 33 1/3%, check this box ar						▶□
k	33 1/3% support tests - 2018. If the						
	line 18 is not more than 33 1/3%, che	ck this box and st	<b>top here.</b> The orga	nization qualifies	as a publicly supp	orted organization	▶∐
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	▶└

### 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 not 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		
	Ju		
	3b		
	30		
	0-		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
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	8		
	9a		
	9b		
	9с		
	10a		
	10b		
m 9	90 or 99	0-EZ	2019
		-,	

Sche	dule A (Form 990 or 990-EZ) 2019 Walker Area Community Foundation, Inc. **-*	**498	4 Pa	age <b>5</b>
Par	t IV   Supporting Organizations <sub>(continued)</sub>			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
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		
	A family member of a person described in (a) above?	11b		
	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. tion B. Type I Supporting Organizations	11c		<u> </u>
360	tion B. Type I Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		163	140
•	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 <b>Part VI</b> 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		
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 <b>Part VI</b> 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			
3	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 <b>Part VI</b> the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			<u> </u>
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeatsee instruction	າຣ).		
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	nstruction	s).	
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			
	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? <i>Provide details in Part VI</i> .	3a		
D	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	2F		
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2019 Walker Area Community Foundation, Inc. \*\*-\*\*\*4984 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain Recoveries of prior-year distributions 2 2 Other gross income (see instructions) 3 4 Add lines 1 through 3. Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior 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): a Average monthly value of securities 1a **b** Average monthly cash balances 1b c 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 factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets 2 3 Subtract line 2 from line 1d. 3 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) Multiply line 5 by .035. 6 6 Recoveries of prior-year distributions 7 7 8 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Current Year 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 4 Enter greater of line 2 or line 3. 5 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). 6

☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2019

instructions).

Schedule A (Form 990 or 990-EZ) 2019 Walker Area Community Foundation, Inc. \*\*-\*\*\*4984 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2019 from Section C, line 6 10 Line 8 amount divided by line 9 amount (i) (ii) (iii) Underdistributions Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Amount for 2019 Pre-2019 Distributable amount for 2019 from Section C, line 6 Underdistributions, if any, for years prior to 2019 (reasonable cause required- explain in Part VI). See instructions. Excess distributions carryover, if any, to 2019 a From 2014 **b** From 2015 **c** From 2016 **d** From 2017 e From 2018 f Total of lines 3a through e **g** Applied to underdistributions of prior years h Applied to 2019 distributable amount i Carryover from 2014 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4. 5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2020. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2015 **b** Excess from 2016 c Excess from 2017 d Excess from 2018 e Excess from 2019

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part II, Section C, line 17a, Facts and Circumstances Test:

What facts show that we are consistently seeking new and additional public and governmental support.

Walker Area Community Foundation's (WACF) Director of Operations is tasked with securing donations from the general population. This happens in many WACF hosts an Annual Luncheon in which more than 450 people join ways. together to hear the work of WACF. An annual dinner is also held in Birmingham, AL to court donors. Over the last 3 years, more than 125 people have attended this event. Other smaller events are held throughout the year. WACF consistently writes grants for the four community priorities in its Strategic Plan.A quarterly newsletter is mailed to more than 2,500 people and includes a section where donors are recognized for their memorial and honorarium gifts. A gift remittance envelope is included. WACF has a Facebook page where donations are encouraged. During times of disaster, WACF opens its Disaster Relief Fund and seeks donations to support those whose lives have been affected. The Bankhead House & Heritage Center (BHHC) is also an initiative of WACF. This active, year-round museum consistently writes and receives grants for programs, exhibits, events and operations as well as collecting donations inside the BHHC.

What is our actual percentage of public support for 2019, and what was it for the previous few years?

2015 - 54.46% 2016- 44.64% 2017 - 37.32% 2018 - 10.17% 2019 - 10.18%

What facts show that we have a significant number of donors?

In 2019, WACF received gifts from 312 unique donors.

Gifts of \$500 or more85 gifts 27% of total amount raised

Gifts of \$499 - \$100135 gifts43% of total amount raised

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Gifts of less than \$10092 girts29% of total amount raised.

What facts show how our governing body continues to represent the broad interests of the public rather than the personal and private interests of a limited number of donors?

#### Grantmaking

2017 Grant Activity - 207 grants to 91 organizations, \$2,046,181 given

2018 Grant Activity - 220 grants to 97 organizations, \$3,682,667 given

2019 Grant Activity - 284 grants to 100 organizations, \$3,181,020 given

In 2014, the WACF led a nearly year-long initiative to develop a vision

and plan for Walker County. Over the course of several months during

2014, nearly 500 Walker County residents gathered together to discuss a

vision for the future and the assets they have in place to build on in

achieving their common vision. The subsequent plan identified 7 priority

areas with goal statements that guide the community's work toward

achieving the plan's vision. This plan leads WACF's Board of Directors

today. These priorities include:

Healthy Lifestyles The WACF's initiative the Walker County Health Action

Partnership (HAP) serves as the backbone for this priority. HAP is a

coalition of organizations, individuals and agencies working together to

make Walker County a healthier place to live, learn, work and play.

Building our Workforce There are several key initiatives underway in

Walker County to support education from pre-K to workforce readiness.

WACF's primary focus in 2019 was on increasing the number of Alabama's

Voluntary First-Class Pre-K classrooms. WACF worked with both of our

school systems to look at this model and to apply for funding.

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Recreation and Green Spaces Several important initiatives related to the development of recreation and green spaces in Walker County are underway, including creating waterway access points throughout Walker County. Over the last 3 years, through HAP, WACF has been able to open 4 access points along our river for paddlers to put in and take out and built 5 primitive campsites along the blueways. Over the last 3 years, WACF has built the first accessible archery park in the state and created a walking trail for visitors at the Walker County Lake among other amenities.

Vibrant Communities WACF partners with Main Street Alabama, an organization that stresses broad community engagement, and strategies that create jobs, spark new investment, attract visitors, and spur growth to support Jasper Main Street. Because of this partnership, more than \$2.2M has been invested in building rehabilitation and new construction creating 108 jobs with 23 new businesses. Also, over the last 3 years, WACF hired consultants to help municipalities in Walker County to develop a unique plan for the future. The Bankhead House & Heritage Center (BHHC), owned and operated by the WACF, is a place where all people can gather to experience a diverse range of exhibits and events with a focus on art, history, plays, concerts and culture showcasing our community's many talents, history and future. The BHHC exhibits and concerts are admission free and open to the public and in 2019, we had approx. 2,947 visitors. The BHHC offers a series of exhibits each year in its Gallery as well as permanent exhibits: The Walker County Room, A Tribute to our Military and The Tallulah Bankhead Room. WACF gives a grant to our local school systems each year to provide transportation for classrooms to tour Heritage Center exhibits and learn about their heritage. Teachers also bring their

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

an arts and cultural location for our community. It is utilized for concerts, outdoor movies, plays, storytelling and cultural gatherings designed to advance the arts and history in Walker County.

What facts show that our grants continue to be available to the public on a wide basis?

It is widely known with our nonprofit organizations that WACF has two grant cycles per year with deadlines in March and September. The WACF serves as the primary source of income for the 80+ organizations that applied in 2019. WACF's general unrestricted grantmaking fund, the Community Fund, awarded grants to 100 organizations in 2019. An online grant portal is used and can be accessed by any 501c3 nonprofit A press release is sent to our local newspaper announcing organization. the grant window and is communicated to WACF's Walker County Nonprofit Council. All nonprofits serving Walker County are invited to bi-monthly meeting which provides training for organizations. WACF's grant cycles are discussed in these meetings and any questions are answered as to how to apply.

What facts show that the public continues to be involved in our choices of programs to support, including, for example: use of public officials or community leaders in decision making, programs that exist to assist the community, and/or receipt of funds from government or community sources.

In 2019, WACF utilized an 11 person Grant Review Team to interview grant applicants and make funding recommendations to our Board of Directors.

These Team members represent a cross-section of Walker area individuals dedicated to giving thoughtful advice to our board. None of the Review Team members held Donor Advised Funds with us when they served on the

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

team. They were unbiased advisors focused on the strength of the grant before them. The Board of Directors follows the recommendations of the Grant Reviewers over 99% of the time. WACF pulls together community members to discuss various topics throughout the year for our Strategic plan initiatives as well as for other community problems that arise. 2019 alone, we held meetings around creating opportunities for families with children from 0-4 to access educational programs for their children. There were more than 25 people in attendance at each meeting including mayors, educators, community organizations and community members. The Bankhead House & Heritage Center (BHHC) is owned and operated by the WACF. The BHHC is admission free and open to the public and in 2019 had approx. 2,947 visitors. The BHHC is advised by a Council which is comprised of local citizens who advise and assist in the development of the Heritage Center and its grounds. The Walker County Health Action Partnership (HAP) is a is a coalition of organizations committed to make Walker County a healthier place to live, work, and play. The WACF is one of the anchor HAP identified funding from the Health Resources organizations of HAP. and Services Administration (HRSA) to support the development of a comprehensive response to the opioid and substance use crisis in Walker County. The grant, called the Rural Communities Opioid Response Program (RCORP) Planning grant, supported a strategic planning process. Local organizations met regularly to conduct a needs assessment, collect comprehensive data, and develop the multi-year strategic plan presented in this report. The coordination and collaboration supported by the grant will be sustained through Health Action Partnership's newly created priority group, the Behavioral Health Priority Group. The Behavioral Health Priority Group, and thus the development of this strategic plan,

Schedule A (	(Form 990 or 990-E	Z) 2019 Walker	Area	Community	Foundation,	Inc.	**-***4984 Page 8
	Part IV, Section A, line 1; Part IV, Sec Section D, lines 5,	lines 1, 2, 3b, 3c, 4b, tion D, lines 2 and 3; I	4c, 5a, 6, Part IV, Se	9a, 9b, 9c, 11a, 11b ction E, lines 1c, 2a	l by Part II, line 10; Part I o, and 11c; Part IV, Secti , 2b, 3a, and 3b; Part V, so complete this part fol	on B, lines 1 line 1; Part V,	17b; Part III, line 12; and 2; Part IV, Section C, Section B, line 1e; Part V,
	(See instructions.)						
exist v	within the	framework	of c	ollective	impact.		
					<u>-</u>		

### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Name of the organization

Walker Area Community Foundation, Inc.

Employer identification number

\*\*-\*\*\*4984

Organization type	(check one):
Filers of:	Section:
Form 990 or 990-E	Z X 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
Check if your organ	nization is covered by the <b>General Rule</b> or a <b>Special Rule</b> .
Note: Only a section	on 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule	
	ganization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
sections 5 any one c	ganization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from ontributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; n 990-EZ, line 1. Complete Parts I and II.
year, tota	ganization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the n of cruelty to children or animals. Complete Parts I, II, and III.
year, cont is checked purpose.	ganization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box d, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc.,  Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively charitable, etc., contributions totaling \$5,000 or more during the year   \$\infty\$
but it <b>must</b> answer	ization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to "It meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization Employer identification number \*\*-\*\*\*4984 Walker Area Community Foundation, Inc. Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year Part III from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Walker Area Community Foundation, Inc.

**Employer identification number** \*\*-\*\*\*4984

Pai	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts.Complete if the
•	organization answered "Yes" on Form 990, Part IV, lir	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	X Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose	
Pai	rt II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	tion (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) 🕍 Preservation o	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic st		
d	Number of conservation easements included in (c) acquired		I
	listed in the National Register		
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the	e organization during the tax
	year >		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		
•	violations, and enforcement of the conservation easements		
6	Staff and volunteer hours devoted to monitoring, inspecting	, nandling of violations, and enforcing cor	iservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation accoments during the year
′	\$ \$	diling of violations, and emorcing conserv	ation easements during the year
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 17	7/h\/4\/B\/i\
Ü	and section 170(h)(4)(B)(ii)?	•	
9	In Part XIII, describe how the organization reports conservat		
	balance sheet, and include, if applicable, the text of the foot	•	
	organization's accounting for conservation easements.	3	
Pai	rt III Organizations Maintaining Collections o	of Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" on Forn	n 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement	and balance sheet works
	of art, historical treasures, or other similar assets held for pu	blic exhibition, education, or research in t	urtherance of public
	service, provide in Part XIII the text of the footnote to its fina	incial statements that describes these ite	ms.
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and	balance sheet works of
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in fur	herance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financi	al gain, provide
	the following amounts required to be reported under FASB A	ASC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
h	Assets included in Form 990 Part Y		<b>▶</b> ¢

		Area Commu								Page <b>2</b>
Par	t III   Organizations Maintaining C								<b>ts</b> (continu	ied)
3	Using the organization's acquisition, access	ion, and other record	ls, checl	k any of the	following tha	t make si	gnificant ι	use of its		
	collection items (check all that apply):									
а	Public exhibition	d			hange progra	am				
b	Scholarly research	e		Other						
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and explai	n how th	ney further t	he organizati	on's exen	npt purpos	se in Par	t XIII.	
5	During the year, did the organization solicit of							_	7	
	to be sold to raise funds rather than to be m								Yes	No_
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the	organizatio	on answered '	'Yes" on	Form 990,	Part IV,	line 9, or	
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	ns or other as	sets not i	included			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII									
		•	· ·						Amount	
С	Beginning balance						1c			
d	Additions during the year									
	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on F								Yes	No
b	If "Yes," explain the arrangement in Part XIII	. Check here if the ex	xplanatio	on has been	provided on	Part XIII				
Par	t V Endowment Funds. Complete	if the organization ar	swered	"Yes" on Fo	orm 990, Part	IV, line 1	0.			
		(a) Current year	(b) P	rior year	(c) Two year	s back (	<b>d)</b> Three ye	ars back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
	End of year balance									
2	Provide the estimated percentage of the cur	rent year end baland	e (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Term endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.								
За	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	and administe	red for th	e organiza	ation		
	by:								\	es No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requi	red on S	Schedule R?	) 				3b	
4	Describe in Part XIII the intended uses of the		wment	funds.						
Par	t VI Land, Buildings, and Equipn	nent.								
	Complete if the organization answere	d "Yes" on Form 990	0, Part I\	/, line 11a. S	See Form 990	, Part X,	ine 10.			
	Description of property	(a) Cost or o		` '	t or other	` ,	cumulated	d	(d) Book	value
		basis (investr	ment)		(other)	dep	reciation			
1a	Land				8,686.					,686.
	Buildings			1,50	8,169.	4	56,00	4.	1,052	,165.
	Leasehold improvements									
d	Equipment			32	8,834.	2	56,39	1.	72	,443.
	Other									
Total	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, colur	nn (B), line 1	10c.)			▶	$1,37\overline{3}$	,294.

Schedule D (Form 990) 2019

#### SCHEDULE I (Form 990)

# **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

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

OMB No. 1545-0047 **2019** 

Open to Public Inspection

Name of the organization

Department of the Treasury Internal Revenue Service

Walker Area Community Foundation, Inc.

Employer identification number \*\*-\*\*\*4984

Part I General Information on Grants a	and Assistance						
1 Does the organization maintain records	to substantiate th	e amount of the grant	s or assistance, the	grantees' eligibilit	ty for the grants or as	sistance, and the selec	otion
criteria used to award the grants or assi	stance?						No
2 Describe in Part IV the organization's pr	ocedures for mon	itoring the use of gran	t funds in the Unite	d States.			
Part II Grants and Other Assistance to	Domestic Organ	izations and Domest	ic Governments.	complete if the org	anization answered "	Yes" on Form 990, Par	t IV, line 21, for any
recipient that received more than	\$5,000. Part II ca	n be duplicated if addi	tional space is need	ded.			
Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
Alabama Lions Sight							
700 South 18th St							Mobile Screening Program
	**-***0851	501(c)(3)	40.000	0.			in Walker County
Birmingham, AL 35233	0031	501(6)(3)	40,000.	0.			Operations and to support
Backyard Blessings							the new Parrish Project
2221 Highway 78							in the spring semester of
Sumiton, AL 35062	**-***0669	501(c)(3)	42,000.	0.			2019.
Sumiton, Al 33002	- 0003	501(0)(3)	42,000.	0.		+	1
Backyard Blessings		,					Weekend backpack feeding
2221 Highway 78							program for food insecure
Sumiton, AL 35062	**-***0669	501(c)(3)	42,000.	0.			children.
Birmingham Regional Paratransit			,				
Consortium (ClasTran) - 2121 Rev.							Transportation for
Abraham Woods, Jr. Blvd, Suite							disadvantaged residents
1100 - Birmingham, AL 35203	**-***3997	501(c)(3)	11,200.	0.			in Walker County
Camp COOL (Children Overcoming							Complete camping
Obstacles through Love) - 1505							experience for children
Blackwell Dairy Road - Jasper, AL							with Cerebral Palsy and
35504	**-***2224	501(c)(3)	10,000.	0.			Spina Bifida and summer
							Behavioral health
Capstone Rural Health Center							strategy development and
5947 Hwy 269							implematation and 5th
Parrish, AL 35580	**-***6483	501(c)(3)	93,334.	0.			annual Back2School supply
2 Enter total number of section 501(c)(3) a	and government o	rganizations listed in t	he line 1 table				•

3 Enter total number of other organizations listed in the line 1 table

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

See Part IV for Column (h) descriptions

Schedule I (Form 990) (2019)

Schedule I (Form 990) Walker Al	ea Commun	iity roundat	.1011, 1110.				"-""4904 Page 1
Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	<b>nited States</b> (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Carl Elliott Regional Library 98 Eighteenth Street East Jasper, AL 35501	**-***0670	501(c)(3)	12,198.	0.			Summer reading program
Carl Elliott Regional Library 98 Eighteenth Street East Jasper, AL 35501	**-***0670	501(c)(3)	94,440.	0.			Construction - HVAC
City of Lights Dream Center 23 Austin Cr Dora, AL 35062	**-***4989	501(c)(3)	127,500.	0.			Opioid addication program and women's recovery treatment program
Concerned Citizens for Our Youth, Inc 1200 Beacon Lane - Jasper, AL 35504	**-***0563	501(c)(3)	14,888.	0.			For a computer system.
Dilworth Church of God 3688 Hull Road Empire, AL 35063	**-***0230	501(c)(3)	10,000.	0.			Delivery truck to reduce food insecure elderly and young children
Equines Assisting Special Individuals - 242 Summerville Road - Jasper, AL 35504	**-***5216	501(c)(3)	10,000.	0.			Continuing education seminars and horse food and care
Girls Incorporated of Central Alabama - 5130 8th Ct. So - Birmingham, AL 35212	**-***8643	501(c)(3)	7,500.	0.			Summer enrichment program
Healthy Eating Active Living, Inc. 1360 Montgomery Highway, Suite 116 Birmingham, AL 35266		501(c)(3)	50,000.	0.			Heal in Walker County Schools – improving health through fitness and nutrition education
Hope House Church 1602 10th Ave Jasper, AL 35501	**-***7650	501(c)(3)	208,695.	0.			Loaves and Fish Food Truck, Grant to pave parking lot and repair roof

		ircy Foundac					4704 Page
Part II Continuation of Grants and Othe	er Assistance to Go	overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	1
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Jalayah Hackman Foundation							Tutoring, mentoring, and
1901 Otwell Rd							enriching the lives of
Jasper, AL 35504	**-***5918	501(c)(3)	9,358.	0.			area youth.
Jasper Area Family Services							Renovate Capstone Clinic
Center, Inc 1400 19th Street							area and general
West - Jasper, AL 35502	**-***8363	501(c)(3)	142,451.	0.			operating support.
			,				
Jasper Main Street							
200 18th St W							Jasper Mainstreet
Jasper, AL 35501	**-***4043	501(c)(3)	47,690.	0.	<u> </u>		Operating Budget
Jasper's First Baptist Church							
1604 4th Ave So	**-***4317	E01/->/2>	10,000.				g
Jasper, AL 35501	4317	501(c)(3)	10,000.	0.			General donation
Kid One Transport System, Inc.							
110 12th St. N							Transportation to Better
Birmingham, AL 35203	**-***5579	501(c)(3)	7,500.	0.			Health in Walker County
·			,				
Kid's Loving Kids							
5100 Curry Hwy Ste 111							Personal needs for
Jasper, AL 35504	**-***0203	501(c)(3)	12,000.	0.			children and youth
Mission of Hope							
38 Cut N Curl Rd							Joy of Christmas and
Dora, AL 35062	**-***3204	501(c)(3)	34,000.	0.			Holiday food insecurity
			1 2				
Sight Savers America							Health and vision
337 Business Circle							screenings, follow-up ey
Pelham, AL 35124	**-***8234	501(c)(3)	35,737.	0.			care in Walker County
Smile-A-Mile							
1510 Fifth Avenue South							Hospital outreach and
Birmingham, AL 35233	**-***7544	501(c)(3)	12,000.	0.			programs at SAM Place
	,,,,,,,	5-210/10/	12,500.	<u> </u>	1	1	FIGURE AC DIE 11400

Schedule I (Form 990) Walker Al	ea Commun	iity foundat	.1011, 1110.			·	Page 1
Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
St. Mary's Episcopal Church							
801 The Trace West							Food bank and renovations
Jasper, AL 35504	**-***5506	501(c)(3)	120,000.	0.			for PreSchool
		552(5)(5)	120,000.				Computer system,
The Arc of Walker County							construction of walkways
745 Russell Dairy Road							and foundation repair.
Jasper, AL 35503	**-***0044	501(c)(3)	129,867.	0.1			and medical
The Literacy Council of Central							
Alabama - 2301 1st Ave N #102 -							Materials, events and
Birmingham, AL 35203	**-***1186	501(c)(3)	24,000.	0.			programming
			,				
The Salvation Army							Food Pantry Program,
207 20th St E							replace HVAC, and replace
Jasper, AL 35501	**-***0607	501(c)(3)	89,710.	0.			box truck
							Annual campaign
United Way of Central Alabama,							contribution, Toqueville
Inc 3600 8th Ave S -							Society, Walker County
Birmingham, AL 35222	**-***8846	501(c)(3)	170,290.	0.			partnership for Health
2111	0010		170,250.				paromorphism for mountain
Walker County Arts Alliance							
200 18th St W							
Jasper, AL 35501	**-***5078	501(c)(3)	21,930.	0.			Operations
Walker County Coalition for the							Emergency shelter and
Homeless - 2209 Deleware Ave -							rehousing assistance,
Jasper, AL 35501	**-***9673	501(c)(3)	105,500.	0.			mentoring
			, -	-			After School and Summer
Walker County Community Action							"Sky" Youth Program and a
Agency - 644 19th St. W - Jasper,							passengar van to
AL 35501	**-***1819	501(c)(3)	44,000.	0.			transport kids
				•			Supplementla support for
Walker County Department of Human							welfare programs serving
Resources - 1901 Highway 78 East -							children, families,
Jasper, AL 35501	**-***4139	501(c)(3)	12,000.	0.			elderly, and handicapped.
	1 4133	P = 1 ( C / ( S /	1 12,000.	<u> </u>		1	erderry, and mandicapped.

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Walker County Humane Society 23470 US-78 Jasper, AL 35501	**_***9530	501(c)(3)	17,500.	0.			Cost of care for a puppy mill bust in Nauvoo and Spay and Neuter Program
Alabama Possible 1016 19th Street S. Birmingham, AL 35205	**-***4080	501(c)(3)	20,000.	o.			College Access and Success Programs
Alabama Symphony Orchestra 3621 6th Avenue S. Birmingham, AL 35222	**-***3036	501(c)(3)	7,500.	0.			Local music education
St. Jude Children's Research Hospital - 501 St. Jude Pl - Memphis, TN 38105	**-***4585	501(c)(3)	10,000.	0.			St. Jude Field of Dreams
American Heart Association 1449 Medical Park Drive Birmingham, AL 35213	**_***3797	501(c)(3)	10,000.	0.			General donation
Arley Women's Club 758 County Road 234 Arley, AL 35541	**-***2513	501(c)(3)	9,500.	0.			Recycling Pilot Program in Arley
Bevill State Community College Foundation - 1411 Indiana Ave - Jasper, AL 35501	**-***2108	501(c)(3)	23,414.	0.			Construction-repair Carl Elliott House Museum
Big Oak Ranch 6000 Shelley Dr Springville, AL 35146	**-***3017	501(c)(3)	60,000.	0.			To support the operation of two houses
Birmingham Botanical Society 2612 Lane Park Road Birmingham, AL 35223	**-***5111	501(c)(3)	5,000.	0.			General operating

Schedule I (Form 990) Walker Al	ea Commun	iity roundat	TOIL, THE.			••	"-""4904 Pag
Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Birmingham Zoo							
2630 Cahaba Road							Alabama Wilds habitat f
Birmingham, AL 35223	**-***1591	501(c)(3)	7,500.	0.			Red-Tailed Hawk
Boys & Girls Clubs of Central							
Alabama - 3821 John Williamson							Walker County Project
Drive - Hueytown, AL 35023	**-***2102	501(c)(3)	15,000.	0.1			Learn
222.0 11402.00111, 112 00020			20,000.				
Childcare Resources							
244 W Valley Ave #200							Supplemental Child Care
Birmingham, AL 35209	**-***2628	501(c)(3)	10,000.	0.			Program
BITMINGHAM, AND 33209	2020	501(0)(3)	10,000.	0.			l
City of Cordova							
154 Main Street							
Cordova, AL 35550	**-***1232	501(c)(3)	60,000.	0.			Construction of Mill Pa
Coldova, All 33330	- 1232	501(0)(3)	00,000.	0.			Constitution of Mili Fa
City of Jasper							
400 19th St W							Purchased used vehicle
	**-***5340	501(c)(3)	20,000	0.			
Jasper, AL 35501	5340	501(6)(3)	20,000.	0,			for animal control  Executive Director sala
Gammanitas Bassadatian of Bast							
Community Foundation of East							and disaster recovery
Alabama - 1103 Glenn St - Opelika,	++ +++0104	E01/ \/2\	40.000				following Lee County
AL 36801	**-***0184	501(c)(3)	40,000.	0.			tornados
Dinet Weited Wethedist Church of							
First United Methodist Church of							
Jasper - 1800 Third Avenue -	** ***	504 ( ) (2)	05.000				Renovate basement for
Jasper, AL 35501	**-***8091	501(c)(3)	25,000.	0.			preschool
							HVAC construction and
Free Will Baptist Children's Home							funding for the Bridge
7907 Buck Deans Road							program, vehicles and
Middlesex, NC 27557	**-***2093	501(c)(3)	120,600.	0.		-	appliances.
Enjoyda of Downtown Tarrey							Congtaggion of More
Friends of Downtown Jasper							Construction of Town
1816 3rd Avenue S Ste 200	++ +++6650	501/ \/2\	45.600				Creek Park and Wayfindi
Jasper, AL 35501	**-***6652	501(c)(3)	45,600.	0.			signs and supports

Part II Continuation of Grants and Other		overnments and Orga		nited States (Sch	edule I (Form 990) Pa	art II )	TOT Page I
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Glenwood Autism & Behavioral							
Health Center - 150 Glenwood Lane							
- Birmingham, AL 35242	**-***6710	501(c)(3)	5,000.	0.			General operating
Greater Birmingham Humane Society							
300 Snow Drive							Spaying and neutering in
Birmingham, AL 35209	**-***8810	501(c)(3)	20,000.	ο.			Walker County
Impact Alabama							
1901 6th Avenue North	**-***0212	E01/ \/2\	T 500				FocusFirst Vision Care
Birmingham, AL 35203	~~-~~0212	501(c)(3)	7,500.	0.			Initiative Repair roof on gym and
Indian Creek Youth Camp							lighting, girls bathhouse
7855 Pleasantfield Road							renovation, and summer
Oakman, AL 35579	**-***6849	501(c)(3)	41,564.	0.			camp scholarships
JH Ranch							
402 Office Park Drive							
Birmingham, AL 35223	**-***4970	501(c)(3)	20,000.	0.			Ranch Family 100
Magic Moments							
2112 11th Avenue South Suite 2							2 moments for Walker
Birmingham, AL 35205	**-***7875	501(c)(3)	10,000.	0.			County children
DIIMINGIAM, III 00200	7073	301(0)(3)	10,000.				eoune, enriquen
New Prospects Baptist Church							
770 Highway 5 N							
Jasper, AL 35503	**-***0032	501(c)(3)	36,462.	0.			Ceiling repair
Nick's Kids Foundation							
1130 University Blvd							
Tuscaloosa, AL 35401	**-***0447	501(c)(3)	60,000.	0.			General donation
Pregnancy Test and Resource Center							Pregnancy testing,
1707 2nd Avenue							ultrasound, and education
Jasper, AL 35501	**-***5733	501(c)(3)	23,000.	0.			Mobile unit
	1 3,33	P-2-(0/(0/	25,500.	<u> </u>		1	

Schedule I (Form 990) Walker At	ea Commun	iity roundat	.1011, 1110.			••	Page
Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	<b>nited States</b> (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Preschool Partners							
4447 Montevallo Road							
Mountain Brook, AL 35213	**-***9557	501(c)(3)	50,000.	0.			General donation
Ronald McDonald House Charities of							
Alabama - 1700 4th Ave S -							
Birmingham, AL 35233	**-***3358	501(c)(3)	25,000.	0.			Adopt A Family
Sawyerville Summer Camp							
251 20th St S							
Birmingham, AL 35203	**-***3991	501(c)(3)	5,000.	0.			General donation
Diffiningiam, III 33203	3331	501(0)(0)	3,000.	· ·			
Town of Parrish							
6484 Highway 269							
Parrish, AL 35580	**-***1341	501(c)(3)	19,640.	0.			Renovate senior center
UAB School of Nursing							
1720 2nd Avenue South							Nurse-Family Partnership
Birmingham, AL 35294	**-***5396	501(c)(3)	12,500.	0.			of Central Alabama
							to bring 12 theatre
UAB Department of Theatre							performances to Walker
ASC 255, 1720 2nd Avenue South	** ****	E01/->/2>	11 200				County and touring in
Birmingham, AL 35294	**-***5396	501(c)(3)	11,300.	0.			Walker County
Walker College Foundation							
1501 Gamble Ave							Donation to the Larry
Jasper, AL 35501	**-***9216	501(c)(3)	10,000.	0.			Drummond Scholarship Fund
·			·				
Walker County Board of Education							Place AEDs in all schools
1710 Alabama Avenue							and library enhancement
Jasper, AL 35501	**-***1147	501(c)(3)	30,250.	0.			at Valley Jr. High
Walker County Children's Advocacy							
Center - 1619 Alabama Avenue -							Emergency funding for 2
Jasper, AL 35501	**-***3448	501(c)(3)	15,000.	0.			weeks
	**-***3448	501(c)(3)	15,000.	0.			

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							School Readiness
Walker County Children's Policy							Coordinator - salary,
Council - 1400 19th Street West -	** ***	501 ( ) (0)	42.550				travel, benefits,
Jasper, AL 35501	**-***2688	501(c)(3)	43,552.	0.			equipment
Walker County Commission							
1801 3rd Avenue #113							
Jasper, AL 35501	**-***1721	501(c)(3)	10,000.	ο.			Farmers Market Upgrades
							Security cameras and
Youth Advocate Programs, Inc.							alarm system for office,
2007 North 3rd Street							general donation,
Harrisburg, PA 17102	**-***7514	501(c)(3)	133,498.	0.	Y		additional services for
American Red Cross							
1015 Airport Road	**-***6605	E01( )(2)	5,000				Fire victim finanical
Huntsville, AL 35802	**-***6605	501(c)(3)	5,000.	0.			assistance
Big Oak Ranch							
6000 Shelley Dr							
Springville, AL 35146	**-***3017	501(c)(3)	12,000.	0.			General operating
Boy Scouts of America, Black							
Warrior Council - 2700 Jack Warner							Robotics kirs and beddin
Parways NE - Tuscaloosa, AL 35403	**-***8816	501(c)(3)	6,550.	0.			for Camp O'Rear
Downtown Jasper Business							
Association - 200 18th St W -							
Jasper, AL 35501	**-***4043	501(c)(3)	48,690.	0.			Jasper Main Street
	1010		10,050.				l la
Full Life Ahead Foundation							Plan for success,
2908 Clairmont Avenue South							bringing hope to the
Birmingham, AL 35213	**-***0935	501(c)(3)	8,000.	0.			disabled
·			,				Jasper swim team needs,
Jasper City Parks and Recreation							includes laptop and
204 19th Street E #100							software, cables and
Jasper, AL 35501	**-***5340	501(c)(3)	8,609.	0.			touch pads, start system

chedule I (Form 990) Walker A Part II Continuation of Grants and Other		nity Foundat			edule I (Form 990) De		*-** <b>4</b> 98 <b>4</b> Pag
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CWane Science Center							
00 19th Street North							Programming for studen
Sirmingham, AL 35203	**-***3712	501(c)(3)	5,000.	0.			in Walker County Schoo
ilimingham, AL 35203	- 3/12	501(0)(3)	5,000.	0.			In warker county school
alker County Christian Chorus							
					4		
Whistletop Lane	**-***0943	E01/->/2>	7 000				Handel's "Messiah"
asper, AL 35504	0943	501(c)(3)	7,000.	0.			Handel s Messian
		4					

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	<b>s.</b> Complete if the	e organization answe	ered "Yes" on Form 9	990, Part IV, line 22.	
(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
			X		
		5			
Part IV Supplemental Information. Provide the information rec	uired in Part I, lin	ne 2; Part III, column	n (b); and any other a	dditional information.	
Part II, line 1, Column (h):					
Name of Organization or Government	::				
Camp COOL (Children Overcoming Obs	stacles t	hrough Lov	re)		
(h) Purpose of Grant or Assistance	e: Comple	te camping	g experienc	e for	
children with Cerebral Palsy and S	Spina Bif	ida and su	ummer camp.		
Name of Organization or Government	: Capsto	ne Rural H	Health Cent	er	
(h) Purpose of Grant or Assistance	e: Behavi	oral healt	h strategy		
development and implematation and	5th annu	al Back2Sc	chool suppl	y drive	
		1 -			

Name of Organization or Government: The Arc of Walker County

walkways and foundation repair, and medical transportation

(h) Purpose of Grant or Assistance: Computer system, construction of

Name of Organization or Government: United Way of Central Alabama, Inc.

Toqueville Society, Walker County partnership for Health and Education.

(h) Purpose of Grant or Assistance: Security cameras and alarm system

a Trauma-informed, social-emotional learning interventionalist pilot

Name of Organization or Government: Jasper City Parks and Recreation

(h) Purpose of Grant or Assistance: Jasper swim team needs, includes

laptop and software, cables and touch pads, start system and clock

for office, general donation, additional services for at-risk youth, and

(h) Purpose of Grant or Assistance: Annual campaign contribution,

Name of Organization or Government: Youth Advocate Programs, Inc.

program.

Schedule I (Form 990)

#### SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

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

OMB No. 1545-0047

Inspection

Name of the organization

Walker Area Community Foundation, Inc.

**Employer identification number** \*\*-\*\*\*4984

Form 990, Part I, Line 1, Description of Organization Mission: forming and preserving charitable capital, and using the proceeds of that capital to better the community as a whole.

Form 990, Part VI, Section B, line 11b:

The 990 is reviewed and approved by the Board, and then the return is submitted for filing.

Form 990, Part VI, Section B, Line 15a:

The President's annual performance and compensation reviews are performed by the current Board of Directors. Salaries for the President and all full-time employees are benchmarked by the annual Council on Foundations Pay and Compensation Survey.

Form 990, Part VI, Section C, Line 19:

The organization's governing documents and financial statements are available to the public upon request. The 990 is available to the public through the website Guidestar.com.

Form 990, Page XII, Part XII, Line 2c

The Organization has not changed its oversight process or selection process of the audit for the current year.