



October 28, 2024

THE DAN AND MARGARET MADDOX FUND, INC.
100 TAYLOR STREET A-20
NASHVILLE, TN 37208

Dear Kaki:

Enclosed are the original and one copy of the 2023 Exempt Organization returns and 2024 estimated tax worksheet, as follows...

2023 Form 990-PF

2024 Federal Estimated Tax Worksheet - Form 990-PF

2023 Form 990-T

2024 Federal Estimated Tax Worksheet – Form 990-T

2023 Tennessee Corporation Income Tax Return

Each original should be dated, signed and filed in accordance with the filing instructions. The copy should be retained for your files.

Please review the returns for completeness and accuracy.

We sincerely appreciate the opportunity to serve you. Please contact us if you have any questions concerning the tax returns.

Sincerely,

A handwritten signature in black ink that reads 'Cherry Bekaert Advisory LLC'. The signature is written in a cursive, flowing style.

Cherry Bekaert Advisory LLC

TAX RETURN FILING INSTRUCTIONS

FORM 990-T

FOR THE YEAR ENDING

December 31, 2023

Prepared For:

THE DAN AND MARGARET MADDOX FUND, INC.
100 TAYLOR STREET A-20
NASHVILLE, TN 37208

Prepared By:

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

Amount Due or Refund:

Overpayment of \$4,433. The entire overpayment has been applied to the estimated tax payments.

Make Check Payable To:

No amount is due.

Mail Tax Return and Check (if applicable) To:

Not applicable

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS.

2024 ESTIMATED TAX FILING INSTRUCTIONS

FORM 990-W

FOR THE YEAR ENDING

December 31, 2024

Prepared For:

THE DAN AND MARGARET MADDOX FUND, INC.
100 TAYLOR STREET A-20
NASHVILLE, TN 37208

Prepared By:

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

Amount of Tax:

Total Estimated Tax	\$	80,000
Less credit from prior year	\$	15,037
Less amount already paid on 2024 Estimate	\$	50,000
Balance Due	\$	14,963

Payable in full or in installments as follows:

Voucher	Amount	Due Date
No 1	\$ 0	
No 2	\$ 0	
No 3	\$ 0	
No 4	\$ 14,963	December 16, 2024

Make Check Payable To:

Payments should be made using the Electronic Federal Tax Payment System (EFTPS).

Mail Voucher and Check (if applicable) To:

Not applicable

Special Instructions:

TAX RETURN FILING INSTRUCTIONS

FORM 990-PF

FOR THE YEAR ENDING

December 31, 2023

Prepared For:

THE DAN AND MARGARET MADDOX FUND, INC.
100 TAYLOR STREET A-20
NASHVILLE, TN 37208

Prepared By:

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

Amount Due or Refund:

An overpayment of \$15,037. The entire overpayment has been applied to the estimated tax payments.

Make Check Payable To:

File Tax Return and Make Payment (if applicable):

Not applicable

Return Must be Filed On or Before:

Not applicable

Special Instructions:

Electronic filing regulations require us to receive your signed authorization forms within TEN DAYS of our processing your tax returns. We ask that you please help us comply with these rules by promptly returning your signed authorization forms.

We appreciate your business!

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. Return Form 8879-TE to us by November 15, 2024.

Please note that there is \$1,730,141 of undistributed income for 2023 on Form 990-PF. The organization must distribute this amount by the end of its 2024 tax year to avoid the excise tax on undistributed income.

A second copy of your return should be signed and dated on page thirteen and mailed to:
Attorney General's Office
ATTN: Library
P.O. Box 20207
Nashville, TN 37202-0207

Form **8879-TE**

IRS E-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2023, or fiscal year beginning _____, 2023, and ending _____, 20____

2023

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 **ANA ESCOBAR
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 checked="" type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b <u>78,941.</u>
5a Form 8868 check here	<input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b _____
6a Form 990-T check here	<input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b _____
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 2023 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 ADVISORY LLC** to enter my PIN **20136**
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2023 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 2023 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.

62303417356

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 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

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2023)

Form **990-W**
(Worksheet)

**Estimated Tax on Unrelated Business Taxable
Income for Tax-Exempt Organizations**

2024

(and on Investment Income for Private Foundations) FORM 990-PF

► Keep for your records. Do not send to the Internal Revenue Service.

1	Unrelated business taxable income expected in the tax year		1	
2	Tax on the amount on line 1		2	
3	Alternative minimum tax for trusts		3	
4	Total. Add lines 2 and 3		4	
5	Estimated tax credits		5	
6	Subtract line 5 from line 4		6	
7	Other taxes		7	
8	Total. Add lines 6 and 7		8	
9	Credit for federal tax paid on fuels		9	
10a	Subtract line 9 from line 8. Note: If less than \$500, the organization does not need to make estimated tax payments	10a		
b	Enter the tax shown on the 2023 return. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b	78,941.	
c	2024 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c	ADJUSTED TO		10c 80,000.

		(a)	(b)	(c)	(d)
11	Installment due dates	11			12/16/24
12	Installments. Enter 25% of line 10c in columns (a) through (d)	12			30,000.
13	2023 Overpayment	13			15,037.
14	Payment due (Subtract line 13 from line 12)	14			14,963.

Form **990-W**

ESTIMATED TAX	80,000.
AMOUNT PAID	50,000.
OVERPAYMENT APPLIED	15,037.
AMOUNT DUE	14,963.

Schedule A Installments Using the Annualized Income Installment Method and/or the Adjusted Seasonal Installment Method Under Section 6655(e)

Note: An organization that expects its income to vary during the year may want to complete Schedule A to determine whether it may be able to lower the amount of one or more required installments.

Complete each column of this schedule in its entirety before going to the next column.

FORM 990-PF

Part I - Annualized Income Installment Method		(a)	(b)	(c)	(d)
		First <u>2</u> months	First <u>3</u> months	First <u>6</u> months	First <u>9</u> months
1	Annualization period.	1			
2	Enter taxable income for each annualization period.	2			
3	Annualization amounts.	3	6.000000	4.000000	2.000000
4 a	Annualized taxable income. Multiply line 2 by line 3.	4a			1.333333
b	Extraordinary items.	4b			
c	Add lines 4a and 4b.	4c			
5	Figure the tax on the amount in each column on line 4c in the same manner as you figured Form 990-W, line 2.	5			
6	Enter alternative minimum tax and other taxes for each annualization period.	6			
7	Total tax. Add lines 5 and 6.	7			
8	For each period, enter the same type of credits as allowed on Form 990-W, lines 5 and 9.	8			
9	Total tax after credits. Subtract line 8 from line 7. If zero or less, enter -0-.	9			
10	Applicable percentage.	10	25%	50%	75%
11	Multiply line 9 by line 10.	11			
12	Total of all preceding columns of line 4c.	12			
13	Annualized income installments. Subtract line 12 from line 11. If zero or less, enter -0-.	13			

Part II - Adjusted Seasonal Installment Method

Caution: Use this method only if the base period percentage for any 6 consecutive months is at least 70%.

		(a)	(b)	(c)	(d)
		First 3* months	First 5 months	First 8 months	First 11 months
14	Enter taxable income for the following periods.				
a	Tax year beginning in 2021	14a			
b	Tax year beginning in 2022	14b			
c	Tax year beginning in 2023	14c			
15	Enter taxable income for each period for the tax year beginning in 2024.	15			
		First 4** months	First 6 months	First 9 months	Entire year
16	Enter taxable income for the following periods.				
a	Tax year beginning in 2021	16a			
b	Tax year beginning in 2022	16b			
c	Tax year beginning in 2023	16c			

*First 4 months for private foundations
 **First 5 months for private foundations

ANNUALIZED INCOME INSTALLMENT METHOD USING STANDARD OPTION

FORM 990-PF		(a)	(b)	(c)	(d)
		First 4 months	First 6 months	First 9 months	Entire year
17	Divide the amount in each column on line 14a by the amount on line 16a, column (d).				
18	Divide the amount in each column on line 14b by the amount on line 16b, column (d).				
19	Divide the amount in each column on line 14c by the amount on line 16c, column (d).				
20	Add lines 17 through 19.				
21	Divide line 20 by 3.0.				
22 a	Divide line 15 by line 21.				
b	Extraordinary items.				
c	Add lines 22a and 22b.				
23	Figure the tax on the amount on line 22c in the same manner as figured on Form 990-W, line 2.				
24	Divide the amount on line 16a, columns (a) through (c) by the amount on line 16a, column (d).				
25	Divide the amount on line 16b, columns (a) through (c) by the amount on line 16b, column (d).				
26	Divide the amount on line 16c, columns (a) through (c) by the amount on line 16c, column (d).				
27	Add lines 24 through 26.				
28	Divide line 27 by 3.0.				
29	Multiply line 23, columns (a) through (c) by line 28, columns (a) through (c). In column (d), enter the amount from line 23, column (d).				
30	Enter any alternative minimum tax and other taxes for each payment period.				
31	Total tax. Add lines 29 and 30.				
32	For each period, enter the same type of credits as allowed on Form 990-W, lines 5 and 9.				
33	Total tax after credits. Subtract line 32 from line 31. If zero or less, enter -0-.				
34	Total of all preceding columns of line 40.				
35	Adjusted seasonal installments. Subtract line 34 from line 33. If zero or less, enter -0-.				

Part III - Installments

		(a)	(b)	(c)	(d)
		1st installment	2nd installment	3rd installment	4th installment
36	If only one of the earlier parts was completed, enter the amounts in each column from line 13 or line 35. If both parts were completed, enter the smaller of the amounts in each column from line 13 or line 35.				
37	Divide the amount on Form 990-W, line 10c, by 4.0 and enter the result in each column.	20,000.	20,000.	20,000.	20,000.
38	Subtract line 40 of the preceding column from line 39 of the preceding column and enter here.		20,000.	40,000.	60,000.
39	Add lines 37 and 38.	20,000.	40,000.	60,000.	80,000.
40	Installments. Enter the smaller of line 36 or line 39 here and on Form 990-W, line 12.				

CLIENT COPY

**Application for Extension of Time To File an Exempt Organization
Return or Excise Taxes Related to Employee Benefit Plans**

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

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.

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.

Part I - Identification

Type or Print	Name of exempt organization, employer, 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) 04

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
 Plan Number _____
 Plan Year Ending (MM/DD/YYYY) _____

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of **REV. MARY K. FRISKICS-WARREN**
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**, 20 **24**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 calendar year 20 **23** or
 tax year beginning _____, 20 _____, and ending _____, 20 _____

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	\$	93,978.
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	\$	68,978.
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	\$	25,000.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990PF for instructions and the latest information.

2023

Form 990-PF

Department of the Treasury Internal Revenue Service

For calendar year 2023 or tax year beginning , and ending

Name of foundation: THE DAN AND MARGARET MADDOX FUND, INC.
A Employer identification number: 23-7017790
B Telephone number: (615) 385-1006
C If exemption application is pending, check here ...
D 1. Foreign organizations, check here ...
D 2. Foreign organizations meeting the 85% test, check here and attach computation ...
E If private foundation status was terminated under section 507(b)(1)(A), check here ...
F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ...
G Check all that apply: Initial return, Final return, Address change, Initial return of a former public charity, Amended return, Name change
H Check type of organization: Section 501(c)(3) exempt private foundation
I Fair market value of all assets at end of year: \$ 55,355,294.
J Accounting method: Cash

Table with 5 columns: (a) Revenue and expenses per books, (b) Net investment income, (c) Adjusted net income, (d) Disbursements for charitable purposes. Rows include Revenue (1-12) and Operating and Administrative Expenses (13-26), ending with 27 Subtract line 26 from line 12.

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		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		3,016,653.	1,131,565.	1,131,565.
	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	STMT 8	0.	5,696,146.	6,037,339.
	b	Investments - corporate stock	STMT 9	2,850,870.	21,309,496.	23,014,202.
	c	Investments - corporate bonds	STMT 10	0.	3,489,231.	3,709,086.
	11	Investments - land, buildings, and equipment: basis				
	Less: accumulated depreciation					
12	Investments - mortgage loans					
13	Investments - other	STMT 11	35,324,253.	13,014,809.	21,463,102.	
14	Land, buildings, and equipment: basis	7,269.				
	Less: accumulated depreciation	7,269.				
15	Other assets (describe)					
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		41,191,776.	44,641,247.	55,355,294.	
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		41,191,776.	44,641,247.	
	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		41,191,776.	44,641,247.		
30	Total liabilities and net assets/fund balances		41,191,776.	44,641,247.		

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	41,191,776.
2	Enter amount from Part I, line 27a	2	3,482,113.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	44,673,889.
5	Decreases not included in line 2 (itemize) PARTNERSHIP PASS-THROUGH	5	32,642.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	44,641,247.

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	68,505,436.	63,539,199.	4,966,237.

(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	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			4,966,237.

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	4,966,237.
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	78,941.
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	78,941.
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	78,941.
6 Credits/Payments:		
a 2023 estimated tax payments and 2022 overpayment credited to 2023	6a	68,978.
b Exempt foreign organizations - tax withheld at source	6b	0.
c Tax paid with application for extension of time to file (Form 8868)	6c	25,000.
d Backup withholding erroneously withheld	6d	0.
7 Total credits and payments. Add lines 6a through 6d	7	93,978.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	15,037.
11 Enter the amount of line 10 to be: Credited to 2024 estimated tax 15,037. Refunded	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 General Instruction T.		
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. _____ TN		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? 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 2023 or the tax year beginning in 2023? 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	15	N/A
16 At any time during calendar year 2023, 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)?	1a(5)	X
(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(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 2023?	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 2023, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2023?	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 2023 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 2023.)	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 2023?	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 12		266,976.	27,293.	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."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

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

Part VIII-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

Part VIII-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
3 All other program-related investments. See instructions.	

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	51,057,680.
b	Average of monthly cash balances	1b	2,632,171.
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	53,689,851.
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	53,689,851.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	805,348.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	52,884,503.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	2,644,225.

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	2,644,225.
2a	Tax on investment income for 2023 from Part V, line 5	2a	78,941.
b	Income tax for 2023. (This does not include the tax from Part V.)	2b	3,416.
c	Add lines 2a and 2b	2c	82,357.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,561,868.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,561,868.
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	2,561,868.

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	2,149,133.
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	2,149,133.

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2022	(c) 2022	(d) 2023
1 Distributable amount for 2023 from Part X, line 7				2,561,868.
2 Undistributed income, if any, as of the end of 2023:				
a Enter amount for 2022 only			1,317,406.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2023:				
a From 2018				
b From 2019				
c From 2020				
d From 2021				
e From 2022				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2023 from Part XI, line 4: \$ <u>2,149,133.</u>				
a Applied to 2022, but not more than line 2a ...			1,317,406.	
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 2023 distributable amount				831,727.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2023 (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 2022. Subtract line 4a from line 2a. Taxable amount - see instr. ...			0.	
f Undistributed income for 2023. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2024				1,730,141.
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 2018 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2024. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2019 ...				
b Excess from 2020 ...				
c Excess from 2021 ...				
d Excess from 2022 ...				
e Excess from 2023 ...				

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 2023, 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)

Table with 5 columns: (a) 2023, (b) 2022, (c) 2021, (d) 2020, (e) Total. Rows include 2a-e (Qualifying distributions) and 3a-d (Alternative tests).

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 13

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 105 CONTINENTAL PLACE SUITE 160 NASHVILLE, TN 37027	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	15,000.
AMERICAN BAPTIST COLLEGE 1800 BAPTIST WORLD CENTER DR NASHVILLE, TN 37207	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT	35,000.
AMERICAN CIVIL LIBERTIES UNION FOUNDATION OF TENNESSEE P.O. BOX 120160 NASHVILLE, TN 37212	NONE	PUBLIC	TO PROVIDE PAID YOUTH INTERNSHIPS	25,000.
AMERICAN MUSLIM ADVISORY COUNCIL 2195 NOLENSVILLE PK NASHVILLE, TN 37211	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	25,500.
BACKFIELD IN MOTION 920 WOODLAND ST NASHVILLE, TN 37206	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	10,000.
Total	SEE CONTINUATION SHEET(S)			3a 1,751,413.
b Approved for future payment				
NONE				
Total				
				3b 0.

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

Table with 3 columns: Question, Yes, No. Rows include: 1 Did the organization directly or indirectly engage in any of the following... a Transfers from the reporting foundation... b Other transactions... c Sharing of facilities... 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: N/A

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: N/A

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 Date Title CHAIR

May the IRS discuss this return with the preparer shown below? See instr. X Yes No

Table for Preparer Information: Print/Type preparer's name (LAUREN MOSES), Preparer's signature, Date, Check self-employed, Firm's name (CHERRY BEKAERT ADVISORY LLC), Firm's address (222 SECOND AVE, SOUTH STE 1240 NASHVILLE, TN 37201), Firm's EIN (88-2730877), Phone no. (615-383-6592), PTIN (P02156583)

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 DIVERSIFIED TRUST COMPANY 1016 ST COVERED	P		12/31/23
b DIVERSIFIED TRUST COMPANY 1016 LT COVERED	P		12/31/23
c DIVERSIFIED TRUST COMPANY 1016 LT UNCOVERED	P		12/31/23
d BNY MELLON 2091 ST COVERED	P		12/31/23
e BNY MELLON 2075 ST COVERED	P		12/31/23
f BNY MELLON 2067 ST COVERED	P		12/31/23
g BNY MELLON 2034 ST COVERED	P		12/31/23
h BNY MELLON 2083 ST COVERED	P		12/31/23
i BNY MELLON 2042 ST COVERED	P		12/31/23
j BNY MELLON 2059 ST COVERED	P		12/31/23
k BNY MELLON 2026 ST COVERED	P		12/31/23
l BNY MELLON 2018 LT COVERED	P		12/31/23
m BNY MELLON 2018 ST COVERED	P		12/31/23
n K-1: INTERNATIONAL EQUITY COMMON TRUST FUND	P		12/31/23
o K-1: INTERNATIONAL EQUITY COMMON TRUST FUND	P		12/31/23

(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 163,627.		135,000.	28,627.
b 6,966,154.		6,182,631.	783,523.
c 5,486,769.		4,400,000.	1,086,769.
d 8,192,738.		8,189,213.	3,525.
e 8,879,826.		8,889,868.	-10,042.
f 5,239,839.		5,240,152.	-313.
g 4,618,538.		4,619,650.	-1,112.
h 3,242,368.		3,250,461.	-8,093.
i 6,121,908.		6,124,125.	-2,217.
j 4,941,825.		4,919,185.	22,640.
k 200,000.		200,000.	0.
l 6,870,559.		6,902,460.	-31,901.
m 6,195,053.		4,061,705.	2,133,348.
n 392,964.		43,528.	-43,528.
o 392,964.			392,964.

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			28,627.
b			783,523.
c			1,086,769.
d			3,525.
e			-10,042.
f			-313.
g			-1,112.
h			-8,093.
i			-2,217.
j			22,640.
k			0.
l			-31,901.
m			2,133,348.
n			-43,528.
o			392,964.

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: DTC PRIVATE EQUITY IV, LP	P		12/31/23
b K-1: DTC PRIVATE EQUITY IV, LP	P		12/31/23
c K-1: DTC PRIVATE EQUITY V, LP	P		12/31/23
d K-1: DTC PRIVATE EQUITY V, LP	P		12/31/23
e K-1: METROPOLITAN REAL ESTATE PARTNERS GLOBAL V,	P		12/31/23
f K-1: METROPOLITAN REAL ESTATE PARTNERS GLOBAL V,	P		12/31/23
g K-1: DTC SHORT DURATION FIXED INCOME COMMON TRUST	P		12/31/23
h K-1: DTC SHORT DURATION FIXED INCOME COMMON TRUST	P		12/31/23
i K-1: CORE FIXED INCOME COMMON TRUST FUND	P		12/31/23
j K-1: CORE FIXED INCOME COMMON TRUST FUND	P		12/31/23
k K-1: DTC PRIVATE EQUITY VI-Q, LP	P		12/31/23
l K-1: DTC PRIVATE EQUITY VI-Q, LP	P		12/31/23
m K-1: DTC US CORE EQUITY CTF	P		12/31/23
n K-1: DTC US CORE EQUITY CTF	P		12/31/23
o K-1: METROPOLITAN REAL ESTATE PARTNERS SECONDARY	P		12/31/23

(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		55.	-55.
b	204,270.		204,270.
c	4,496.		4,496.
d	283,409.		283,409.
e		4.	-4.
f		7,227.	-7,227.
g	5,055.		5,055.
h		22,986.	-22,986.
i		7,422.	-7,422.
j		319,382.	-319,382.
k	343.		343.
l	73,831.		73,831.
m	352,454.		352,454.
n	49,581.		49,581.
o		24,145.	-24,145.

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			-55.
b			204,270.
c			4,496.
d			283,409.
e			-4.
f			-7,227.
g			5,055.
h			-22,986.
i			-7,422.
j			-319,382.
k			343.
l			73,831.
m			352,454.
n			49,581.
o			-24,145.

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 CAPITAL GAINS DIVIDENDS			
b			
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 19,829.			19,829.
b			
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			19,829.
b			
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	4,966,237.
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
BEECH CREEK MINISTRIES 3101 CURTIS ST NASHVILLE, TN 37218	NONE	PUBLIC	TO SUPPORT CENTER FOR IMAGINATION NATURE PROGRAM	5,000.
BETHLEHEM CENTERS OF NASHVILLE 1417 CHARLOTTE AVENUE NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE COVID-RELATED SAFETY EQUIPMENT	15,000.
BEWELL IN SCHOOL 2817 WEST END AVE STE 126 # 340 NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	25,000.
BIG BROTHERS/BIG SISTERS OF MID-TN 1704 CHARLOTTE AVE., STE. 130 NASHVILLE, TN 37203	NONE	PUBLIC	TO SUPPORT YOUTH GENDER AND SEXUALITY ALLIANCE	2,500.
BROOKLYN HEIGHTS COMMUNITY GARDEN 1830 HAYNES ST NASHVILLE, TN 37207	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR ENVIRONMENTAL PROGRAMS	25,000.
CENTER FOR CONTEMPLATIVE JUSTICE 5201 ALABAMA AVENUE NASHVILLE, TN 37209	NONE	PUBLIC	TO SUPPORT YOUTH PROGRAMMING AT INCLUSION TENNESSEE	30,000.
CENTER FOR NONPROFIT MANAGEMENT 37 PEABODY ST, STE 201 NASHVILLE, TN 37210	NONE	PUBLIC	TO PROVIDE GENERAL OPERATING SUPPORT	553.
CIVIC TN 5016 CENTENNIAL BLVD, STE 200 NASHVILLE, TN 37209	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	10,000.
CO-CONSPIRATOR INSTITUTE PO BOX 41887 NASHVILLE, TN 37204	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH WORK	10,000.
COMMUNITY FOUNDATION OF MIDDLE TN 3833 CLEGHORN AVE NASHVILLE, TN 37215	NONE	PUBLIC	TO SUPPORT GIVINGMATTERS.COM	7,500.
Total from continuation sheets				1,640,913.

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
CONEXION AMERICAS 2195 NOLENSVILLE ROAD NASHVILLE, TN 37211	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	40,000.
CONFLUENCE PHILATHROPY 209 W 29TH ST, BOX 6169 NEW YORK, NY 10001	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT	1,650.
CUMBERLAND RIVER COMPACT 2 VICTORY AVENUE, STE 300 NASHVILLE, TN 37213	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR ENVIRONMENTAL PROGRAMS	15,000.
D-Y-M-O-N IN THE ROUGH PO BOX 330816 NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	20,000.
EAST NASHVILLE HOPE EXCHANGE PO BOX 68423 NASHVILLE, TN 37206	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	12,000.
ELMAHABA CENTER 705 AYLESFORD CT FRANKLIN, TN 37069	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS IN TENNESSEE	25,000.
EQUITY ALLIANCE PO BOX 331821 NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	70,000.
FRANKTOWN OPEN HEARTS 412 CUMMINS STREET FRANKLIN, TN 37064	NONE	PUBLIC	TO SUPPORT HUNTING AND FISHING PROGRAMS	9,500.
FRIENDS OF MILL RIDGE PARK 5333 HICKORY HOLLOW PARKWAY ANTIOCH, TN 37013	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR ENVIRONMENTAL PROGRAMS	25,000.
FROM YOUR FATHER PO BOX 41253 NASHVILLE, TN 37204	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	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
FUTURO INC 301 S PERIMETER PARK DR NASHVILLE, TN 37211	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	40,000.
GIDEON'S ARMY GRASSROOTS ARMY FOR CHILDREN PO BOX 280867 NASHVILLE, TN 37228	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	20,000.
GRANTMAKERS CONCERNED WITH IMMIGRANTS AND REFUGEES PO BOX 2178 PETALUMA, CA 94953	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT	2,500.
GRANTMAKERS FOR EFFECTIVE ORGANIZATIONS 1310 L STREET NW, SUITE 650 WASHINGTON, DC 30005	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT	1,500.
HIGHLANDER RESEARCH & EDUCATION CENTER INC 1959 HIGHLANDER WAY NEW MARKET, TN 37820	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT	1,000.
HUMAN TRAFFICKING SURVIVORS COURT FOUNDATION 1516 16TH AVENUE SOUTH NASHVILLE, TN 37212	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	100.
INTER-RELIGIOUS FOUNDATION FOR COMMUNITY ORGANIZATION 418 WEST 145TH STREET NEW YORK, NY 10031	NONE	PUBLIC	TO SUPPORT THE TENNESSEE STUDENT SOLIDARITY NETWORK	15,000.
JEFFERSON STREET UNITED MERCHANTS PARTNERSHIP 1215 9TH AVE N STE 201 NASHVILLE, TN 37208	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	100.
LAUNCH MENTORSHIP 1613 MALLARD CREEK COURT ANTIOCH, TN 37013	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	10,000.
LAUNCH PAD PO BOX 330569 NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	70,000.
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
LEGACY MISSION VILLAGE PO BOX 2984 BRENTWOOD, TN 37024	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	20,000.
MASHUP 309 PLUS PARK BOULEVARD, STE 211 NASHVILLE, TN 37217	NONE	PUBLIC	TO SUPPORT TRANS AID NASHVILLE	15,000.
MONROE HARDING, INC. 1 VANTAGE WAY, STE C165 NASHVILLE, TN 37228	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	10,000.
MOAIC CHANGEMAKERS P.O. BOX 90221 NASHVILLE, TN 37209	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT EDUCATION PROGRAMS	25,000.
MURFREESBORO MUSLIM YOUTH PO BOX 330735 MURFREESBORO, TN 37133	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	15,000.
MUSIC CITY CONSTRUCTION CAREERS INC P.O. BOX 290153 NASHVILLE, TN 37229	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	20,000.
NASHVILLE FREEDOM SCHOOL PARTNERSHIP 104 FITZPATRICK COURT NASHVILLE, TN 37214	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	50,100.
NASHVILLE INTERNATIONAL CENTER FOR ENPOWERMENT 417 WELSHWOOD DR., SUITE 100 NASHVILLE, TN 37211	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	40,000.
NASHVILLE ORGANIZED FOR ACTION AND HOPE NOAH P.O. BOX 331144 NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	20,000.
NASHVILLE PEACE AND JUSTICE CENTER 530 26TH AVE N NASHVILLE, TN 37209	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR ENVIRONMENTAL PROGRAMS OF SUNRISE MOVEMENT	50,000.
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 OPERATING SUPPORT FOR YOUTH PROGRAMS	15,000.
NASHVILLE TEACHER RESIDENCY 1224 MARTIN STREET NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	25,000.
NATIONS MINISTRY CENTER PO BOX 128154 NASHVILLE, TN 37212	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	15,000.
NATIVE AMERICAN INDIAN ASSOCIATION 230 SPENCE LN NASHVILLE, TN 37210	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	10,000.
OASIS CENTER 1704 CHARLOTTE AVE, STE 200 NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	20,000.
ONE WILLCO PO BOX 88 THOMPSONS STN, TN 37179	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	30,000.
PENCIL FOUNDATION 7199 COCKRILL BEND BLVD NASHVILLE, TN 37209	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	10,000.
PHILANTHROPY SOUTHEAST 100 PEACHTREE NW SUITE 2080 ATLANTA, GA 30303	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT	10,710.
PLANNED PARENTHOOD OF TENNESSEE AND NORTH MISSISSIPPI 50 VANTAGE WAY, SUITE 255 NASHVILLE, TN 37228	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	30,000.
RAPHAH INSTITUTE 3280 WOODPOINT DR NASHVILLE, TN 37207	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	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
RECYCLE REINVEST 610 N 3RD ST NASHVILLE, TN 37207	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR ENVIRONMENTAL PROGRAMS	35,000.
SALAMA URBAN MINISTRIES 1205 8TH AVENUE SOUTH NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	40,000.
SOUTHEASTERN CENTER FOR COOPERATIVE DEVELOPMENT 1301 DICKERSON PIKE DRIVE NASHVILLE, TN 37207	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR ENVIRONMENTAL PROGRAMS OF WATER BEAR COOPERATIVE LAND	25,000.
SOUTHERN MOVEMENT COMMITTEE 2201 GILMORE CROSSING LN NASHVILLE, TN 37218	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	70,000.
SOUTHERN WORD INC. 1704 CHARLOTTE AVENUE, SUITE 200 NASHVILLE, TN 37203	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	20,000.
TENNESSEE AQUATIC PROJECT AND DEVELOPEMENT GROUP INC 1309 JACKSON ST. NASHVILLE, TN 37208	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	8,000.
TENNESSEE EDUCATORS OF COLOR ALLIANCE 41 PEABODY ST NASHVILLE, TN 37210	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	62,000.
TENNESSEE ENVIRONMENTAL COUNCIL ONE VANTAGE WAY, STE E-250 NASHVILLE, TN 37228	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR ENVIRONMENTAL PROGRAMS	15,000.
TENNESSEE IMMIGRANT AND REFUGEE RIGHTS COALITION 3310 EZELL RD NASHVILLE, TN 37211	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH AND ENVIRONMENTAL PROGRAMS	60,000.
TENNESSEE JUSTICE FOR OUR NEIGHBORS 2195 NOLENSVILLE PIKE NASHVILLE, TN 37211	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	30,000.
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 NONPROFIT NETWORK 66 S. COOPER ST, 5TH FLOOR MEMPHIS, TN 38104	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT	10,000.
TENNESSEE STATE UNIVERSITY FOUNDATION 3500 JOHN A MERRITT BLVD, CAMPUS BOX 9542 NASHVILLE, TN 37209	NONE	PUBLIC	TO SUPPORT ASSESSMENT OF TSU STUDENT CAREER GOALS AND NEEDS IN URBAN FORESTRY	75,000.
THE EDUCATION TRUST 1501 K ST NW, STE 200 WASHINGTON, DC 20005	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS IN TENNESSEE	50,000.
THE F.I.N.D. (FAMILIES IN NEED OF DIRECTION) DESIGN 2787 SMITH SPRINGS ROAD NASHVILLE, TN 37217	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	36,000.
UNMANAGEABLE 220 NATHAN DRIVE GOODLETTSVILLE, TN 37072	NONE	PUBLIC	TO SUPPORT RISE & SHINE TENNESSEE	40,000.
WOMEN OF COLOR COLLABORATIVE 2016 COOPER LANE NASHVILLE, TN 37216	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	30,200.
WORKERS' DIGNITY PROJECT 335 WHITSETT ROAD NASHVILLE, TN 37210	NONE	PUBLIC	TO SUPPORT OPERATING SUPPORT FOR YOUTH PROGRAMMING	15,000.
YWCA 1608 WOODMONT BLVD NASHVILLE, TN 37215	NONE	PUBLIC	TO PROVIDE OPERATING SUPPORT FOR YOUTH PROGRAMS	30,000.
Total from continuation sheets				

Part XIV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - SOUTHEASTERN CENTER FOR COOPERATIVE DEVELOPMENT
TO PROVIDE OPERATING SUPPORT FOR ENVIRONMENTAL PROGRAMS OF WATER BEAR
COOPERATIVE LAND DEVELOPMENT

CLIENT COPY

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
BNF	71,469.	71,469.	
CITIZENS SAVINGS BANK	422.	422.	
K-1: CORE FIXED INCOME CTF	64,825.	64,825.	
K-1: DTC SHORT DURATION FIXED INCOME CTF	14,804.	14,804.	
K-1: METROPOLITAN REAL ESTATE SECONDARY	351.	351.	
K-1: AEW PARTNERS FUND VIII FEEDER LP	249.	249.	
K-1: DTC PRIVATE EQUITY IV, LP	6,676.	6,676.	
K-1: DTC PRIVATE EQUITY VI, LP	21,761.	21,761.	
K-1: DTC PRIVATE EQUITY V-Q, LP	23,738.	23,738.	
K-1: METROPOLITAN REAL ESTATE	498.	498.	
PINNACLE BANK	16.	16.	
TOTAL TO PART I, LINE 3	204,809.	204,809.	

FORM 990-PF

DIVIDENDS AND INTEREST FROM SECURITIES

STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
BNY FORM 1099	468,461.	12,860.	455,601.	455,601.	
DTC FORM 1099	69,129.	0.	69,129.	69,129.	
K-1: CORE FIXED INCOME CTF	3,750.	0.	3,750.	3,750.	
K-1: DTC PRIVATE EQUITY IV, LP	144,353.	0.	144,353.	144,353.	
K-1: DTC PRIVATE EQUITY V, LP	59,531.	0.	59,531.	59,531.	
K-1: DTC PRIVATE EQUITY VI - Q, LP	3,820.	0.	3,820.	3,820.	
K-1: DTC SHORT DURATION FIXED INCOME CTF	250.	0.	250.	250.	
K-1: INTERNATIONAL EQUITY CTF	104,710.	43.	104,667.	104,667.	
K-1: METROPOLITAN REAL ESTATE PARTNERS	3,415.	0.	3,415.	3,415.	
K-1: METROPOLITAN REAL ESTATE PARTNERS SECONDARY	1,457.	0.	1,457.	1,457.	
K-1: US CORE EQUITY CTF	48,294.	6,926.	41,368.	41,368.	
TO PART I, LINE 4	907,170.	19,829.	887,341.	887,341.	

FORM 990-PF

OTHER INCOME

STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
K-1:METRO REAL ESTATE	13,371.	13,388.	
K-1: DTC PRIVATE EQ IV	18,294.	-12,404.	
K-1: METROPOLITAN REAL ESTATE SECONDARY	27,900.	46,864.	
K-1: DTC PRIVATE EQ V	180,686.	34,843.	
K-1: DTC PRIVATE EQ VI	-20,150.	18,845.	
K-1: AEW PARTNERS FUND VIII FEEDER LP	13,019.	45,241.	
K-1: ENERGY TRANSFER LP SERIES G	1,781.	1,781.	
TOTAL TO FORM 990-PF, PART I, LINE 11	234,901.	148,558.	

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	24,980.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	24,980.	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 CONSULTANTS	3,744. 17,816.	0. 0.		3,463. 9,233.
TO FORM 990-PF, PG 1, LN 16C	21,560.	0.		12,696.

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 FROM K-1'S: FOREIGN INCOME TAXES	21,233.	0.		19,391.
FEDERAL INCOME TAXES PAID	29,759.	29,759.		0.
FOREIGN INCOME TAX - FORM 1099	55,102.	0.		0.
	9,256.	9,256.		0.
TO FORM 990-PF, PG 1, LN 18	115,350.	39,015.		19,391.

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	7,291.	0.		5,468.
INSURANCE	9,879.	0.		7,409.
INVESTMENT EXPENSES	115,758.	115,758.		0.
K-1: CORE FIXED INCOME	5,244.	5,244.		0.
K-1: DTC PRIVATE EQUITY IV, LP	38,569.	38,569.		0.
K-1: DTC PRIVATE EQUITY V-Q, LP	141,696.	141,696.		0.
K-1: DTC SHORT DURATION FIXED INCOME	1,169.	1,169.		0.
K-1: INTERNATIONAL EQUITY COMMON TRUST	17,128.	17,128.		0.
K-1: METRO REAL ESTATE PARTNERS	6,551.	6,551.		0.
K-1: METRO REAL ESTATE PARTNERS SECONDARY	15,127.	15,127.		0.
MISCELLANEOUS	13,919.	0.		13,832.
OFFICE EXPENSE	43,090.	0.		36,491.
K-1: AEW PARTNERS FUND VIII FEEDER	3,013.	3,013.		0.
K-1: DTC PRIVATE EQUITY VI-Q, LP	140,993.	140,993.		0.
K-1: DTC US CORE EQUITY ETF	3,474.	3,474.		0.
TO FORM 990-PF, PG 1, LN 23	562,901.	488,722.		63,200.

FORM 990-PF

U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS

STATEMENT 8

DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
WESTFULLER U.S. TREASURY SECURITIES	X		919,321.	938,518.
WESTFULLER U.S. GOVERNMENT BONDS	X		133,143.	168,171.
WESTFULLER MUNICIPAL BONDS		X	4,643,682.	4,930,650.
TOTAL U.S. GOVERNMENT OBLIGATIONS			1,052,464.	1,106,689.
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS			4,643,682.	4,930,650.
TOTAL TO FORM 990-PF, PART II, LINE 10A			5,696,146.	6,037,339.

FORM 990-PF

CORPORATE STOCK

STATEMENT 9

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
VANGUARD FEDERAL MONEY MARKET FUND	2,687,120.	2,687,120.
WESTFULLER COMMON STOCKS	18,454,461.	20,134,925.
WESTFULLER REAL ESTATE INVESTMENT TRUSTS	167,915.	192,157.
TOTAL TO FORM 990-PF, PART II, LINE 10B	21,309,496.	23,014,202.

FORM 990-PF

CORPORATE BONDS

STATEMENT 10

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
WESTFULLER COPORATE BONDS	3,489,231.	3,709,086.
TOTAL TO FORM 990-PF, PART II, LINE 10C	3,489,231.	3,709,086.

FORM 990-PF

OTHER INVESTMENTS

STATEMENT 11

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
AEW PARTNERS FUN DVIII FEEDER, L.P.	COST	201,984.	547,209.
DTC PRIVATE EQUITY IV, LP	COST	1,027,789.	2,222,254.
DTC PRIVATE EQUITY VI, LP	COST	3,550,000.	5,728,250.
DTC PRIVATE EQUITY V-Q LP	COST	2,390,703.	5,589,966.
METRO REAL ESTATE PARTNERS GLOBAL V, LP	COST	275,155.	412,711.
METROPOLITAN REAL ESTATE PARTNERS SCIF	COST	1,129,659.	1,375,730.
WINSTON GLOBAL	COST	1,656,718.	2,800,545.
WESTFULLER ASSET BACKED SECURITIES	COST	2,782,801.	2,786,437.
TOTAL TO FORM 990-PF, PART II, LINE 13		13,014,809.	21,463,102.

FORM 990-PF

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

STATEMENT 12

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	CHAIR 1.00	0.	0.	0.
INDIRA DAMMU 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	VICE-CHAIR 1.00	0.	0.	0.
STEPHANIE MAHNKE 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	SECRETARY/TREASURER 1.00	0.	0.	0.
KASAR ABDULLA 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	TRUSTEE 1.00	0.	0.	0.
CATHY BENDER 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	TRUSTEE 1.00	0.	0.	0.
ANDREA BLACKMAN 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	TRUSTEE 1.00	0.	0.	0.
DAVID ESQUIVEL 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	TRUSTEE 1.00	0.	0.	0.
MELISSA GORDON 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	TRUSTEE 1.00	0.	0.	0.
HERMAN HICKS 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	TRUSTEE 1.00	0.	0.	0.
TOMMYE MADDOX 100 TAYLOR STREET, SUITE A-20 NASHVILLE, TN 37208	TRUSTEE 1.00	0.	0.	0.

THE DAN AND MARGARET MADDOX FUND, INC.

23-7017790

HASINA MOHYUDDIN	TRUSTEE			
100 TAYLOR STREET, SUITE A-20	1.00	0.	0.	0.
NASHVILLE, TN 37208				

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

MARY K. FRISKICS-WARREN	EXECUTIVE DIRECTOR			
100 TAYLOR STREET, SUITE A-20	40.00	161,296.	27,293.	0.
NASHVILLE, TN 37208				

JOSEPH GUTIERREZ	PROGRAM OFFICER			
100 TAYLOR STREET, SUITE A-20	40.00	105,680.	0.	0.
NASHVILLE, TN 37208				

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII		<u>266,976.</u>	<u>27,293.</u>	<u>0.</u>
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CLIENT COPY

FORM 990-PF

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

STATEMENT 13

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

MADDOX MAKES GRANTS IN THE 40 MIDDLE TENNESSEE COUNTIES IN THE AREAS OF
YOUTH AND THE ENVIRONMENT. MADDOX SEEKS A WORLD IN WHICH PEOPLE AND PLANET
FLOURISH TOGETHER IN REGENERATIVE SYSTEMS FREE FROM OPPRESSION AND THREAT.
MORE DETAILS ABOUT ELIGIBILITY, PRIORITIES AND RESTRICTIONS AS WELL AS THE
APPLICATION PROCESS CAN BE FOUND ON THE WEB SITE WWW.MADDOXFUND.ORG.

FORM 990-PF

OTHER REVENUE

STATEMENT 14

DESCRIPTION	BUS CODE	UNRELATED BUSINESS INC	EXCL CODE	EXCLUDED AMOUNT	RELATED OR EXEMPT FUNC- TION INCOME
K-1:METRO REAL ESTATE	531390	-17.	14	13,388.	
K-1: DTC SHORT DURATION			14		
K-1: DTC PRIVATE EQ IV		30698.	14	-12,404.	
K-1: METROPOLITAN REAL ESTATE SECONDARY	531390	-18964	14	46,864.	
K-1: CORE FIXED INCOME CTF			14		
K-1: DTC PRIVATE EQ V		145843	14	34,843.	
K-1: DTC PRIVATE EQ VI		-38995	14	18,845.	
K-1: AEW PARTNERS FUND VIII FEEDER LP		-32222	14	45,241.	
K-1: DTC US COCRE EQUITY CTF			14		
K-1: INTERNATIONAL EQUITY COMMON TRUST FUND			14		
K-1: ENERGY TRANSFER LP SERIES G			14	1,781.	
TOTAL TO FORM 990-PF, PG 12, LN 11		86,343.		148,558.	

Form **990-W**
(Worksheet)

**Estimated Tax on Unrelated Business Taxable
Income for Tax-Exempt Organizations**

(and on Investment Income for Private Foundations) FORM 990-T

2024

► Keep for your records. Do not send to the Internal Revenue Service.

1	Unrelated business taxable income expected in the tax year	1	16,269.
2	Tax on the amount on line 1	2	3,416.
3	Alternative minimum tax for trusts	3	
4	Total. Add lines 2 and 3	4	3,416.
5	Estimated tax credits	5	
6	Subtract line 5 from line 4	6	3,416.
7	Other taxes	7	
8	Total. Add lines 6 and 7	8	3,416.
9	Credit for federal tax paid on fuels	9	
10a	Subtract line 9 from line 8. Note: If less than \$500, the organization does not need to make estimated tax payments	10a	3,416.
b	Enter the tax shown on the 2023 return. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b	3,416.
c	2024 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c	10c	3,440.

		(a)	(b)	(c)	(d)
11	Installment due dates	11			12/16/24
12	Installments. Enter 25% of line 10c in columns (a) through (d)	12			3,440.
13	2023 Overpayment	13			
14	Payment due (Subtract line 13 from line 12)	14			

Form **990-W**

ESTIMATED TAX	3,440.
OVERPAYMENT APPLIED	4,433.
AMOUNT DUE	0.

Form **8879-TE**

IRS E-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

For calendar year 2023, or fiscal year beginning _____, 2023, and ending _____, 20____

2023

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 **ANA ESCOBAR
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>3,416.</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 2023 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 ADVISORY LLC** to enter my PIN **20136**
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the tax year 2023 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 2023 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.

62303417356

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2023 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

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8879-TE** (2023)

**Application for Extension of Time To File an Exempt Organization
Return or Excise Taxes Related to Employee Benefit Plans**

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

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.

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.

Part I - Identification

Type or Print <small>File by the due date for filing your return. See instructions.</small>	Name of exempt organization, employer, or other filer, see instructions. THE DAN AND MARGARET MADDOX FUND, INC.	Taxpayer identification number (TIN) 23-7017790
	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) 07

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08		

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
 Plan Number _____
 Plan Year Ending (MM/DD/YYYY) _____

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of **REV. MARY K. FRISKICS-WARREN**
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**, 20 **24**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 calendar year 20 **23** or
 tax year beginning _____, 20 _____, and ending _____, 20 _____

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	\$ 0.
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	\$ 7,849.
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	\$ 0.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

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

2023

For calendar year 2023 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

Form header section containing: A Check box if address changed, B Exempt under section 501(c)(3), C Book value of all assets at end of year 44,641,247, D Employer identification number 23-7017790, E Group exemption number, F Check box if an amended return.

G Check organization type: 501(c) corporation (checked), 501(c) trust, 401(a) trust, Other trust, State college/university, 6417(d)(1)(A) Applicable entity

H Check if filing only to claim: Credit from Form 8941, Refund shown on Form 2439, Elective payment amount from Form 3800

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 (checked)

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

Part I Total Unrelated Business Taxable Income

Table with 11 rows for Part I: Total Unrelated Business Taxable Income. Line 1: 17,269. Line 11: 16,269.

Part II Tax Computation

Table with 7 rows for Part II: Tax Computation. Line 1: 3,416. Line 7: 3,416.

Part III Tax and Payments

Table with 5 rows for Part III: Tax and Payments. Line 4: 3,416. Line 5: 0.

Part III Tax and Payments (continued)			
6 a	Payments: Preceding year's overpayment credited to the current year	6a	7,849.
b	Current year's estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b	
c	Tax deposited with Form 8868	6c	
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	Elective payment election amount from Form 3800	6g	
h	Payment from Form 2439	6h	
i	Credit from Form 4136	6i	
j	Other (see instructions)	6j	
7	Total payments. Add lines 6a through 6j	7	7,849.
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	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	4,433.
11	Enter the amount of line 10 you want: Credited to 2024 estimated tax 4,433. Refunded	11	0.

Part IV Statements Regarding Certain Activities and Other Information (see instructions)		Yes	No
1	At any time during the 2023 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		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
3	Enter the amount of tax-exempt interest received or accrued during the tax year		
4	Enter available pre-2018 NOL carryovers here \$		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available 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	
	900003	\$ 80,603.	
		\$	
		\$	
		\$	
6 a	Reserved for future use		
b	Reserved for future use		

Part V Supplemental Information
 Provide any 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	Title	
Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed
	LAUREN MOSES			PTIN
	Firm's name	Firm's EIN		
	222 SECOND AVE, SOUTH STE 1240	88-2730877		
Firm's address	Phone no.			
NASHVILLE, TN 37201	615-383-6592			

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

**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

2023

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	1c			
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 Schedule 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 15	5	86,343.		86,343.
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	86,343.		86,343.

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)								
2 Salaries and wages								
3 Repairs and maintenance								
4 Bad debts								
5 Interest (attach statement). See instructions								
6 Taxes and licenses								
7 Depreciation (attach Form 4562). See instructions		7						
8 Less depreciation claimed in Part III and elsewhere on return		8a						8b
9 Depletion								
10 Contributions to deferred compensation plans								
11 Employee benefit programs								
12 Excess exempt expenses (Part VIII)								
13 Excess readership costs (Part IX)								
14 Other deductions (attach statement)								
15 Total deductions. Add lines 1 through 14								0.
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)								86,343.
17 Deduction for net operating loss. See instructions					STMT 16	STMT 18		69,074.
18 Unrelated business taxable income. Subtract line 17 from line 16								17,269.

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2023

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 2a and 2b (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			6. Deductions directly connected with income in column 5
			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	
(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	

FORM 990-T (A)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 15
DESCRIPTION		NET INCOME OR (LOSS)
DTC PRIVATE EQUITY IV,LP - ORDINARY BUSINESS INCOME (LOSS)		30,698.
DTC PRIVATE EQUITY V, LP - ORDINARY BUSINESS INCOME (LOSS)		145,843.
MREP GLOBAL V, LP - ORDINARY BUSINESS INCOME (LOSS)		-17.
MREP SCIF - ORDINARY BUSINESS INCOME (LOSS)		-18,964.
AEW PARTNERS VIII FEEDER - ORDINARY BUSINESS INCOME (LOSS)		-32,222.
DTC PRIVATE EQUITY VI,LP - ORDINARY BUSINESS INCOME (LOSS)		-38,995.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5		86,343.

FORM 990-T (A)	POST 2017 NOL SCHEDULE	STATEMENT 16
PRIOR YEAR POST 2017 NOL	NOL DEDUCTION	CARRYFORWARD OF POST 2017 NOL
80,603.	69,074.	11,529.

990-T SCH A	POST-2017 NET OPERATING LOSS DEDUCTION		STATEMENT 17
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING AVAILABLE THIS YEAR
12/31/18	93,027.	93,027.	0.
12/31/21	13,477.	0.	13,477.
12/31/22	67,126.	0.	67,126.
NOL CARRYOVER AVAILABLE THIS YEAR			80,603.

SCH A (990-T)

SCHEDULE A NOL DETAIL

STATEMENT 18

TAXABLE INCOME FROM ALL ENTITIES	86,343.
THIS ENTITIES PORTION OF TAXABLE INCOME	86,343.
THIS ENTITIES PERCENTAGE OF PRE-2018 NET OPERATING LOSS	100.00%
THIS ENTITIES ALLOWED PRE-2018 NET OPERATING LOSS	0.
TAXABLE INCOME AFTER PRE-2018 NET OPERATING LOSS	86,343.
80% INCOME LIMITATION	69,074.
POST-2017 AVAILABLE	80,603.
LESSER OF POST-2017 NET OPERATING LOSS OR 80% LIMITATION	69,074.

CLIENT COPY

Alternative Minimum Tax-Corporations

2023

Attach to your tax return.
Go to www.irs.gov/Form4626 for instructions and the latest information.

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

- A** Is the corporation filing this form a member of a controlled group treated as a single employer under sections 59(k)(1)(D) and 52? Yes No
If "Yes," the corporation must complete Part V listing the names, EINs, and separate company financial statement income or loss for each member of the controlled group treated as a single employer taken into account in the determination of "applicable corporation" under section 59(k)(1)(D).
- B** Is the corporation filing this form a member of a foreign-parented multinational group (FPMG) within the meaning of section 59(k)(2)(B)? Yes No
If "Yes," the corporation must complete Part V listing the names, EINs, and separate company financial statement income or loss for each member of the FPMG under section 59(k)(2)(B).

Part I Applicable Corporation Determination (Report all amounts in U.S. dollars.)

If you have already determined in current or prior years you are an applicable corporation, skip Part I and continue to Part II.

	(a) First Preceding Year Ended 12/31/2022	(b) Second Preceding Year Ended 12/31/2021	(c) Third Preceding Year Ended 12/31/2020
1 Net income or loss per applicable financial statement(s) (AFS) (see inst):			
a Consolidated net income or loss per the AFS of the corporation	-67,126.	-13,477.	24,152.
b Include AFS net income or loss of other includible entities (add net income and subtract net loss)			
c Exclude AFS net income or loss of excludible entities (add net loss and subtract net income)			
d Adjustment for certain consolidating entries (see instructions)			
e Specified additional net income or loss item B. Reserved for future use			
f AFS net income or loss of all entities in the test group before adjustments. Combine lines 1a through 1d	-67,126.	-13,477.	24,152.
2 Adjustments:			
a Financial statements covering different tax years			
b Corporations that are not included on the taxpayer's consolidated return (see instructions)			
c Pro-rata share of net income from controlled foreign corporations for which the corporation is a U.S. shareholder. If zero or less, enter -0- (see instructions for special rules if completing this form for an FPMG)			
d Amounts that are not effectively connected to a U.S. trade or business (see instructions for special rules if completing this form for an FPMG)			
e Certain taxes (see instructions)			
f Patronage dividends and per-unit retain allocations (cooperatives only)			
g Alaska native corporations			
h Certain credits (see instructions)			
i Mortgage servicing income			
j Tax-exempt entities (organizations subject to tax under section 511)			
k Depreciation			
l Qualified wireless spectrum			
m Covered transactions			
n Adjustments related to bankruptcy and insolvency			
o Certain insurance company adjustments			
p Adjustment P - Reserved for future use			
q Adjustment Q - Reserved for future use			
r Adjustment R - Reserved for future use			
s Adjustment S - Reserved for future use			
z Other (see instructions)			
3 Specified adjustment. Reserved for future use			
4 Total adjustments. Combine lines 2a through 2z			
5 AFSI. Combine lines 1f and 4	-67,126.	-13,477.	24,152.
6 AFSI of first, second, and third preceding tax years. Combine columns (a), (b), and (c) of line 5			-56,451.
7 3-year average annual AFSI (see instructions)			-18,817.

Part I **Applicable Corporation Determination** (Report all amounts in U.S. dollars.) *(continued)*

- 8** Is line 7 more than \$1 billion?
 Yes. Continue to line 9.
 No. STOP here and attach to your tax return.
- 9** Is the corporation a member of an FPMG within the meaning of section 59(k)(2)(B)?
 Yes. Continue to line 10.
 No. Continue to Part II.

	(a) First Preceding Year Ended	(b) Second Preceding Year Ended	(c) Third Preceding Year Ended	
10 AFSI for purposes of the \$100 million test before adjustments:				
a AFSI from line 5	10a			
b Aggregation differences (see instructions)	10b			
c Total AFSI for purposes of the \$100 million test before adjustments. Combine lines 10a and 10b	10c			
11 Adjustments:				
a Income not effectively connected to a U.S. trade or business	11a			
b Pro-rata share of CFC net income described in section 56A(c)(3) (attach worksheet) (see instructions)	11b			
c Reserved for future use - Other adjustments 1	11c			
d Reserved for future use - Other adjustments 2	11d			
12 Total adjustments. Combine lines 11a and 11b	12			
13 Total AFSI for purposes of the \$100 million test. Combine lines 10c and 12	13			
14 AFSI of first, second, and third preceding tax years. Combine columns (a), (b), and (c) of line 13				14
15 3-year average annual AFSI for purposes of the \$100 million test				15

- 16** Is line 15 \$100 million or more?
 Yes. Continue to Part II.
 No. STOP here. Attach to your tax return.

Part II Corporate Alternative Minimum Tax

1 Net income or loss per applicable financial statement(s) (AFS) (see instructions):		
a Consolidated net income or loss per the AFS of the corporation	.....	1a 0.
b Include AFS net income or loss of other includible entities (add net income and subtract net loss)	.....	1b
c Exclude AFS net income or loss of excludible entities (add net loss and subtract net income)	.....	1c
d Adjustment for certain consolidating entries (see instructions)	.....	1d
e Specified additional net income or loss item D. Reserved for future use	.....	1e
f AFS net income or loss before adjustments. Combine lines 1a through 1d	.....	1f
2 Adjustments:		
a Financial statements covering different tax years	.....	2a
b Reserved for future use - Adjustment 2b	.....	2b
c Corporations that are not included on the taxpayers - consolidated return (see instructions)	.....	2c
d The corporation's distributive share of adjusted financial statement income of partnerships	.....	2d
e Pro-rata share of net income from controlled foreign corporations for which the corporation is a U.S. shareholder. If zero or less, enter -0-. (See instructions)	.....	2e
f Amounts that are not effectively connected to a U.S. trade or business	.....	2f
g Certain taxes. Enter the amount from Part III, line 7	.....	2g
h Patronage dividends and per-unit retain allocations (cooperatives only)	.....	2h
i Alaska native corporations	.....	2i
j Certain credits (see instructions)	.....	2j
k Mortgage servicing income	.....	2k
l Covered benefit plans described in section 56A(c)(11)(B)	.....	2l
m Tax-exempt entities (organizations subject to tax under section 511)	.....	2m
n Depreciation	.....	2n
o Qualified wireless spectrum	.....	2o
p Covered transactions	.....	2p
q Adjustments related to bankruptcy and insolvency	.....	2q
r Certain insurance company adjustments	.....	2r
s AFSI adjustment S - Reserved for future use	.....	2s
t AFSI adjustment T - Reserved for future use	.....	2t
u AFSI adjustment U - Reserved for future use	.....	2u
z Other (see instructions)	.....	2z
3 Total adjustments. Combine lines 2a through 2z	.....	3
4 AFSI before financial statement net operating loss carryover. Combine lines 1f and 3	.....	4 0.
5 Financial statement net operating loss (FSNOL) (see instructions)	.....	5
6 AFSI. Subtract line 5 from line 4. If zero or less, enter -0-	.....	6
7 Multiply line 6 by 15% (0.15)	.....	7
8 Corporate alternative minimum tax foreign tax credit (CAMT FTC). Enter amount from Part IV, Section I, line 6 (see inst)	.....	8
9 Tentative minimum tax. Subtract line 8 from line 7. If zero or less, enter -0-	.....	9
10 Regular tax liability (see instructions)	.....	10
11 Base erosion minimum tax (see instructions)	.....	11
12 Combine lines 10 and 11	.....	12
13 Alternative minimum tax. Subtract line 12 from line 9. If zero or less, enter -0-. Enter here and on Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return	.....	13

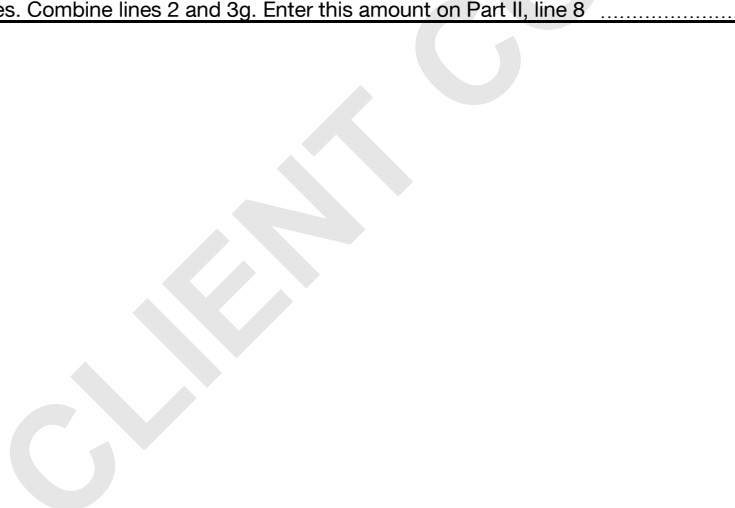
Part III Adjustment for Certain Taxes Under Section 56A(c)(5)

1 Current income tax provision - Foreign	.....	1
2 Current income tax provision - Federal	.....	2
3 Deferred income tax provision - Foreign	.....	3
4 Deferred income tax provision - Federal	.....	4
5 Income taxes included in equity method investment income	.....	5
6a Adjustment A - Reserved for future use	.....	6a
b Adjustment B - Reserved for future use	.....	6b
c Adjustment C - Reserved for future use	.....	6c
d Adjustment D - Reserved for future use	.....	6d
e Adjustment E - Reserved for future use	.....	6e
f Adjustment F - Reserved for future use	.....	6f
g Adjustment G - Reserved for future use	.....	6g
h Adjustment H - Reserved for future use	.....	6h
z Income taxes in other places	.....	6z
7 Total. Combine lines 1 through 6z. Enter here and on Part II, line 2g	.....	7

Part IV Alternative Minimum Tax - Corporations Foreign Tax Credit

Section I - AMT Foreign Tax Credit

1	Domestic corporation AMT foreign income taxes:			
a	Total foreign taxes paid or accrued as reported on Form 1118, Schedule B, Part I, column 2(j)	1a		
b	Adjustment	1b		
c	Adjustment	1c		
d	Adjustment	1d		
e	Adjustment	1e		
f	Adjustment	1f		
g	Adjustment	1g		
2	Total domestic corporation AMT foreign income taxes. Combine lines 1a through 1g			2
3	Allowable controlled foreign corporation (CFC) AMT foreign income taxes:			
a	Pro-rata share of CFC AMT foreign income taxes from Part IV, Section II, line 11, column (n)	3a		
b	Carryover of excess foreign taxes (from Part IV, Section III, line 4, column (vii))	3b		
c	Total CFC AMT foreign income taxes. Add lines 3a and 3b			3c
d	Percentage specified in section 55(b)(2)(A)(i)	3d	15%	
e	Pro-rata share of CFC net income described in section 56A(c)(3) (attach worksheet) (see instructions)	3e		
f	CFC AMT foreign tax credit limitation (multiply line 3d by line 3e)			3f
g	Allowable CFC AMT foreign income taxes (lesser of line 3c or line 3f)			3g
4	CAMT FTC Line 4 - Reserved for future use			4
5	CAMT FTC Line 5 - Reserved for future use			5
6	Total AMT foreign income taxes. Combine lines 2 and 3g. Enter this amount on Part II, line 8			6



8879-SO

State-Only e-file Signature Authorization

2023

Do not send to the Taxing Authority. This is not a tax return.
Keep this form for your records.

Taxpayer name
THE DAN & MARGARET MADDOX FUND, INC.

FEIN
23 7017790

Part I Electronically Filed States

TENNESSEE

Part II Declaration and Signature Authorization (Be sure you get and keep a copy of your return)

Under penalties of perjury, I declare that I have examined a copy of my electronic income tax return and accompanying schedules and statements for tax year 2023, and to the best of my knowledge and belief, it is true, correct, and complete. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send my return to the taxing authority and to receive from the taxing authority (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 taxing authority and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of my state taxes owed on this return and/or a payment of estimated tax, and the financial institution to debit the entry to this account. I further understand that this also authorizes 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 further acknowledge that the personal identification number (PIN) below is my signature for my electronic income tax return and, if applicable, my Electronic Funds Withdrawal Consent.

Taxpayer's PIN: check one box only

- [X] I authorize CHERRY BEKAERT ADVISORY LLC to enter or generate my PIN 19750 as my signature on my tax year 2023 electronically filed income tax return.
[] I will enter my PIN as my signature on my tax year 2023 electronically filed income tax return. Check this box only if you are entering your own PIN and your return is filed using the Practitioner PIN method. The ERO must complete Part III below.

Your signature Date

Title CHAIR

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 62303417356 do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature for the tax year 2023 electronically filed income tax return for the taxpayer indicated above.

ERO's signature Date

ERO Must Retain This Form
Do Not Submit This Form to the Taxing Authority

TAX RETURN FILING INSTRUCTIONS

TENNESSEE FORM FAE 170

FOR THE YEAR ENDING

December 31, 2023

Prepared For:

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

Prepared By:

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

To Be Signed and Dated By:

The appropriate corporate officer(s).

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 sign, date and return Form 8879-SO to our office. We will then submit the return to the TNDOR. Do not mail a paper copy of the return.

Return Must be Filed On or Before:

Please return signed Form 8879-SO to us as soon as possible, but no later than **by November 15, 2024 by Noon**. You may sign electronically via SafeSend; or 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
2023 Franchise and Excise Tax Return

FAE
173

Table with 2 columns: Tax Year Beginning/Ending and Account Number/FEIN. Values include 01/01/23, 12/31/23, 1001659015, and 23-7017790.

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) 0
4. Amount due with extension request (Lines 1 and 2, subtract Line 3 see instructions) (4) 100

Declaration box containing signature lines for Taxpayer and Preparer, and fields for PTIN, Date, Telephone, City, State, and ZIP Code.

FOR OFFICE USE ONLY

Empty grid box for office use.

Empty grid box for office use.

**TENNESSEE DEPARTMENT OF REVENUE
2023 Franchise and Excise Tax Return**

**FAE
170**

Tax Year Beginning 01/01/23	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) Revoke manufacturer single sales factor election <input type="checkbox"/> i) Taxpayer has filed for federal extension <input type="checkbox"/> j) Triple weighted sales election <input type="checkbox"/> k) Telecom Qualified Member <input type="checkbox"/> Date Tennessee operations began (see instructions)
Tax Year Ending 12/31/23	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	

Schedule A - Computation of Franchise Tax

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

Schedule B - Computation of Excise Tax

4. Income subject to excise tax from Schedule J, Line 36	(4)	- 80603.
5. Excise tax (6.5% of Line 4)	(5)	0.
6. Recapture of tax credit (Schedule T, Line 13) and additional excise tax on certified distribution sales	(6)	
7. Total excise tax due (add Lines 5 and 6)	(7)	0.

Schedule C - Computation of Total Tax Due or Overpayment

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

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:10%; border-bottom: 1px solid black;">Date</td> <td style="width:40%; text-align: center;">CHAIR</td> <td style="width:10%; text-align: center;">Title</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;">P02156583</td> <td style="text-align: center;">615-383-6592</td> </tr> <tr> <td style="text-align: center;">222 SECOND AVE, SOUT</td> <td style="text-align: center;">NASHVILLE</td> <td style="text-align: center;">TN</td> <td style="text-align: center;">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</td> <td style="text-align: center;">ZIP Code</td> </tr> <tr> <td style="border-bottom: 1px solid black;">Preparer's Email Address</td> <td colspan="3" style="border-bottom: 1px solid black;">LMOSES@CBH.COM</td> </tr> </table>	Taxpayer's Signature	Date	CHAIR	Title	Tax Preparer's Signature	Date	P02156583	615-383-6592	222 SECOND AVE, SOUT	NASHVILLE	TN	37201	Preparer's Address	City	State	ZIP Code	Preparer's Email Address	LMOSES@CBH.COM		
Taxpayer's Signature	Date	CHAIR	Title																		
Tax Preparer's Signature	Date	P02156583	615-383-6592																		
222 SECOND AVE, SOUT	NASHVILLE	TN	37201																		
Preparer's Address	City	State	ZIP Code																		
Preparer's Email Address	LMOSES@CBH.COM																				

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Taxable Year 01/01/23 12/31/23	Taxpayer Name THE DAN & MARGARET MADDOX FUND, INC.	Account No./FEIN 1001659015
--	--	---------------------------------------

Schedule D - Schedule of Credits

1. Gross Premiums Tax Credit (cannot exceed Schedule C, Line 8)	(1)	_____
2. Green Energy Tax Credit from business plans filed prior to July 1, 2015	(2)	_____
3. Brownfield Property Credits	(3)	_____
4. Broadband Internet Access Tax Credit carryover for service providers	(4)	_____
5. Industrial Machinery and Research and Development Tax Credit from Schedule T, Line 11	(5)	_____
6. Job Tax Credit from Schedule X, Line 46	(6)	_____
7. Additional Annual Job Tax Credit from Schedule X, Line 38	(7)	_____
8. Qualified Production Credit from Schedule QP, Line 12	(8)	_____
9. Employer Credit for Paid Family and Medical Leave from Schedule PL	(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) _____	(2b) _____
3. Second quarterly estimate	(3a) _____	(3b) _____
4. Third quarterly estimate	(4a) _____	(4b) _____
5. Fourth quarterly estimate	(5a) _____	(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)	_____
2. Indebtedness to or guaranteed by parent or affiliated corporation (cannot be a deduction)	(2)	_____
3. Total (add Lines 1 and 2)	(3)	_____
4. Franchise tax apportionment ratio (Schedules N, N1, O, P, R or S if applicable or 100%)	(4)	.000000 %
5. Total (multiply Line 3 by Line 4; enter here and on Schedule A, Line 1)	(5)	0.

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, 170NC1, 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)	_____
--	-----	-------

Taxable Year 01/01/23 12/31/23	Taxpayer Name THE DAN & MARGARET MADDOX FUND, INC.	Account No./FEIN 1001659015
--	--	---------------------------------------

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 23) (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 22) (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 21) (2a) _____
- b. REIT deduction for dividends paid (federal Form 1120-REIT, Line 22b) (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) 86343.
- 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) 86343.

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) 86343.

Taxable Year 01/01/23 12/31/23	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)	86343.
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 decoupling from federal bonus depreciation for assets purchased on or before December 31, 2022	(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 27	(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. Research and experimental expenditures deducted under IRC Section 174 in arriving at the amount reported on Sch. J, Line 1	(14)	
15. Total additions (add Lines 2 through 14)	(15)	
Deductions:		
16. Any depreciation under the provisions of IRC Section 168 permitted for excise tax purposes due to Tennessee decoupling from federal bonus depreciation for assets purchased on or before December 31, 2022	(16)	
17. Any excess gain (or loss) from the basis adjustment resulting from Tennessee decoupling from federal bonus depreciation for assets purchased on or before December 31, 2022	(17)	
18. Dividends received from corporations at least 80% owned	(18)	
19. Donations to qualified public school support groups and nonprofit organizations	(19)	
20. Any expense other than income taxes not deducted in determining federal taxable income for which a credit against the federal income tax was allowed	(20)	
21. Adjustments related to the safe harbor lease election (see instructions)	(21)	
22. Nonbusiness earnings (from Schedule M, Line 8)	(22)	
23. Intangible expenses paid, accrued, or incurred to an affiliated entity or entities (from Form IE, Line 4) Attach Form IE - Intangible Expense Disclosure	(23)	
24. 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)	(24)	
25. Net gain or income received from a pass-through entity subject to the excise tax (attach schedule)	(25)	
26. Deductible Grants from governmental units	(26)	
27. IRC Section 951A global intangible low-taxed income	(27)	
28. a. Business interest expense currently deductible. See instructions	(28a)	
b. Business interest expense carryforward available for future tax years	(28b)	
29. Research and experimental expenditures currently deductible. See instructions	(29)	
30. Total deductions (add Lines 16 through 29, excluding 28b)	(30)	
Computation of Taxable Income		
31. Total business income (loss) (add Lines 1 and 15, subtract Line 30; if loss, enter on Schedule K, Line 1)	(31)	86343.
32. Excise tax apportionment ratio (Schedules N, N1, O, P, R or S if applicable or 100%)	(32)	.000000 %
33. Apportioned business income (loss) (multiply Line 31 by Line 32)	(33)	0.
34. Nonbusiness earnings directly allocated to Tennessee (from Schedule M, Line 9)	(34)	
35. Loss carryover from prior years (from Schedule U)	(35)	80603.
36. Subject to excise tax (add Line 33 and 34, subtract Line 35; enter here and on Schedule B, Line 4)	(36)	-80603.

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Schedule N - Apportionment - Standard (Schedule N1 filers: complete the Schedule N property section, lines 1-12)

Property	In Tennessee		Total Everywhere	
	a. Beginning of Taxable Year	b. End of Taxable Year	a. Beginning of Taxable Year	b. End of Taxable Year
Use original cost of assets				
1. Land, buildings, leaseholds, and improvements ...				
2. Machinery, equipment, furniture, and fixtures				
3. Automobiles and trucks				
4. Inventories and work in progress				
5. Prepaid supplies and other property ...				
6. Ownership share of real and tangible property of a partnership that does not file a return				
7. Excise tax total (add Lines 1 through 6)	a.	b.	a.	b.
8. Exempt inventory				
9. Franchise tax total (subtract Line 8 from Line 7)	a.	b.	a.	b.
Excise tax average value (add Lines 7(a) & (b), divide by two)				
10. Franchise tax average value (add Lines 9(a) & (b), divide by two)				
11. Rented property (rent paid x 8)				

Use 5X weighted sales factor	a. In Tennessee	b. Total Everywhere	c. Franchise Ratio	d. Excise Ratio
13. Excise tax property factor (add Lines 10 and 12)				%
14. Franchise tax property factor (add Lines 11 and 12)			%	
15. Payroll factor			%	%
16. Sales factor (business gross receipts)	0.	86343.	.000000%	.000000%
17. Total ratios (add Lines 13-15 and (Line 16 x five)) ...			.000000%	.000000%
18. Apportionment ratio (divide Line 17 by seven, or by the number of factors with everywhere values greater than zero) (Enter franchise tax apportionment ratio on Sch. F1, Line 4. Enter excise tax apportionment ratio on Sch. J, Line 32.) .....			.000000%	.000000%

Schedule N1 - Apportionment - Taxpayers electing to continue using triple weighted sales or any taxpayer required to use triple weighted sales by Tennessee Code Annotated, Section 67-4-2012(a) (Schedule N1 filers: complete the Schedule N property section, lines 1-12)

Use triple weighted sales factor				
1. Excise tax property factor (add Lines 10 and 12)				%
2. Franchise tax property factor (add Lines 11 and 12)			%	
3. Payroll factor			%	%
4. Sales factor (business gross receipts)			%	%
5. Total ratios (add Lines 1-3 and (Line 4 x three))			%	%
6. Apportionment ratio (divide Line 5 by five, or by the number of factors with everywhere values greater than zero) (Enter franchise tax apportionment ratio on Sch. F1, Line 4. Enter excise tax apportionment ratio on Sch. J, Line 32.)			%	%

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Schedule O - Apportionment - Common Carriers (railroads, motor carriers, pipelines and barges)

	In Tennessee	Total Everywhere	Ratio
1. Total franchise mileage (odometer miles)			
2. Tennessee gross intrastate receipts and interstate gross receipts everywhere			%
3. Total ratios (add Lines 1 and 2)			%
4. Apportionment ratio (divide Line 3 by two, or by the number of factors with everywhere values greater than zero) (Enter franchise tax apportionment ratio on Schedule F1, Line 4. Enter excise tax apportionment ratio on Schedule J, Line 32.)			%

Schedule P - Apportionment - Air Carriers

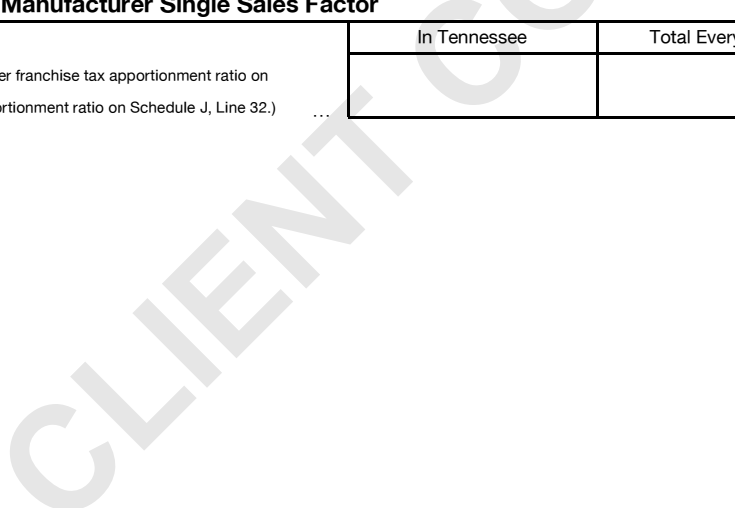
	In Tennessee	Total Everywhere	Ratio
1. Originating revenue			
2. Air miles flown (Include in Tennessee column only air miles flown on flights either originating from or ending in Tennessee or both)			%
3. Total ratios (add Lines 1 and 2)			%
4. Apportionment ratio (divide Line 3 by two, or by the number of factors with everywhere values greater than zero) (Enter franchise tax apportionment ratio on Schedule F1, Line 4. Enter excise tax apportionment ratio on Schedule J, Line 32.)			%

Schedule R - Apportionment - Air Express Carriers

	In Tennessee	Total Everywhere	Ratio
1. Originating revenue			%
2. Air miles flown and ground miles traveled (Include in Tennessee column only air miles flown on flights either originating from or ending in Tennessee or both. Include only ground miles traveled with respect to actual common carriage of persons or property for hire.)			%
3. Total ratios			%
4. Apportionment ratio (divide Line 3 by two, or by the number of factors with everywhere values greater than zero) (Enter franchise tax apportionment ratio on Schedule F1, Line 4. Enter excise tax apportionment ratio on Schedule J, Line 32.)			%

Schedule S - Apportionment - Manufacturer Single Sales Factor

	In Tennessee	Total Everywhere	Ratio
1. Sales factor (business gross receipts) (Enter franchise tax apportionment ratio on Schedule F1, Line 4. Enter excise tax apportionment ratio on Schedule J, Line 32.)			%



Taxable Year	Taxpayer Name	Account No./FEIN
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Schedule U - Schedule of Loss Carryover

Year	Period Ended (MM/YY)	Original Return or as Amended	Used in Prior Year(s)	Expired	Loss Carryover Available
1	12/22	67126.			67126.
2	12/21	13477.			13477.
3	12/20				
4	12/19				
5	12/18				
6	12/17				
7	12/16				
8	12/15				
9	12/14				
10	12/13				
11	12/12				
12	12/11				
13	12/10				
14	12/09				
15	12/08				
Total Amount (Enter here and on Schedule J, Line 35)					80603.

Schedule V - Schedule of Industrial Machinery and Research and Development Equipment Credit Carryover

Year	Period Ended (MM/YY)	Original Return or as Amended	Used in Prior Year(s)	Expired or Recaptured	Industrial Machinery Credit Carryover Available
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
Total Amount (Enter here and on Schedule T, Line 4)					