

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. THE DAN AND MARGARET MADDOX FUND, INC.	Taxpayer identification number (TIN) 23-7017790
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 100 TAYLOR STREET, A-20	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NASHVILLE, TN 37208	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 4

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

REV. MARY K. FRISKICS-WARREN

• The books are in the care of ▶ **100 TAYLOR STREET, A-20 - NASHVILLE, TN 37208**

Telephone No. ▶ **615-481-8787**

Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2022**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ calendar year **2021** or

▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$ 67,280.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$ 17,280.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ 50,000.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

Part II Balance Sheets <small>Attached schedules and amounts in the description column should be for end-of-year amounts only.</small>		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	1,371,719.	1,647,323.	1,647,323.
	3 Accounts receivable ▶ Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶ Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶ Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 8	5,225,733.	4,510,335.	9,332,593.
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment: basis ▶ Less: accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other STMT 9	33,730,977.	34,911,420.	46,497,321.
	14 Land, buildings, and equipment: basis ▶ 7,869. Less: accumulated depreciation ▶ 7,269.		960.	600.
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	40,329,389.	41,069,678.	57,477,837.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
23 Total liabilities (add lines 17 through 22)	0.	0.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	40,329,389.	41,069,678.	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	28 Retained earnings, accumulated income, endowment, or other funds	0.	0.	
	29 Total net assets or fund balances	40,329,389.	41,069,678.	
30 Total liabilities and net assets/fund balances	40,329,389.	41,069,678.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	40,329,389.
2 Enter amount from Part I, line 27a	2	1,857,442.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	42,186,831.
5 Decreases not included in line 2 (itemize) ▶ PARTNERSHIP PASS-THROUGH	5	1,117,153.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	41,069,678.

Part IV Capital Gains and Losses for Tax on Investment Income SEE ATTACHED STATEMENTS

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))	
a				
b				
c				
d				
e	8,709,629.	5,447,716.	3,261,913.	
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a				
b				
c				
d				
e			3,261,913.	
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	3,261,913.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8	{ }		3	N/A

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)	1	57,051.
b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b)		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2	0.
3 Add lines 1 and 2	3	57,051.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	57,051.
6 Credits/Payments:		
a 2021 estimated tax payments and 2020 overpayment credited to 2021	6a	17,280.
b Exempt foreign organizations - tax withheld at source	6b	0.
c Tax paid with application for extension of time to file (Form 8868)	6c	50,000.
d Backup withholding erroneously withheld	6d	0.
7 Total credits and payments. Add lines 6a through 6d	7	67,280.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	3.
9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed	9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	10,226.
11 Enter the amount of line 10 to be: Credited to 2022 estimated tax <input type="checkbox"/> 10,226. Refunded <input type="checkbox"/>	11	0.

Part VI-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ <u>0.</u> (2) On foundation managers. ▶ \$ <u>0.</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ <u>0.</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		X
If "Yes," attach a detailed description of the activities.		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	X	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		X
If "Yes," attach the statement required by <i>General Instruction T</i> .		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ <u>TN</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes," complete Part XIII		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	X	
Website address ▶ <u>WWW.MADDOXFUND.ORG</u>		
14 The books are in care of ▶ <u>REV. MARY K. FRISKICS-WARREN</u> Telephone no. ▶ <u>615-481-8787</u> Located at ▶ <u>100 TAYLOR STREET, A-20, NASHVILLE, TN</u> ZIP+4 ▶ <u>37208</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ▶ <u>15</u> <u>N/A</u>		
16 At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶		

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1a(2)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)	X
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	1a(5)	X
	1a(6)	X
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	N/A
c Organizations relying on a current notice regarding disaster assistance, check here		<input type="checkbox"/>
d Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2021?	1d	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2021?	2a	X
If "Yes," list the years ▶ _____, _____, _____, _____		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	2b	N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ _____, _____, _____, _____		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	3a	X
b If "Yes," did it have excess business holdings in 2021 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2021.)	3b	N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2021?	4b	X

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

	Yes	No
5a During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions		X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	N/A	
c Organizations relying on a current notice regarding disaster assistance, check here	<input type="checkbox"/>	
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).	N/A	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X

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

1 List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 10		228,774.	14,100.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

Table with 3 columns: (a) Name and address of each person paid more than \$50,000, (b) Type of service, (c) Compensation. Row 1: DIVERSIFIED TRUST - TWO AMERICAN CENTER, 3100 WEST END, NASHVILLE, TN 37203-1464; INVESTMENT ADVISOR; 171,714.

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

Part VIII-A Summary of Direct Charitable Activities

Table with 2 columns: Description of activity, Expenses. Row 1: 1 N/A

Part VIII-B Summary of Program-Related Investments

Table with 2 columns: Description of investment, Amount. Row 1: 1 N/A

Total. Add lines 1 through 3 0.

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

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities	1a	52,796,915.
b	Average of monthly cash balances	1b	1,382,574.
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	54,179,489.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	54,179,489.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	812,692.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	53,366,797.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	2,668,340.

Part X Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

1	Minimum investment return from Part IX, line 6	1	2,668,340.
2a	Tax on investment income for 2021 from Part V, line 5	2a	57,051.
b	Income tax for 2021. (This does not include the tax from Part V.)	2b	
c	Add lines 2a and 2b	2c	57,051.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,611,289.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,611,289.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	2,611,289.

Part XI Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	2,122,297.
b	Program-related investments - total from Part VIII-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:			
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	2,122,297.

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2020	(c) 2020	(d) 2021
1 Distributable amount for 2021 from Part X, line 7				2,611,289.
2 Undistributed income, if any, as of the end of 2021:				
a Enter amount for 2020 only			427,023.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2021:				
a From 2016				
b From 2017				
c From 2018				
d From 2019				
e From 2020				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2021 from Part XI, line 4: ▶ \$ 2,122,297.				
a Applied to 2020, but not more than line 2a ...			427,023.	
b Applied to undistributed income of prior years (Election required - see instructions) ...		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2021 distributable amount				1,695,274.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2021 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2020. Subtract line 4a from line 2a. Taxable amount - see instr. ...			0.	
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2022				916,015.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2016 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2022. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2017 ...				
b Excess from 2018 ...				
c Excess from 2019 ...				
d Excess from 2020 ...				
e Excess from 2021 ...				

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9) **N/A**

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2021, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year				(e) Total
	(a) 2021	(b) 2020	(c) 2019	(d) 2018	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed					
b 85% (0.85) of line 2a					
c Qualifying distributions from Part XI, line 4, for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

SEE STATEMENT 11

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

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

Part XIV Supplementary Information *(continued)*

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
100 BLACK MEN OF MIDDLE TENNESSEE P. O. BOX 280837 NASHVILLE, TN 37228	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	40,000.
AMERICAN BAPTIST COLLEGE 1800 BAPTIST WORLD CENTER DR NASHVILLE, TN 37207	NONE	PUBLIC	TO SUPPORT THE SOCIAL JUSTICE, EQUITY, ADVOCACY AND LEADERSHIP INITIATIVE	18,500.
AMERICAN MUSLIM ADVISORY COUNCIL 2195 NOLENSVILLE PK NASHVILLE, TN 37211	NONE	PUBLIC	TO SUPPORT THE YOUTH LEADERSHIP PROGRAM AND MUSLIM YOUTH.	9,500.
BACKFIELD IN MOTION 920 WOODLAND ST NASHVILLE, TN 37206	NONE	PUBLIC	TO SUPPORT THE EXTENDED LEARNING PROGRAM	25,000.
BETHLEHEM CENTERS OF NASHVILLE 1417 CHARLOTTE AVENUE NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE COVID-RELATED SAFETY EQUIPMENT	13,000.
Total SEE CONTINUATION SHEET(S) ▶ 3a				1,806,987.
b Approved for future payment				
NONE				
Total ▶ 3b				0.

Part XV-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	171,829.	
4 Dividends and interest from securities			14	712,918.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	3,261,913.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a SEE STATEMENT 12		-13,477.		625,938.	
b _____					
c _____					
d _____					
e _____					
12 Subtotal. Add columns (b), (d), and (e)		-13,477.		4,772,598.	0.
13 Total. Add line 12, columns (b), (d), and (e)			13	4,759,121.	

(See worksheet in line 13 instructions to verify calculations.)

Part XV-B Relationship of Activities to the Accomplishment of Exempt Purposes

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

Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

- 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
a Transfers from the reporting foundation to a noncharitable exempt organization of:
(1) Cash
(2) Other assets
b Other transactions:
(1) Sales of assets to a noncharitable exempt organization
(2) Purchases of assets from a noncharitable exempt organization
(3) Rental of facilities, equipment, or other assets
(4) Reimbursement arrangements
(5) Loans or loan guarantees
(6) Performance of services or membership or fundraising solicitations
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
d If the answer to any of the above is "Yes," complete the following schedule.

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Content includes 'N/A' for all entries.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Yes No

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Content includes 'N/A' for all entries.

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Signature of officer or trustee: Ryan Blankenship, CFA Title: CHAIR

Paid Preparer Use Only Print/Type preparer's name: RYAN BLANKENSHIP Preparer's signature: Ryan Blankenship, CFA Date: 2022.10.27 12:17:31 -04'00' Check self-employed: [] PTIN: P01336455 Firm's name: CHERRY BEKAERT LLP Firm's EIN: 56-0574444 Firm's address: 222 SECOND AVENUE S, SUITE 1240 NASHVILLE, TN 37201 Phone no.: 615-383-6592

THE DAN AND MARGARET MADDOX FUND, INC.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a K-1: INTERNATIONAL EQUITY COMMON TRUST FUND	P		12/31/21
b K-1: INTERNATIONAL EQUITY COMMON TRUST FUND	P		12/31/21
c K-1: DTC PRIVATE EQUITY IV, LP	P		12/31/21
d K-1: DTC PRIVATE EQUITY IV, LP	P		12/31/21
e K-1: DTC PRIVATE EQUITY V, LP	P		12/31/21
f K-1: DTC PRIVATE EQUITY V, LP	P		12/31/21
g K-1: METROPOLITAN REAL ESTATE PARTNERS GLOBAL V,	P		12/31/21
h K-1: METROPOLITAN REAL ESTATE PARTNERS GLOBAL V,	P		12/31/21
i K-1: METROPOLITAN REAL ESTATE PARTNERS SECONDARY	P		12/31/21
j K-1: DTC SHORT DURATION FIXED INCOME COMMON TRUST	P		12/31/21
k K-1: DTC SHORT DURATION FIXED INCOME COMMON TRUST	P		12/31/21
l K-1: CORE FIXED INCOME COMMON TRUST FUND	P		12/31/21
m K-1: CORE FIXED INCOME COMMON TRUST FUND	P		12/31/21
n K-1: DTC PRIVATE EQUITY VI-Q, LP	P		12/31/21
o K-1: DTC PRIVATE EQUITY VI-Q, LP	P		12/31/21

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 101,835.			101,835.
b 799,982.			799,982.
c 3,089.			3,089.
d 191,601.			191,601.
e 56,865.			56,865.
f 637,182.			637,182.
g 53.			53.
h 55,235.			55,235.
i 18,132.			18,132.
j 206.			206.
k		697.	-697.
l		23,081.	-23,081.
m 14,590.			14,590.
n 91,840.			91,840.
o 270,461.			270,461.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			101,835.
b			799,982.
c			3,089.
d			191,601.
e			56,865.
f			637,182.
g			53.
h			55,235.
i			18,132.
j			206.
k			-697.
l			-23,081.
m			14,590.
n			91,840.
o			270,461.

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3

THE DAN AND MARGARET MADDOX FUND, INC.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a K-1: AEW PARTNERS FUND VIII FEEDER LP	P		12/31/21
b DIVERSIFIED TRUST COMPANY 1016 ST COVERED	P		12/31/21
c DIVERSIFIED TRUST COMPANY 1016 LT COVERED	P		12/31/21
d 6158.78 SHS DTC CORE FIXED INCOME CTF	P	11/30/20	02/26/21
e 49330.049 SHS DTC CORE FIXED INCOME CTF	P		03/31/21
f 14205.703 SHS DTC CORE FIXED INCOME CTF	P	06/30/20	04/30/21
g 22908.453 SHS DTC CORE FIXED INCOME CTF	P		05/14/21
h 12010.992 SHS DTC INTERNATIONAL EQUITY CTF	P		11/30/21
i 26368.547 SHS DTC SHORT DURATION FIXED INCOME CTF	P	10/30/20	03/31/21
j 5188.277 SHS DTC SHORT DURATION FIXED INCOME CTF	P	10/30/20	05/14/21
k 6007.402 SHS DTC INTERNATIONAL EQUITY CTF	P	08/31/17	03/31/21
l 21871.415 SHS DTC INTERNATIONAL EQUITY CTF	P		04/30/21
m 5829.488 SHS DTC INTERNATIONAL EQUITY CTF	P		05/14/21
n 19879.503 SHS DTC INTERNATIONAL EQUITY CTF	P		05/28/21
o SHS WINSTON GLOBAL	P		12/31/21

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 56,390.			56,390.
b 318,423.		278,098.	40,325.
c 2,237,523.		1,982,053.	255,470.
d 60,000.		61,604.	-1,604.
e 475,000.		490,528.	-15,528.
f 138,000.		141,004.	-3,004.
g 222,500.		226,947.	-4,447.
h 400,000.		422,687.	-22,687.
i 160,000.		161,348.	-1,348.
j 31,500.		31,691.	-191.
k 200,000.		186,878.	13,122.
l 750,000.		669,555.	80,445.
m 200,000.		178,808.	21,192.
n 700,000.		592,737.	107,263.
o			0.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			56,390.
b			40,325.
c			255,470.
d			-1,604.
e			-15,528.
f			-3,004.
g			-4,447.
h			-22,687.
i			-1,348.
j			-191.
k			13,122.
l			80,445.
m			21,192.
n			107,263.
o			0.

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	

THE DAN AND MARGARET MADDOX FUND, INC.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a K-1: AEW PARTNERS FUND VIII FEEDER LP	P		12/31/21
b CAPITAL GAINS DIVIDENDS			
c			
d			
e			
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 67,849.			67,849.
b 451,373.			451,373.
c			
d			
e			
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			67,849.
b			451,373.
c			
d			
e			
f			
g			
h			
i			
j			
k			
l			
m			
n			
o			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	3,261,913.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	N/A

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BIG BROTHERS/BIG SISTERS OF MID-TN 1704 CHARLOTTE AVE., STE. 130 NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	30,000.
BOOK 'EM 161 RAINS AVE NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	10,000.
BOYS & GIRLS CLUB OF MAURY CO 210 W. 8TH ST COLUMBIA, TN 38401	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT FOR SUMMER PROGRAM	15,000.
BROOKLYN HEIGHTS COMMUNITY GARDEN 1830 HAYNES ST NASHVILLE, TN 37207	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	10,000.
CENTER FOR NONPROFIT MANAGEMENT 37 PEABODY ST, STE 201 NASHVILLE, TN 37210	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	14,223.
CHILDREN ARE PEOPLE 117 E WINCHESTER ST GALLATIN, TN 37066	NONE	PUBLIC	TO SUPPORT STUDENTS' VIRTUAL LEARNING	7,000.
CIVIC TN 5016 CENTENNIAL BLVD, STE 200 NASHVILLE, TN 37209	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	15,000.
COMMUNITIES IN SCHOOLS OF TENNESSEE 1207 18TH AVENUE SOUTH NASHVILLE, TN 37212	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	30,000.
COMMUNITY FOUNDATION OF MIDDLE TN 3833 CLEGHORN AVE NASHVILLE, TN 37215	NONE	PUBLIC	TO SUPPORT GIVINGMATTERS.COM.	5,000.
CONEXION AMERICAS 18TH AVE S, STE A NASHVILLE, TN 37203	NONE	PUBLIC	TO SUPPORT YOUTH AND EDUCATION PROGRAMS	40,000.
Total from continuation sheets				1,700,987.

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CONFLUENCE PHILATHROPY 209 W 29TH ST, BOX 6169 NEW YORK, NY 10001	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	1,500.
CROSSROADS PETS- SHOPS & ADOPT 707 MONROE STREET NASHVILLE, TN 37208	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	40,000.
CUMBERLAND RIVER COMPACT 2 VICTORY AVENUE, STE 300 NASHVILLE, TN 37213	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT	30,000.
D-Y-M-O-N IN THE ROUGH 208 TRAILWAY CIR NASHVILLE, TN 37207	NONE	PUBLIC	TO SUPPORT THE AFTERSCHOOL PROGRAM	25,000.
EAST NASHVILLE HOPE EXCHANGE 419 WOODLAND STREET NASHVILLE, TN 37206	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	12,000.
EDGEHILL NEIGHBORHOOD PARTNERSHIP 1414 EDGEHILL AVENUE NASHVILLE, TN 37212	NONE	PUBLIC	TO SUPPORT THE SPOT: BUILDING YOUNG WOMEN'S FUTURES	10,000.
ELEVATED DEVELOPMENT INC 5311 ABBOTTSWOOD DR SMYRNA, TN 37167	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	5,000.
ELMAHABA CENTER 705 AYLESFORD CT FRANKLIN, TN 37069	NONE	PUBLIC	TO SUPPORT YOUTH PROGRAMMING	10,000.
EQUAL CHANCE FOR EDUCATION 73 WHITE BRIDGE RD, STE 103 #351 NASHVILLE, TN 37205	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	40,500.
FAMILY & CHILDREN'S CENTER 201 23RD ACE N NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	500.
Total from continuation sheets				

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
FIFTYFORWARD 174 RAINS AVE. NASHVILLE, TN 37203	NONE	PUBLIC	TO SUPPORT THE FRIENDS LEARNING IN PAIRS (FLIP) PROGRAM.	20,000.
FISK UNIVERSITY 1000 SEVENTEENTH AVENUE NORTH NASHVILLE, TN 37208-3051	NONE	PUBLIC	TO SUPPORT THE YOUTH OUTDOOR PROGRAM	25,000.
FRANKTOWN OPEN HEARTS 412 CUMMINS STREET FRANKLIN, TN 37064	NONE	PUBLIC	TO SUPPORT THE OUTDOORS PROJECT	6,000.
FRIENDS OF MILL RIDGE PARK 5333 HICKORY HOLLOW PARKWAY ANTIOCH, TN 37013	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	25,000.
FROM THE HEART INTERNATIONAL 8120 SAWYER BROWN RD NASHVILLE, TN 37221	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	5,000.
GALLATIN SHALOM ZONE 600 SMALL STREET NASHVILLE, TN 37066	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	20,000.
GIDEON'S ARMY GRASSROOTS ARMY FOR CHILDREN 600 28TH AVENUE NORTH NASHVILLE, TN 37209	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT AND SUPPORT GID UNIVERITY.	50,100.
GIRL SCOUTS OF MIDDLE TENNESSEE 4522 GRANNY WHITE PIKE NASHVILLE, TN 37204	NONE	PUBLIC	TO SUPPORT THE L.E.A.D. PROGRAM FOR LOW-INCOME GIRLS.	25,000.
GLOBAL ARTS AND THEOLOGY EXPERIENCE 5300 TOWER TRAIL AUSTIN, TX 78705	NONE	PUBLIC	TO SUPPORT THE BLACK GIRL ACADEMY	6,000.
GOVERNOR'S EARLY LITERARY FOUNDATION 312 ROSA PARKS AVE, 27TH FLOOR NASHVILLE, TN 37243	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	25,000.
Total from continuation sheets				

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
GRANTMAKERS CONCERNED WITH IMMIGRANTS AND REFUGEES PO BOX 2178 PETALUMA, CA 94953	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	2,500.
GRANTMAKERS FOR EFFECTIVE ORGANIZATIONS 1310 L STREET NW, SUITE 650 WASHINGTON, DC 30005	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	2,500.
HANDS ON NASHVILLE 37 PEABODY STREET, SUITE 206 NASHVILLE, TN 37210	NONE	PUBLIC	TO SUPPORT THE STROBEL AWARDS AND AMERICORPS PROGRAM	47,500.
HARPETH CONSERVANCY 215 JAMESTOWN PARK, SUITE 101 NASHVILLE, TN 37027	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	20,000.
HIGHLANDER RESEARCH & EDUCATION CENTER INC 1959 HIGHLANDER WAY NEW MARKET, TN 37820	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	1,000.
HOMEWORK HOTLINE 4805 PARK AVENUE NASHVILLE, TN 37209	NONE	PUBLIC	OPPORTUNITY GRANT FOR TECHNOLOGY TO ENHANCE TUTORING SERVICES	32,500.
HORIZONS @ UNIVERSITY SCHOOL OF NASHVILLE 2000 EDGEHILL AVENUE NASHVILLE, TN 37212	NONE	PUBLIC	TO SUPPORT THE HORIZONS AFTERSCHOOL PROGRAM	20,000.
LAUNCH MENTORSHIP 1613 MALLARD CREEK COURT ANTIOCH, TN 37013	NONE	PUBLIC	TO SUPPORT SUMMER COLLGE PREP PROGRAM	5,000.
LAUNCH PAD PO BOX 330569 NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	40,000.
LEADERSHIP MIDDLE TENNESSEE 100 BLUEGRASS COMMONS BLVD., STE 2370 NASHVILLE, TN 37075-2738	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	300.
Total from continuation sheets				

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
LEGACY MISSION VILLAGE 6420 JOHNSON CHAPEL ROAD W BRENTWOOD, TN 37027	NONE	PUBLIC	TO SUPPORT JOURNEY REFUGEE YOUTH SERVICES	25,000.
LEWIS COUNTY HISTORICAL SOCIETY 108 EAST MAIN ST HOHENWALD, TN 38462	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT	10,000.
LIPSCOMB UNIVERSITY ONE UNIVERSITY PARK DRIV NASHVILLE, TN 37204	NONE	PUBLIC	TO SUPPORT THE PIONERO SCHOLARS PROGRAM TO INCREASE TEACHER DIVERSITY IN MNPS	15,000.
MARTHA O'BRYAN CENTER 711 SOUTH 7TH STREET NASHVILLE, TN 37206	NONE	PUBLIC	TO SUPPORT THE ACADEMIC STUDENT UNION POST SECONDARY SUCCESS PIPELINE.	25,000.
MONROE HARDING, INC. 1120 GLENDALE LANE NASHVILLE, TN 37204	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT	25,000.
MOSAIC CHANGEMAKERS P.O. BOX 90221 NASHVILLE, TN 37209	NONE	PUBLIC	TO PROVIDE PROGRAM SUPPORT FOR MOSAIC FELLOWSHIP	25,000.
NASHVILLE AREA CHAMBER OF COMMERCE 211 COMMERCE STREET, SUITE 100 NASHVILLE, TN 37201	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	500.
NASHVILLE FREEDOM SCHOOL PARTNERSHIP 104 FITZPATRICK COURT NASHVILLE, TN 37214	NONE	PUBLIC	TO SUPPORT STRATEGIC PLANNING.	25,000.
NASHVILLE INTERNATIONAL CENTER FOR ENPOWERMENT 417 WELSHWOOD DR., SUITE 100 NASHVILLE, TN 37211	NONE	PUBLIC	TO SUPPORT THE YOUTH IMPACT PROGRAM.	30,000.
NASHVILLE ORGANIZED FOR ACTION AND HOPE NOAH P.O. BOX 331144 NASHVILLE, TN 37203	NONE	PUBLIC	TO SUPPORT THE ORGANIZING YOUTH IN SCHOOLS PROJECT	20,000.
Total from continuation sheets				

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
NASHVILLE PEACEMAKERS 830 FESSLERS PARKWAY, SUITE 106 NASHVILLE, TN 37210	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT	10,000.
NASHVILLE PUBLIC EDUCATION FOUNDATION 1207 18TH AVENUE SOUTH, SUITE 202 NASHVILLE, TN 37212	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	10,500.
NASHVILLE PUBLIC LIBRARY FOUNDATION 615 CHURCH STREET NASHVILLE, TN 37219	NONE	PUBLIC	TO SUPPORT CAPACITY BUILDING AND PROFESSIONAL DEVELOPMENT FOR NAZA	25,000.
NASHVILLE TEACHER RESIDENCY 1224 MARTIN STREET NASHVILLE, TN 37203	NONE	PUBLIC	TO SUPPORT THE TEACHER RESIDENCY PROGRAM	25,000.
NATIONS MINISTRY CENTER PO BOX 128154 NASHVILLE, TN 37212	NONE	PUBLIC	TO PROVIDE COVID-19 SUPPLIES	16,300.
NATURE CONSERVANCY, TENNESSEE CHAPTER 2 MARYLAND WAY, SUITE 150 BRENTWOOD, TN 37027	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	15,000.
NURTURE THE NEXT 600 HILL AVE, SUITE 202 NASHVILLE, TN 37210	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	7,274.
OASIS CENTER 1704 CHARLOTTE AVE, STE 200 NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	50,000.
OPERATION ANDREW GROUP, INC. 2021 21ST AVE S, STE 100 NASHVILLE, TN 37212	NONE	PUBLIC	TO SUPPORT THE UNITED4HOPE PARTNERSHIP WITH MNPS HIGH PRIORITY SCHOOLS.	5,000.
PENCIL FOUNDATION 7199 COCKRILL BEND BLVD NASHVILLE, TN 37209	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	30,500.
Total from continuation sheets				

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
PERSIST NASHVILLE, INC. 1300 56TH AVENUE NORTH NASHVILLE, TN 37209	NONE	PUBLIC	TO SUPPORT METRO NASHVILLE PUBLIC SCHOOLS PERSISTENCE COACHING	25,000.
PROJECT TRANSFORMATION 1008 19TH AVENUE S NASHVILLE, TN 37212	NONE	PUBLIC	TO SUPPORT THE AFTERSCHOOL LITERACY DEVELOPMENT PROGRAM	5,000.
RAPHAH INSTITUTE 3280 WOODPOINT DR NASHVILLE, TN 37207	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	25,000.
SAFE HAVEN FAMILY SHELTER 1234 THIRD AVENUE SOUTH NASHVILLE, TN 37210	NONE	PUBLIC	TO SUPPORT THE SUMMER ENRICHMENT EXPERIENCE FOR DESERVING STUDENTS (SEEDS) PROGRAM.	15,000.
SALAMA URBAN MINISTRIES 1205 8TH AVENUE SOUTH NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	40,000.
SOUTHEASTERN CENTER FOR COOPERATIVE DEVELOPMENT 6207 CENTENNIAL BLVD NASHVILLE, TN 37209	NONE	PUBLIC	TO SUPPORT CAPACITY BUILDING AND SUMMER PROGRAMMING	15,000.
SOUTHEASTERN COUNCIL OF FOUNDATIONS 50 HURT PLAZA, STE 350 ATLANTA, GA 30303	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT	5,790.
SOUTHERN WORD INC. 1704 CHARLOTTE AVENUE, SUITE 200 NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT	20,000.
TENNESSEE AQUATIC PROJECT AND DEVELOPEMENT GROUP INC 1309 JACKSON ST. NASHVILLE, TN 37208	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT.	5,000.
TENNESSEE EDUCATORS OF COLOR ALLIANCE 1161 BUGGY CV CLARKSVILLE, TN 37043	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT	35,000.
Total from continuation sheets				

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
TENNESSEE ENVIRONMENTAL COUNCIL ONE VANTAGE WAY, STE E-250 NASHVILLE, TN 37228	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT	25,000.
TENNESSEE IMMIGRANT AND REFUGEE RIGHTS COALITION 3310 EZELL RD NASHVILLE, TN 37211	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT, YOUTH ORGANIZING AND FELLOWSHIP OPPORTUNITY.	35,000.
TENNESSEE JUSTICE FOR OUR NEIGHBORS 2195 NOLENSVILLE PIKE NASHVILLE, TN 37211	NONE	PUBLIC	TO SUPPORT DACA RECIPIENTS AND TO SUPPORT DACA RENEWALS AND PROVIDE DIRECT LEGAL REPRESENTATION.	20,000.
TENNESSEE STATE UNIVERSITY FOUNDATION 3500 JOHN A MERRITT BLVD, CAMPUS BOX 9542 NASHVILLE, TN 37209	NONE	PUBLIC	TO PROVIDE SUPPORT FOR COLLABORATION WITH URBAN GREEN LAB	10,000.
TENNESSEE WILDLIFE FEDERATION 300 ORLANDO AVE., STE. 200 NASHVILLE, TN 37209	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT	40,000.
THE EDUCATION TRUST 1501 K ST NW, STE 200 WASHINGTON, DC 20005	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT	15,000.
THE F.I.N.D. (FAMILIES IN NEED OF DIRECTION) DESIGN 2787 SMITH SPRINGS ROAD NASHVILLE, TN 37217	NONE	PUBLIC	TO PROVIDE CAPACITY BUILDING SUPPORT	30,000.
THE LAND TRUST FOR TENNESSEE 4000 FRANKLIN PIKE NASHVILLE, TN 37204	NONE	PUBLIC	TO PROVIDE CAPACITY BUILDING SUPPORT	10,000.
THE NASHVILLE FOOD PROJECT INC 3605 HILLSBORO PIKE NASHVILLE, TN 37215	NONE	PUBLIC	TO SUPPORT THE STORIES OF THE LAND PROJECT	3,000.
UNITED WAY OF METROPOLITAN NASHVILLE 250 VENTURE CIRCLE NASHVILLE, TN 37228	NONE	PUBLIC	TO SUPPORT THE BLUEPRINT FOR EARLY CHILDHOOD SUCCESS	25,000.
Total from continuation sheets				

Part XIV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
URBAN GREEN LAB P.O. BOX 68348 NASHVILLE, TN 37206	NONE	PUBLIC	TO SUPPORT THE ENVIRONMENTAL JUSTICE PROGRAM	28,500.
VOLUNTEER STATE SEAL OF BILITERACY 1014 LISCHY AVE NASHVILLE, TN 37207	NONE	PUBLIC	TO SUPPORT EQUITABLE TESTING SUPPORT FOR THE VOLUNTEER STATE SEAL OF BILITERACY	5,000.
WHY WE CAN'T WAIT 220 NATHAN DRIVE GOODLETTSVILLE, TN 37072	NONE	PUBLIC	TO PROVIDE COVID RELATED SUPPLIES FOR SUMMER PROGRAM	19,000.
WORKERS' DIGNITY PROJECT 335 WHITSETT ROAD NASHVILLE, TN 37210	NONE	PUBLIC	TO SUPPORT MUSIC CITY RIDERS UNITEDS YOUTH-LED ORGANIZING FOR PUBLIC TRANSIT	20,000.
YOUNG MEN'S CHRISTIAN ASSOC. OF MID-TN 1000 CHURCH STREET NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE CORE MISSION SUPPORT	50,500.
YOUTH INCORPORATED 4117 HILLSBORO PIKE, SUITE 103-256 NASHVILLE, TN 37215	NONE	PUBLIC	TO SUPPORT CAMP YI YOUTH HUNTING PROGRAM 2020	10,000.
YWCA 1608 WOODMONT BLVD NASHVILLE, TN 37215	NONE	PUBLIC	TO SUPPORT THE GIRLS INC. PROGRAM.	40,000.
Total from continuation sheets				

Underpayment of Estimated Tax by Corporations

▶ Attach to the corporation's tax return. **FORM 990-PF**

▶ Go to www.irs.gov/Form2220 for instructions and the latest information.

2021

Name **THE DAN AND MARGARET MADDOX FUND, INC.** Employer identification number **23-7017790**

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment

1	Total tax (see instructions)		1	57,051.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a		
2b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b		
2c	Credit for federal tax paid on fuels (see instructions)	2c		
2d	Total. Add lines 2a through 2c	2d		
3	Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty	3		57,051.
4	Enter the tax shown on the corporation's 2020 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5	4		17,280.
5	Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3	5		17,280.

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6 The corporation is using the adjusted seasonal installment method.
- 7 The corporation is using the annualized income installment method.
- 8 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)	
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	9	05/15/21	06/15/21	09/15/21	12/15/21
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	10	4,320.	4,320.	4,320.	4,320.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	11	8,178.		6,500.	2,602.
Complete lines 12 through 18 of one column before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column	12		3,858.		1,718.
13 Add lines 11 and 12	13		3,858.	6,500.	4,320.
14 Add amounts on lines 16 and 17 of the preceding column	14			462.	
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	8,178.	3,858.	6,038.	4,320.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		0.	0.	
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17		462.		
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18	3,858.		1,718.	

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19			
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2021 and before 7/1/2021	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 3\% (0.03)}{365}$	22	\$	\$	\$
23 Number of days on line 20 after 6/30/2021 and before 10/1/2021	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 3\% (0.03)}{365}$	24	\$	\$	\$
25 Number of days on line 20 after 9/30/2021 and before 1/1/2022	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 3\% (0.03)}{365}$	26	\$	\$	\$
27 Number of days on line 20 after 12/31/2021 and before 4/1/2022	27	SEE ATTACHED WORKSHEET		
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 3\% (0.03)}{365}$	28	\$	\$	\$
29 Number of days on line 20 after 3/31/2022 and before 7/1/2022	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$	30	\$	\$	\$
31 Number of days on line 20 after 6/30/2022 and before 10/1/2022	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$	32	\$	\$	\$
33 Number of days on line 20 after 9/30/2022 and before 1/1/2023	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$	34	\$	\$	\$
35 Number of days on line 20 after 12/31/2022 and before 3/16/2023	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$	36	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$
38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns	38	\$		3.

* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

FORM 990-PF
UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s) THE DAN AND MARGARET MADDOX FUND, INC.					Identifying Number 23-7017790
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(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
05/15/21	4,320.	4,320.			
05/15/21	-8,178.	-3,858.			
06/15/21	4,320.	462.	87	.000082192	3.
09/10/21	-6,500.	-6,038.			
09/15/21	4,320.	-1,718.			
10/29/21	-2,602.	-4,320.			
12/15/21	4,320.	0.			
03/31/22	0.	0.	45	.000109589	

Penalty Due (Sum of Column F).	3.
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* Date of estimated tax payment, withholding
 credit date or installment due date.

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
K-1: CORE FIXED INCOME CTF	100,529.	100,529.	
K-1: DTC SHORT DURATION FIXED INCOME CTF	15,868.	15,868.	
K-1: METROPOLITAN REAL ESTATE SECONDARY	402.	402.	
K-1: AEW PARTNERS FUND VIII FEEDER LP	16,898.	16,898.	
K-1: DTC PRIVATE EQUITY IV, LP	11,652.	11,652.	
K-1: DTC PRIVATE EQUITY VI, LP	7,863.	7,863.	
K-1: DTC PRIVATE EQUITY V-Q, LP	16,582.	16,582.	
K-1: METROPOLITAN REAL ESTATE PINNACLE BANK	1,614. 421.	1,614. 421.	
TOTAL TO PART I, LINE 3	171,829.	171,829.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DTC FORM 1099	823,486.	451,373.	372,113.	372,113.	
K-1: AEW PARTNERS FUND VIII	136.	0.	136.	136.	
K-1: CORE FIXED INCOME CTF	2,365.	0.	2,365.	2,365.	
K-1: DTC PRIVATE EQUITY IV, LP	15,564.	0.	15,564.	15,564.	
K-1: DTC PRIVATE EQUITY V, LP	49,479.	0.	49,479.	49,479.	
K-1: DTC PRIVATE EQUITY VI - Q, LP	29,780.	0.	29,780.	29,780.	
K-1: DTC SHORT DURATION FIXED INCOME CTF	4.	0.	4.	4.	
K-1: INTERNATIONAL EQUITY CTF	242,182.	0.	242,182.	242,182.	
K-1: METROPOLITAN REAL ESTATE PARTNERS	1,275.	0.	1,275.	1,275.	
K-1: METROPOLITAN REAL ESTATE PARTNERS SECONDARY	20.	0.	20.	20.	
TO PART I, LINE 4	1,164,291.	451,373.	712,918.	712,918.	

FORM 990-PF

OTHER INCOME

STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
K-1:METRO REAL ESTATE	4,118.	3,859.	
K-1: DTC PRIVATE EQ IV	24,911.	22,369.	
K-1: METROPOLITAN REAL ESTATE SECONDARY	207,716.	197,728.	
K-1: CORE FIXED INCOME CTF	260.	260.	
K-1: DTC PRIVATE EQ V	75,354.	39,578.	
K-1: DTC PRIVATE EQ VI	-37,946.	2,923.	
K-1: AEW PARTNERS FUND VIII FEEDER LP	338,048.	359,221.	
TOTAL TO FORM 990-PF, PART I, LINE 11	612,461.	625,938.	

FORM 990-PF

ACCOUNTING FEES

STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	22,900.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	22,900.	0.		0.

FORM 990-PF

OTHER PROFESSIONAL FEES

STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL SERVICE	2,561.	0.		2,369.
CONSULTANTS	40,911.	0.		21,293.
TO FORM 990-PF, PG 1, LN 16C	43,472.	0.		23,662.

FORM 990-PF

TAXES

STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL TAXES	17,170.	0.		15,626.
FROM K-1'S: FOREIGN INCOME TAXES	37,759.	37,759.		0.
FEDERAL INCOME TAXES PAID	32,200.	0.		0.
FOREIGN INCOME TAX - FORM 1099	3,391.	3,391.		0.
TO FORM 990-PF, PG 1, LN 18	90,520.	41,150.		15,626.

FORM 990-PF

OTHER EXPENSES

STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BOARD & COMMITTEE ACTIVITIES	2,756.	0.		2,067.
INSURANCE	9,826.	0.		7,370.
INVESTMENT EXPENSES	171,713.	171,713.		0.
K-1: CORE FIXED INCOME	7,145.	7,145.		0.
K-1: DTC PRIVATE EQUITY IV, LP	59,588.	59,588.		0.
K-1: DTC PRIVATE EQUITY V-Q, LP	176,081.	176,081.		0.
K-1: DTC SHORT DURATION FIXED INCOME	1,693.	1,693.		0.
K-1: INTERNATIONAL EQUITY COMMON TRUST	33,982.	33,982.		0.
K-1: METRO REAL ESTATE PARTNERS	8,494.	8,494.		0.
K-1: METRO REAL ESTATE PARTNERS SECONDARY	20,810.	20,810.		0.
MISCELLANEOUS	581.	0.		495.
OFFICE EXPENSE	15,936.	0.		13,383.
K-1: AEW PARTNERS FUND VIII FEEDER	4,036.	4,036.		0.
K-1: DTC PRIVATE EQUITY VI-Q, LP	143,532.	143,532.		0.
TO FORM 990-PF, PG 1, LN 23	656,173.	627,074.		23,315.

FORM 990-PF

CORPORATE STOCK

STATEMENT 8

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
VANGUARD EXTENDED MARKET INDEX FUND	1,335,933.	2,500,837.
VANGUARD FTSE ALL WORLD EX-US INDEX FUND	974,415.	1,339,381.
VANGUARD INSTITUTIONAL INDEX FD	2,199,987.	5,492,375.
TOTAL TO FORM 990-PF, PART II, LINE 10B	4,510,335.	9,332,593.

FORM 990-PF

OTHER INVESTMENTS

STATEMENT 9

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
AEW PARTNERS FUN DVIII FEEDER, L.P.	COST	519,977.	912,167.
DTC CORE FIXED INCOME CTF	COST	4,089,426.	4,157,213.
DTC INTERNATIONAL EQUITY COMMON TRUST FUND	COST	6,612,355.	7,651,256.
DTC PRIVATE EQUITY IV, LP	COST	1,391,190.	2,947,392.
DTC PRIVATE EQUITY VI, LP	COST	3,250,000.	4,674,487.
DTC PRIVATE EQUITY V-Q LP	COST	3,167,071.	6,196,444.
DTC SHORT DURATION FIXED INCOME	COST	987,586.	978,089.
GMO QUALITY FUND	COST	5,891,767.	7,165,008.
METRO REAL ESTATE PARTNERS GLOBAL V, LP	COST	275,155.	396,230.
METROPOLITAN REAL ESTATE PARTNERS SCIF	COST	1,159,895.	1,389,028.
PALOMA INTERNATIONAL LTD	COST	4,400,000.	5,487,145.
WINSTON GLOBAL	COST	1,656,718.	3,068,997.
COLUMBIA STRATEGIC INCOME FUND	COST	1,510,280.	1,473,865.
TOTAL TO FORM 990-PF, PART II, LINE 13		34,911,420.	46,497,321.

FORM 990-PF

PART VII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 10

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ANA ESCOBAR 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	VICE CHAIR 1.00	0.	0.	0.
DAVID ESQUIVEL 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	TRUSTEE 1.00	0.	0.	0.
JIMMIE JOHNSON 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	TRUSTEE 1.00	0.	0.	0.
MOLLIE SEHRING 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	TRUSTEE 1.00	0.	0.	0.
MARY K. FRISKICS-WARREN 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	EXECUTIVE DIRECTOR 40.00	142,999.	14,100.	0.
JOSEPH GUTIERREZ 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	PROGRAM OFFICER 40.00	85,775.	0.	0.
JAMIE SOCHOVKA 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	TRUSTEE 1.00	0.	0.	0.
JACKY AKBARI 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	TRUSTEE 1.00	0.	0.	0.
HASINA MOHYUDDIN 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	CHAIR 1.00	0.	0.	0.
MELISSA GORDON 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	TRUSTEE 1.00	0.	0.	0.

THE DAN AND MARGARET MADDOX FUND, INC.

23-7017790

JAMAAL SHEATS	TRUSTEE			
100 TAYLOR STREET, SUITE A-20	1.00	0.	0.	0.
NASHVILLE, TN 37208				

CATHY BENDER	TRUSTEE			
100 TAYLOR STREET, SUITE A-20	1.00	0.	0.	0.
NASHVILLE, TN 37208				

TOMMYE MADDOX	TRUSTEE			
100 TAYLOR STREET, SUITE A-20	1.00	0.	0.	0.
NASHVILLE, TN 37208				

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII

<u>228,774.</u>	<u>14,100.</u>	<u>0.</u>
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CLIENT COPY

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION
PART XIV, LINES 2A THROUGH 2D

STATEMENT 11

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

DAN AND MARGARET MADDOX CHARITABLE TRUST, ATTN: MARY K. FIRSKICS-WARREN
100 TAYLOR STREET, SUITE A -20
NASHVILLE, TN 37208

TELEPHONE NUMBER

615-385-1006

FORM AND CONTENT OF APPLICATIONS

APPLICATION IS FILED ONLINE AT WWW.MADDOXFUND.ORG

ONLINE APPLICATION INCLUDES: ORGANIZATION HISTORY, PROGRAM DESCRIPTIONS,
OUTCOMES AND BUDGET (ON REQUIRED FORM).

ANY SUBMISSION DEADLINES

JANUARY 15 OF EACH YEAR. SEE WEB SITE AT WWW.MADDOXFUND.ORG FOR MORE
DETAILS.

RESTRICTIONS AND LIMITATIONS ON AWARDS

MIDDLE TENNESSEE COUNTIES IN THE AREAS OF EDUCATION, LOW INCOME YOUTH AND
PROGRAMS THAT SUPPORT AND PROTECT WILDLIFE HABITATS. A DETAILED FREQUENTLY
ASKED QUESTIONS IS ON THE WEB SITE AT WWW.MADDOXFUND.ORG DURING THE GRANT
SEASON.

FORM 990-PF

OTHER REVENUE

STATEMENT 12

DESCRIPTION	BUS CODE	UNRELATED BUSINESS INC	EXCL CODE	EXCLUDED AMOUNT	RELATED OR EXEMPT FUNC- TION INCOME
K-1:METRO REAL ESTATE	531390	259.	14	3,859.	
K-1: DTC SHORT DURATION			14		
K-1: DTC PRIVATE EQ IV		2,542.	14	22,369.	
K-1: BROAD BASED COMSUMER			14		
K-1: METROPOLITAN REAL ESTATE SECONDARY	531390	9,988.	14	197,728.	
K-1: CORE FIXED INCOME CTF			14	260.	
K-1: DTC PRIVATE EQ V		35776.	14	39,578.	
K-1: DTC PRIVATE EQ VI		-40869	14	2,923.	
K-1: AEW PARTNERS FUND VIII FEEDER LP		-21173	14	359,221.	
UBS AG JERSEY E TRACS			14		
K-1: INTERNATIONAL EQUITY COMMON TRUST FUND			14		
TOTAL TO FORM 990-PF, PG 12, LN 11		-13,477.		625,938.	

DETAIL CARRYOVER SCHEDULE

Type and Entity: K-1 PASSIVE INVESTMENT POST-2017 NO

Year Originated	Original Carryover Amount	Total Amount Used	Section 382 Carryover		Amount Used for 12/31/20	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for	Amount Used for
			Amount Used for 12/31/19	Amount Used for								
2018	93,027.	93,027.	69,165.	23,862.								
2021	13,477.											
A												
B												
C												
D												
E												
F												
G												
H												
I												
J												
K												
L												
M												
N												
O												
P												
Q												
R												
S												
T												
U												
V												
W												
Detail Type												
E												
S												
B												
C												
A												
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C												
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V												
W												

IRS e-file Signature Authorization for a Tax Exempt Entity

For calendar year 2021, or fiscal year beginning _____, 2021, and ending _____, 20__

2021

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879TE for the latest information.**

Name of filer **THE DAN AND MARGARET MADDOX FUND, INC.** EIN or SSN **23-7017790**

Name and title of officer or person subject to tax **MOLLY SEHRING
CHAIR**

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here	<input type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b _____
2a Form 990-EZ check here	<input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here	<input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here	<input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b _____
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b _____
6a Form 990-T check here	<input checked="" type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b <u>0.</u>
7a Form 4720 check here	<input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b _____
8a Form 5227 check here	<input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b _____
9a Form 5330 check here	<input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b _____
10a Form 8038-CP check here	<input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b _____

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

Under penalties of perjury, I declare that I am an officer of the above entity or I am a person subject to tax with respect to (name of entity) _____, (EIN) _____ and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

I authorize **CHERRY BEKAERT LLP** to enter my PIN **20136**
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2021 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax _____ Date _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

62017717323
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2021 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature _____ Date _____

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. THE DAN AND MARGARET MADDOX FUND, INC.	Taxpayer identification number (TIN) 23-7017790
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 100 TAYLOR STREET, A-20	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NASHVILLE, TN 37208	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 7

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

REV. MARY K. FRISKICS-WARREN

• The books are in the care of ▶ **100 TAYLOR STREET, A-20 - NASHVILLE, TN 37208**

Telephone No. ▶ **615-481-8787**

Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2022**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year **2021** or
- ▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	7,849.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	5,849.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	2,000.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

2021

For calendar year 2021 or other tax year beginning _____, and ending _____

▶ **Go to www.irs.gov/Form990T for instructions and the latest information.**
▶ **Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).**

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

<p>A <input type="checkbox"/> Check box if address changed.</p> <p>B Exempt under section <input checked="" type="checkbox"/> 501(c)(3)) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a) <input type="checkbox"/> 529A</p>	<p>Print or Type</p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) THE DAN AND MARGARET MADDOX FUND, INC.</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. 100 TAYLOR STREET, A-20</p> <p>City or town, state or province, country, and ZIP or foreign postal code NASHVILLE, TN 37208</p>	<p>D Employer identification number 23-7017790</p> <p>E Group exemption number (see instructions)</p> <p>F <input type="checkbox"/> Check box if an amended return.</p>
<p>C Book value of all assets at end of year ▶ 41,069,678.</p>			

G Check organization type ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust

H Check if filing only to ▶ Claim credit from Form 8941 Claim a refund shown on Form 2439

I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation ▶

J Enter the number of attached Schedules A (Form 990-T) ▶ **1**

K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes No
If "Yes," enter the name and identifying number of the parent corporation. ▶

L The books are in care of ▶ **REV. MARY K. FRISKICS-WARREN** Telephone number ▶ **615-481-8787**

Part I Total Unrelated Business Taxable Income		
1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	0.
2 Reserved	2	
3 Add lines 1 and 2	3	
4 Charitable contributions (see instructions for limitation rules)	4	0.
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5	
6 Deduction for net operating loss. See instructions	6	
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	
8 Specific deduction (generally \$1,000, but see instructions for exceptions)	8	1,000.
9 Trusts. Section 199A deduction. See instructions	9	
10 Total deductions. Add lines 8 and 9	10	1,000.
11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	0.

Part II Tax Computation		
1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	0.
2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	2	
3 Proxy tax. See instructions	3	
4 Other tax amounts. See instructions	4	
5 Alternative minimum tax (trusts only)	5	
6 Tax on noncompliant facility income. See instructions	6	
7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7	0.

LHA For Paperwork Reduction Act Notice, see instructions.

Part III Tax and Payments				
1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a			
b Other credits (see instructions)	1b			
c General business credit. Attach Form 3800 (see instructions)	1c			
d Credit for prior year minimum tax (attach Form 8801 or 8827)	1d			
e Total credits. Add lines 1a through 1d	1e			
2 Subtract line 1e from Part II, line 7	2			0.
3 Other amounts due. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement)	3			
4 Total tax. Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here	4			0.
5 Current net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4	5			0.
6a Payments: A 2020 overpayment credited to 2021	6a	5,849.		
b 2021 estimated tax payments. Check if section 643(g) election applies	6b			
c Tax deposited with Form 8868	6c	2,000.		
d Foreign organizations: Tax paid or withheld at source (see instructions)	6d			
e Backup withholding (see instructions)	6e			
f Credit for small employer health insurance premiums (attach Form 8941)	6f			
g Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439	6g			
<input type="checkbox"/> Form 4136				
7 Total payments. Add lines 6a through 6g	7			7,849.
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached	8			
9 Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	9			
10 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10			7,849.
11 Enter the amount of line 10 you want: Credited to 2022 estimated tax 7,849. Refunded	11			0.

Part IV Statements Regarding Certain Activities and Other Information (see instructions)			
1 At any time during the 2021 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here ▶		Yes	No
			X
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?			X
If "Yes," see instructions for other forms the organization may have to file.			
3 Enter the amount of tax-exempt interest received or accrued during the tax year			
4 Enter available pre-2018 NOL carryovers here ▶ \$			
Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 4.			
5 Post-2017 NOL carryovers. Enter available Business Activity Code and post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.			
Business Activity Code	Available post-2017 NOL carryover		
	\$		
	\$		
6a Did the organization change its method of accounting? (see instructions)			X
b If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V			

Part V Supplemental Information

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer _____	Date _____	CHAIR Title	May the IRS discuss this return with the preparer shown below (see instructions)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	RYAN BLANKENSHIP			P01336455
	Firm's name ▶ CHERRY BEKAERT LLP	Firm's EIN ▶ 56-0574444		
	Firm's address ▶ 222 SECOND AVENUE S, SUITE 1240		Phone no. 615-383-6592	
	NASHVILLE, TN 37201			

**SCHEDULE A
(Form 990-T)**

Department of the Treasury
Internal Revenue Service

**Unrelated Business Taxable Income
From an Unrelated Trade or Business**

▶ Go to www.irs.gov/Form990T for instructions and the latest information.
▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

1

OMB No. 1545-0047

2021

Open to Public Inspection for
501(c)(3) Organizations Only

A Name of the organization THE DAN AND MARGARET MADDOX FUND, INC.	B Employer identification number 23-7017790
C Unrelated business activity code (see instructions) ▶ 900003	D Sequence: 1 of 1

E Describe the unrelated trade or business ▶ **K-1 PASSIVE INVESTMENTS**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales				
b Less returns and allowances	c Balance ▶			
2 Cost of goods sold (Part III, line 8)	2			
3 Gross profit. Subtract line 2 from line 1c	3			
4 a Capital gain net income (attach Sch D (Form 1041 or Form 1120)). See instructions	4a			
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b			
c Capital loss deduction for trusts	4c			
5 Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 13	5	-13,477.		-13,477.
6 Rent income (Part IV)	6			
7 Unrelated debt-financed income (Part V)	7			
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8			
9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	9			
10 Exploited exempt activity income (Part VIII)	10			
11 Advertising income (Part IX)	11			
12 Other income (see instructions; attach statement)	12			
13 Total. Combine lines 3 through 12	13	-13,477.		-13,477.

Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

1 Compensation of officers, directors, and trustees (Part X)		1	
2 Salaries and wages		2	
3 Repairs and maintenance		3	
4 Bad debts		4	
5 Interest (attach statement). See instructions		5	
6 Taxes and licenses		6	
7 Depreciation (attach Form 4562). See instructions	7		
8 Less depreciation claimed in Part III and elsewhere on return	8a		8b
9 Depletion		9	
10 Contributions to deferred compensation plans		10	
11 Employee benefit programs		11	
12 Excess exempt expenses (Part VIII)		12	
13 Excess readership costs (Part IX)		13	
14 Other deductions (attach statement)		14	
15 Total deductions. Add lines 1 through 14		15	0.
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)		16	-13,477.
17 Deduction for net operating loss. See instructions		17	0.
18 Unrelated business taxable income. Subtract line 17 from line 16		18	-13,477.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2021

Part III Cost of Goods Sold Enter method of inventory valuation ▶

1 Inventory at beginning of year	1	
2 Purchases	2	
3 Cost of labor	3	
4 Additional section 263A costs (attach statement)	4	
5 Other costs (attach statement)	5	
6 Total. Add lines 1 through 5	6	
7 Inventory at end of year	7	
8 Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2	8	
9 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.

A _____

B _____

C _____

D _____

	A	B	C	D
2 Rent received or accrued				
a From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A) ▶ 0.				
4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)				
5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B) ▶ 0.				

Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.

A _____

B _____

C _____

D _____

	A	B	C	D
2 Gross income from or allocable to debt-financed property				
3 Deductions directly connected with or allocable to debt-financed property				
a Straight line depreciation (attach statement)				
b Other deductions (attach statement)				
c Total deductions (add lines 3a and 3b, columns A through D)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5 Average adjusted basis of or allocable to debt-financed property (attach statement)				
6 Divide line 4 by line 5	%	%	%	%
7 Gross income reportable. Multiply line 2 by line 6				
8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A) ▶ 0.				
9 Allocable deductions. Multiply line 3c by line 6				
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B) ▶ 0.				
11 Total dividends-received deductions included in line 10 ▶ 0.				

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					
Nonexempt Controlled Organizations					
7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)					
(2)					
(3)					
(4)					
			Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)	
Totals			0.	0.	

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A)		Add amounts in column 5. Enter here and on Part I, line 9, column (B)
Totals		0.		0.

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1	Description of exploited activity: _____	
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) _____	2
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B) _____	3
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7 _____	4
5	Gross income from activity that is not unrelated business income _____	5
6	Expenses attributable to income entered on line 5 _____	6
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12 _____	7

Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

- A
- B
- C
- D

Enter amounts for each periodical listed above in the corresponding column.

	A	B	C	D
2 Gross advertising income				
Add columns A through D. Enter here and on Part I, line 11, column (A)				0.

a

3 Direct advertising costs by periodical				
a Add columns A through D. Enter here and on Part I, line 11, column (B)				0.

4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8

5 Readership costs

6 Circulation income

7 Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero

8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7

a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13

				0.
--	--	--	--	----

Part X Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on Part II, line 1			0.

Part XI Supplemental Information (see instructions)

FORM 990-T (A)

INCOME (LOSS) FROM PARTNERSHIPS

STATEMENT 13

DESCRIPTION	NET INCOME OR (LOSS)
DTC PRIVATE EQUITY IV,LP - ORDINARY BUSINESS INCOME (LOSS)	2,542.
DTC PRIVATE EQUITY V, LP - ORDINARY BUSINESS INCOME (LOSS)	35,776.
MREP GLOBAL V, LP - ORDINARY BUSINESS INCOME (LOSS)	259.
MREP SCIF - ORDINARY BUSINESS INCOME (LOSS)	9,988.
AEW PARTNERS VIII FEEDER - ORDINARY BUSINESS INCOME (LOSS)	-21,173.
DTC PRIVATE EQUITY VI,LP - ORDINARY BUSINESS INCOME (LOSS)	-40,869.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5	-13,477.

CLIENT COPY

2021 TAX RETURN FILING INSTRUCTIONS

TENNESSEE FORM FAE 170

FOR THE YEAR ENDING

December 31, 2021

Prepared For:

The Dan & Margaret Maddox Fund, INC.
100 Taylor Street, A-20
Nashville, TN 37208

Prepared By:

Cherry Bekaert LLP
222 Second Ave, South Ste 1240
Nashville, TN 37201
615-383-6592

To Be Signed and Dated By:

Not applicable

Amount of Tax:

Total tax	\$	100
Less: payments and credits	\$	100
Plus: other amount	\$	0
Plus: interest and penalties	\$	0
No payment required	\$	

Overpayment:

Not applicable

Make Check Payable to:

Not applicable

File Tax Return and Make Payment (if applicable):

This return has been prepared for electronic filing. If you wish to have it transmitted to the TNDOR, please contact our office and we will submit your electronic return. Do not mail the paper copy to the TNDOR.

Return Must be Filed On or Before:

Please return signed to us as soon as possible, but no later than **by November 15, 2022 by Noon**. Print, sign, and return forms by fax to 844-487-1050 or scan, and upload to your Client Portal account. To set up a portal account contact gfrsupport@cbh.com. Any paper returns must be mailed.

Special Instructions:

Electronic filing regulations require you to return the signed authorization forms within TEN DAYS of our processing your tax returns.

We appreciate your assistance!

If applicable, we have enclosed mailing envelopes for your convenience in filing your returns. We recommend that you use **CERTIFIED MAIL** with postmarked receipt for proof of timely filing.

CLIENT COPY

TENNESSEE DEPARTMENT OF REVENUE
Application for Extension of Time to File
2021 Franchise and Excise Tax Return

FAE
173

Table with 2 columns: Tax Year Beginning/Ending and Account Number/FEIN. Values: 01/01/21, 12/31/21, 1001659015.

A seven- month extension will be granted, provided you meet the requirements outlined in the instructions.

Legal Name: THE DAN & MARGARET MADDOX FUND, INC.
Mailing Address: 100 TAYLOR STREET, A-20
City: NASHVILLE
State: TENNESSEE
ZIP Code: 37208

You may make your payment through TNTAP at tntap.tn.gov/eservices or mail your payment along with this form to:

Tennessee Department of Revenue
Andrew Jackson State Office Building
500 Deaderick Street, Nashville, TN 37242

Computation of Extension Payment

Round to the nearest dollar

- 1. Estimated franchise tax current year (1) 100
2. Estimated excise tax current year (2)
3. Deduct prior year's overpayments and current year's estimated payments and tax credits (3)
4. Amount due with extension request (Lines 1 and 2, subtract Line 3 see instructions) (4) 100

Under penalties of perjury, I declare that I have examined this report, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature lines for Taxpayer, Preparer, and Preparer's Email Address. Includes fields for Date, Title, PTIN, Telephone, City, State, and ZIP Code.

FOR OFFICE USE ONLY

Barcode area consisting of two rows of empty boxes.

**TENNESSEE DEPARTMENT OF REVENUE
2021 Franchise and Excise Tax Return**

**FAE
170**

Tax Year Beginning 01/01/21	Account Number 1001659015	Check all that apply: a) Amended return <input type="checkbox"/> b) Final return <input type="checkbox"/> c) Public Law 86-272 applied to excise tax <input type="checkbox"/> d) Taxpayer has made an election to calculate net worth per the provisions of Tenn. Code Ann. § 67-4-2103(g)-(i) <input type="checkbox"/> e) Taxpayer has filed the prescribed form to revoke its election made per Tenn. Code Ann. § 67-4-2103(g)-(i) <input type="checkbox"/> f) Annualized income installment method for quarterly estimates election <input type="checkbox"/> g) Manufacturer single sales factor election <input type="checkbox"/> h) Taxpayer has filed for federal extension <input type="checkbox"/>
Tax Year Ending 12/31/21	FEIN 23-7017790	
NAICS 541990	SOS Control Number	
Legal Name THE DAN & MARGARET MADDOX FUND, INC.		
Mailing Address 100 TAYLOR STREET, A-20		
City NASHVILLE		
State TENNESSEE	ZIP Code 37208	Date Tennessee operations began (see instructions)

Schedule A - Computation of Franchise Tax

1. Total net worth Schedule F1, Line 5 or Schedule F2, Line 3	(1)	<u> -13477.</u>
2. Total real and tangible personal property from Schedule G, Line 15	(2)	<u> </u>
3. Franchise tax (25¢ per \$100 or major fraction thereof on the greater of Lines 1 or 2; minimum \$100)	(3)	<u> 100.</u>

Schedule B - Computation of Excise Tax

4. Income subject to excise tax from Schedule J, Line 34	(4)	<u> -13477.</u>
5. Excise tax (6.5% of Line 4)	(5)	<u> 0.</u>
6. Recapture of tax credit (Schedule T, Line 13) and additional excise tax on certified distribution sales	(6)	<u> </u>
7. Total excise tax due (add Lines 5 and 6)	(7)	<u> 0.</u>

Schedule C - Computation of Total Tax Due or Overpayment

8. Total franchise and excise taxes (add Lines 3 and 7)	(8)	<u> 100.</u>
9. Total credit from Schedule D, Line 10 (cannot exceed Schedule C, Line 8)	(9)	<u> </u>
10. Net tax (subtract Line 9 from Line 8; if Line 9 exceeds Line 8, enter zero here)	(10)	<u> 100.</u>
11. Total payments from Schedule E, Line 7	(11)	<u> 100.</u>
12. Penalty (see instructions)	(12)	<u> </u>
13. Interest (see instructions)	(13)	<u> </u>
14. Penalty on estimated franchise and excise tax payments	(14)	<u> </u>
15. Interest on estimated franchise and excise tax payments	(15)	<u> </u>
16. Total amount due (overpaid) (add Lines 10, 12, 13, 14, and 15, subtract Line 11)	(16)	<u> 0.</u>

If overpayment reported on Line 16, complete A and/or B below:

A. Credit to next year's tax \$ _____ B. Refund \$ _____

Power of Attorney - Check YES if this taxpayer's signature certifies that this tax preparer has the authority to execute this form on behalf of the taxpayer and is authorized to receive and inspect confidential tax information and to perform any and all acts relating to respective tax matters. <input checked="" type="checkbox"/> YES	Under penalties of perjury, I declare that I have examined this report, and to the best of my knowledge and belief, it is true, correct, and complete. <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; border-bottom: 1px solid black;">Taxpayer's Signature</td> <td style="width:20%; border-bottom: 1px solid black;">Date</td> <td style="width:30%; text-align: center;">CHAIR</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Tax Preparer's Signature</td> <td style="border-bottom: 1px solid black;">Date</td> <td style="text-align: center;">Telephone</td> </tr> <tr> <td style="text-align: center;">P01336455</td> <td></td> <td style="text-align: center;">615-383-6592</td> </tr> <tr> <td style="text-align: center;">Preparer's PTIN</td> <td></td> <td style="text-align: center;">Telephone</td> </tr> <tr> <td style="border-bottom: 1px solid black;">222 SECOND AVE, SOUT</td> <td style="border-bottom: 1px solid black;">NASHVILLE</td> <td style="border-bottom: 1px solid black;">TN 37201</td> </tr> <tr> <td style="text-align: center;">Preparer's Address</td> <td style="text-align: center;">City</td> <td style="text-align: center;">State ZIP Code</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Preparer's Email Address</td> <td colspan="2" style="border-bottom: 1px solid black;">RBLANKENSHIP@CBH.COM</td> </tr> </table>	Taxpayer's Signature	Date	CHAIR	Tax Preparer's Signature	Date	Telephone	P01336455		615-383-6592	Preparer's PTIN		Telephone	222 SECOND AVE, SOUT	NASHVILLE	TN 37201	Preparer's Address	City	State ZIP Code	Preparer's Email Address	RBLANKENSHIP@CBH.COM	
Taxpayer's Signature	Date	CHAIR																				
Tax Preparer's Signature	Date	Telephone																				
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Preparer's Address	City	State ZIP Code																				
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Taxable Year 01/01/21 12/31/21	Taxpayer Name THE DAN & MARGARET MADDOX FUND, INC.	Account No./FEIN 1001659015
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Schedule D - Schedule of Credits

1. Gross Premiums Tax Credit (cannot exceed Schedule C, Line 8)	(1)	_____
2. Tennessee income tax (cannot exceed Schedule B, Line 5)	(2)	_____
3. Green Energy Tax Credit from business plans filed prior to July 1, 2015	(3)	_____
4. Brownfield Property Credit	(4)	_____
5. Broadband Internet Access Tax Credit carryover for service providers	(5)	_____
6. Industrial Machinery and Research and Development Tax Credit from Schedule T, Line 11	(6)	_____
7. Job Tax Credit from Schedule X, Line 46	(7)	_____
8. Additional Annual Job Tax Credit from Schedule X, Line 38	(8)	_____
9. Qualified Production Credit from Schedule QP, Line 12	(9)	_____
10. Total credit (add Lines 1 through 9; enter here and on Schedule C, Line 9)	(10)	_____

Schedule E - Schedule of Required Quarterly Installments and Payments

	Required Quarterly Installments	Amount Paid
1. Overpayment from previous year, if available	(1)	_____
2. First quarterly estimate (2a)	0.	(2b) _____
3. Second quarterly estimate (3a)	0.	(3b) _____
4. Third quarterly estimate (4a)	0.	(4b) _____
5. Fourth quarterly estimate (5a)	0.	(5b) _____
6. Extension payment	(6)	100.
7. Total payments (add Lines 1 through 6; enter here and on Schedule C, Line 11)	(7)	100.

Computation of Franchise Tax

Schedule F1 - Non-Consolidated Net Worth

1. Net worth (total assets less total liabilities)	(1)	-13477.
2. Indebtedness to or guaranteed by parent or affiliated corporation (cannot be a deduction)	(2)	_____
3. Total (add Lines 1 and 2)	(3)	-13477.
4. Franchise tax apportionment ratio (Schedules N, O, P, R or S if applicable or 100%)	(4)	100.000000 %
5. Total (multiply Line 3 by Line 4; enter here and on Schedule A, Line 1)	(5)	-13477.

Schedule F2 - Consolidated Net Worth

Schedule F2 is to be completed only if the Consolidated Net Worth Election Registration Application has been filed.

1. Consolidated net worth (total assets less total liabilities of the affiliated group)	(1)	_____
2. Franchise tax apportionment ratio (Schedule 170NC, 170SF or 170SC)	(2)	_____ %
3. Total (multiply Line 1 by Line 2; enter here and on Schedule A, Line 1)	(3)	_____

Schedule G - Determination of Real and Tangible Property

Book Value of Property Owned - Cost less accumulated depreciation

	In Tennessee
1. Land	(1) _____
2. Buildings, leaseholds, and improvements	(2) _____
3. Machinery, equipment, furniture, and fixtures	(3) _____
4. Automobiles and trucks	(4) _____
5. Prepaid supplies and other tangible personal property	(5) _____
6. Ownership share of real and tangible property of a partnership that does not file a return	(6) _____
7. a. Inventories and work in progress	(7a) _____
b. Exempt finished goods inventory in excess of \$30 million	(7b) _____
8. Certified pollution control equipment (include copy of certificate) and equipment used to produce electricity at a certified green energy production facility	(8) _____
9. Exempt required capital investment	(9) _____
10. Subtotal (add Lines 1 through 7a, subtract Lines 7b through 9)	(10) _____

Rental Value of Property Used but Not Owned

Net Annual Rental Paid for:

	In Tennessee	
11. Real property	_____	x8 (11) _____
12. Machinery and equipment used in manufacturing and processing	_____	x3 (12) _____
13. Furniture, office machinery, and equipment	_____	x2 (13) _____
14. Delivery or mobile equipment	_____	x1 (14) _____
15. Tennessee total (add Lines 10 through 14; enter here and on Schedule A, Line 2)	_____	(15) _____

Schedule H - Gross Receipts

1. Gross receipts or sales per federal income tax return	(1)	_____
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Taxable Year 01/01/21 12/31/21	Taxpayer Name THE DAN & MARGARET MADDOX FUND, INC.	Account No./FEIN 1001659015
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Computation of Excise Tax

Schedule J1 - Computation of Net Earnings for Entities Treated as Partnerships

Additions:

- 1. Ordinary income or loss (federal Form 1065, Line 22) (1) _____
- 2. Income items specifically allocated to partners, including guaranteed payments to partners (2) _____
- 3. Any net loss or expense distributed to a publicly traded REIT (3) _____
- 4. Total additions (add Lines 1 through 3) (4) _____

Deductions:

- 5. Expense items specifically allocated to partners not deducted elsewhere (5) _____
- 6. Amount subject to self-employment taxes distributable or paid to each partner or member net of any pass-through expense deducted elsewhere on this return (if negative, enter zero) (include on Schedule K, Line 3) (6) _____
- 7. Amount of contribution to qualified pension or benefit plans of any partner or member, including all IRC 401 plans (include on Schedule K, Line 3) (7) _____
- 8. Any net gain or income distributed to a publicly traded REIT (8) _____
- 9. Any loss on the sale of an asset sold within 12 months after the date of distribution (9) _____
- 10. Total deductions (add Lines 5 through 9) (10) _____
- 11. Total (subtract Line 10 from Line 4; enter here and on Schedule J, Line 1) (11) _____

Schedule J2 - Computation of Net Earnings for a Single Member LLC Filing as an Individual

Additions:

- 1. Business Income or loss from federal Form 1040, Schedule C (1) _____
- 2. Business Income or loss from federal Form 1040, Schedule D (2) _____
- 3. Business Income or loss from federal Form 1040, Schedule E (3) _____
- 4. Business Income or loss from federal Form 1040, Schedule F (4) _____
- 5. Business Income or loss from federal Form 4797 (5) _____
- 6. Other: federal Form _____, Schedule _____ (6) _____
- 7. Total additions (add Lines 1 through 6) (7) _____

Deductions:

- 8. Amount subject to self-employment taxes distributable or paid to the single member (if negative, enter zero; include on Schedule K, Line 3) (8) _____
- 9. Total (subtract Line 8 from Line 7; enter here and on Schedule J, Line 1) (9) _____

Schedule J3 - Computation of Net Earnings for Entities Treated as Subchapter S Corporations

Additions:

- 1. Ordinary income or loss (federal Form 1120S, Line 21) (1) _____
- 2. Income items to extent includable in federal income were it not for "S" status election (2) _____
- 3. Total additions (add Lines 1 and 2) (3) _____

Deductions:

- 4. Expense items to extent includable in federal expenses were it not for "S" status election (4) _____
- 5. Any loss on the sale of an asset sold within 12 months after the date of distribution (5) _____
- 6. Total deductions (add Lines 4 and 5) (6) _____
- 7. Total (subtract Line 6 from Line 3; enter here and on Schedule J, Line 1) (7) _____

Schedule J4 - Computation of Net Earnings for Entities Treated as Corporations and Other Entities

Additions:

- 1. Taxable income or loss before net operating loss deduction and special deductions (federal Form 1120, Line 28) ... (1) _____
- 2. a. REIT taxable income before net operating loss deduction and special deductions (federal Form 1120-REIT, Line 20) (2a) _____
- b. REIT deduction for dividends paid (federal Form 1120-REIT, Line 21b) (2b) _____
- c. REIT taxable income after dividends paid deduction (subtract Line 2b from Line 2a) (2c) _____
- 3. Unrelated business taxable income (federal Form 990-T, Line 5) (3) -13477.
- 4. Other: federal Form _____ (4) _____
- 5. Contribution carryover from prior period(s) (5) _____
- 6. Capital gains offset by capital loss carryover or carryback (6) _____
- 7. Total additions (add Lines 1 through 6) (7) -13477.

Deductions:

- 8. Contributions in excess of amount allowed by federal government (8) _____
- 9. Portion of current year's capital loss not included in federal taxable income (9) _____
- 10. Total deductions (add Lines 8 and 9) (10) _____
- 11. Total (subtract Line 10 from Line 7; enter here and on Schedule J, Line 1) (11) -13477.

Taxable Year 01/01/21 12/31/21	Taxpayer Name THE DAN & MARGARET MADDOX FUND, INC.	Account No./FEIN 1001659015
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Schedule J - Computation of Net Earnings Subject to Excise Tax

1. Adjusted federal income or loss (enter amount from Schedule J1, J2, J3, or J4)	(1)	<u>-13477.</u>
Additions:		
2. Intangible expenses paid, accrued, or incurred to an affiliated business entity or entities deducted for federal income tax purposes	(2)	_____
3. Any depreciation under the provisions of IRC Section 168 not permitted for excise tax purposes due to Tennessee permanently decoupling from federal bonus depreciation	(3)	_____
4. Gain on the sale of an asset sold within 12 months after the date of distribution to a nontaxable entity	(4)	_____
5. Tennessee excise tax expense (to the extent reported for federal income tax purposes)	(5)	_____
6. Gross premiums tax deducted in determining federal income and used as an excise tax credit	(6)	_____
7. Interest income on obligations of states and their political subdivisions, less allowable amortization	(7)	_____
8. Depletion not based on actual recovery of cost	(8)	_____
9. Excess fair market value over book value of property donated	(9)	_____
10. Excess rent to/from an affiliate	(10)	_____
11. Net loss or expense received from a pass-through entity subject to the excise tax (attach schedule)	(11)	_____
12. An amount equal to five percent of IRC Section 951A global intangible low-taxed income deducted on Line 26	(12)	_____
13. Business interest expense deducted in arriving at the amount reported on Sch. J, Line 1. Only complete if federal Form 8990 was filed. See instructions	(13)	_____
14. Total additions (add Lines 2 through 13)	(14)	_____
Deductions:		
15. Any depreciation under the provisions of IRC Section 168 permitted for excise tax purposes due to Tennessee permanently decoupling from federal bonus depreciation	(15)	_____
16. Any excess gain (or loss) from the basis adjustment resulting from Tennessee permanently decoupling from federal bonus depreciation	(16)	_____
17. Dividends received from corporations at least 80% owned	(17)	_____
18. Donations to qualified public school support groups and nonprofit organizations	(18)	_____
19. Any expense other than income taxes not deducted in determining federal taxable income for which a credit against the federal income tax was allowed	(19)	_____
20. Adjustments related to the safe harbor lease election (see instructions)	(20)	_____
21. Nonbusiness earnings (from Schedule M, Line 8)	(21)	_____
22. Intangible expenses paid, accrued, or incurred to an affiliated entity or entities (from Form IE, Line 4) Attach Form IE - Intangible Expense Disclosure	(22)	_____
23. Intangible income from an affiliated business entity or entities if the corresponding intangible expenses have not been deducted by the affiliate(s) under Tenn. Code Ann. § 67-4-2006(b)(2)(N)	(23)	_____
24. Net gain or income received from a pass-through entity subject to the excise tax (attach schedule)	(24)	_____
25. Deductible Grants from governmental units and Eligible Relief Payments Received	(25)	_____
26. IRC Section 951A global intangible low-taxed income	(26)	_____
27. a. Business interest expense currently deductible. See instructions	(27a)	_____
b. Business interest expense carryforward available for future tax years	(27b)	_____
28. Total deductions (add Lines 15 through 27a)	(28)	_____
Computation of Taxable Income		
29. Total business income (loss) (add Lines 1 and 14, subtract Line 28; if loss, enter on Schedule K, Line 1)	(29)	<u>-13477.</u>
30. Excise tax apportionment ratio (Schedules N, O, P, R or S if applicable or 100%)	(30)	<u>100.000000 %</u>
31. Apportioned business income (loss) (multiply Line 29 by Line 30)	(31)	<u>-13477.</u>
32. Nonbusiness earnings directly allocated to Tennessee (from Schedule M, Line 9)	(32)	_____
33. Loss carryover from prior years (from Schedule U)	(33)	_____
34. Subject to excise tax (add Line 31 and 32, subtract Line 33; enter here and on Schedule B, Line 4)	(34)	<u>-13477.</u>

Taxable Year 01/01/21 12/31/21	Taxpayer Name THE DAN & MARGARET MADDOX FUND, INC.	Account No./FEIN 1001659015
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Schedule K - Determination of Loss Carryover Available

1. Net loss from Schedule J, Line 29	(1)	<u>-13477.</u>
Additions:		
2. Amounts reported on Schedule J, Lines 17 and 21	(2)	<u> </u>
3. Amounts reported on Schedule J1, Lines 6 and 7, or Schedule J2, Line 8	(3)	<u>-13477.</u>
4. Reduced loss (add Lines 1 through 3; if net amount is positive, enter zero)	(4)	<u> </u>
5. Excise tax apportionment ratio (Schedules N, O, P, R or S if applicable or 100%)	(5)	<u>100.000000 %</u>
6. Current year loss carryover available (multiply Line 4 by Line 5)	(6)	<u>-13477.</u>

Schedule M - Nonbusiness Earnings Allocation

Allocation and apportionment schedules may be used only by taxpayers doing business outside the state of Tennessee within the meaning of Tenn. Code Ann. §§ 67-4-2010 and 67-4-2110. The burden is on the taxpayer to show that the taxpayer has the right to apportion.

If all earnings are business earnings as defined below, do not complete this schedule. Any nonbusiness earnings, less related expenses, are subject to direct allocation and should be reported in this schedule.

"Business Earnings" - 1) earnings arising from transactions and activity in the regular course of the taxpayer's trade or business, or 2) earnings from tangible and intangible property if the acquisition, use, management, or disposition of the property constitutes an integral part of the taxpayer's regular trade or business operations.

Earnings which arise from the conduct of the trade or trades or business operations of a taxpayer are business earnings, and the taxpayer must show by clear and cogent evidence that particular earnings are classifiable as nonbusiness earnings. A taxpayer may have more than one regular trade or business in determining whether income is business earnings.

"Nonbusiness Earnings" - all earnings other than business earnings

Description of Nonbusiness Earnings (If further description is necessary, see below)	Gross Amounts	*Less Related Expenses	Net Amounts	Net Amounts Allocated Directly to Tennessee
1. _____				
2. _____				
3. _____				
4. _____				
5. _____				
6. _____				
7. _____				
8. Total nonbusiness earnings (Enter here and on Schedule J, Line 21)			0.	
9. Nonbusiness earnings allocated directly (Enter here and on Schedule J, Line 32)				0.

If necessary, describe source of nonbusiness earnings and explain why such earnings do not constitute business earnings as defined above. Enumerate these items to correspond with items listed above.

*As a general rule, the allowable deductions for expenses of a taxpayer are related to both business and nonbusiness earnings. Items such as administrative costs, taxes, insurance, repairs, maintenance, and depreciation are to be considered. In the absence of evidence to the contrary, it is assumed that the expenses related to nonbusiness rental earnings will be an amount equal to 50% of such earnings and that expenses related to other nonbusiness earnings will be an amount equal to 5% of such earnings (see T ENN. COMP. R. & REGS. 1320-06-01.23(3)).