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Form **990-PF**
Department of the Treasury
Internal Revenue Service

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.**

OMB No. 1545-0047

2024

Open to Public Inspection

For calendar year 2024, or tax year beginning 01-01-2024 , and ending 12-31-2024

Name of foundation
SOMA FOUNDATION INC

A Employer identification number
46-3994466

Number and street (or P.O. box number if mail is not delivered to street address)
PO BOX 5346

Room/suite

B Telephone number (see instructions)
(706) 221-7262

City or town, state or province, country, and ZIP or foreign postal code
COLUMBUS, GA 31906

C If exemption application is pending, check here ▶ ☐

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here..... ▶ ☐
2. Foreign organizations meeting the 85% test, check here and attach computation ... ▶ ☐

H Check type of organization: ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ..... ▶ ☐

I Fair market value of all assets at end of year (from Part II, col. (c), *line 16)* ▶$ 374,086,719

J Accounting method: ☐ Cash ☑ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis.)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ..... ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)*

			(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc., received (attach schedule)	13,080,683			
	2	Check ▶ ☐ if the foundation is **not** required to attach Sch. B				
	3	Interest on savings and temporary cash investments	563,742	563,742	563,742	
	4	Dividends and interest from securities	5,896,539	5,896,539	5,896,539	
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10	11,709,762			
	b	Gross sales price for all assets on line 6a 21,799,791				
	7	Capital gain net income (from Part IV, line 2)		11,709,762		
	8	Net short-term capital gain			6,682,449	
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less: Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	9,248,587	9,248,587		
	12	**Total.** Add lines 1 through 11	40,499,313	27,418,630	13,142,730	
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc.	50,000			
	14	Other employee salaries and wages	255,305			
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)	76,159	76,159		
	b	Accounting fees (attach schedule)	22,525	22,525		
	c	Other professional fees (attach schedule)	20,133	20,133		
	17	Interest	746,731	746,731		
	18	Taxes (attach schedule) (see instructions)	429,363	73,924		
	19	Depreciation (attach schedule) and depletion	439			
	20	Occupancy				
	21	Travel, conferences, and meetings	330			
	22	Printing and publications				
	23	Other expenses (attach schedule)	2,487,554	2,288,289		
	24	**Total operating and administrative expenses.** Add lines 13 through 23	4,088,539	3,227,761		0
	25	Contributions, gifts, grants paid	11,473,126			11,473,126
	26	**Total expenses and disbursements.** Add lines 24 and 25	15,561,665	3,227,761		11,473,126
	27	Subtract line 26 from line 12:				
	a	**Excess of revenue over expenses and disbursements**	24,937,648			
	b	**Net investment income** (if negative, enter -0-)		24,190,869		
	c	**Adjusted net income** (if negative, enter -0-)			13,142,730	

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	2,087,533	396,419	396,419
	2 Savings and temporary cash investments	1,690,882	2,135,261	2,135,261
	3 Accounts receivable ▶ 100			
	Less: allowance for doubtful accounts ▶	839,115	100	100
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	249,742		
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	124,593,893	149,863,562	149,863,562
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶			
	Less: accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	193,826,855	221,472,377	221,472,377
	14 Land, buildings, and equipment: basis ▶ 20,066			
	Less: accumulated depreciation (attach schedule) ▶ 20,066	439		
	15 Other assets (describe ▶)	219,000	219,000	219,000
	16 **Total assets** (to be completed by all filers—see the instructions. Also, see page 1, item I)	323,507,459	374,086,719	374,086,719
Liabilities	17 Accounts payable and accrued expenses	12,318	108,822	
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities**(add lines 17 through 22)	12,318	108,822	
Net Assets or Fund Balances	**Foundations that follow FASB ASC 958, check here ▶ ☑ and complete lines 24, 25, 29 and 30.**			
	24 Net assets without donor restrictions	323,495,141	373,977,897	
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 **Total net assets or fund balances** (see instructions)	323,495,141	373,977,897	
	30 **Total liabilities and net assets/fund balances** (see instructions)	323,507,459	374,086,719	

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	323,495,141
2	Enter amount from Part I, line 27a	2	24,937,648
3	Other increases not included in line 2 (itemize) ▶	3	25,548,476
4	Add lines 1, 2, and 3	4	373,981,265
5	Decreases not included in line 2 (itemize) ▶	5	3,368
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	6	373,977,897

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.)
1 a	SOMA FOUNDATION INVESTMENTS LLC	P	2024-01-01	2024-12-31
b	SOMA FOUNDATION INVESTMENTS LLC	P	2000-01-01	2024-12-31
c	AFLAC INC	P	2024-01-01	2024-08-23
d	AFLAC INC	P	2000-01-01	2024-05-22
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			259,516	-259,516
b	2,478,951			2,478,951
c	13,726,908		6,784,943	6,941,965
d	5,593,932		3,045,570	2,548,362
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) **or** Losses (from col.(h))
	(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				-259,516
b				2,478,951
c				6,941,965
d				2,548,362
e				

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	11,709,762
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	6,682,449

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter: _____ **(attach copy of letter if necessary–see instructions)**			1	336,253
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	
3	Add lines 1 and 2			3	336,253
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			4	
5	**Tax based on investment income.** Subtract line 4 from line 3. If zero or less, enter -0-			5	336,253
6	Credits/Payments:				
a	2024 estimated tax payments and 2023 overpayment credited to 2024	6a	234,032		
b	Exempt foreign organizations—tax withheld at source	6b			
c	Tax paid with application for extension of time to file (Form 8868)	6c	80,000		
d	Backup withholding erroneously withheld	6d			
7	Total credits and payments. Add lines 6a through 6d			7	314,032
8	Enter any **penalty** for underpayment of estimated tax. Check here ☑ if Form 2220 is attached.			8	3,365
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶			9	25,586
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶			10	
11	Enter the amount of line 10 to be: **Credited to 2025 estimated tax** ▶ 0 **Refunded** ▶			11	

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?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition.	1b		No
	*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.*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: **(1)** On the foundation. ▶ $ _____ **(2)** On foundation managers. ▶ $ _____			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ $ _____			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities.*	2		No
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*	3		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T.*	5		No
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?	6	Yes	
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.*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶GA			
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 .*	8b	Yes	
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 2024 or the taxable year beginning in 2024? See the instructions for Part XIII. If "Yes," complete Part XIII	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses.*	10		No
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.	11		No
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	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶www.somafoundation.net

14 The books are in care of ▶FOUNDATION OFFICE STAFF Telephone no. ▶(706) 221-7262

Located at ▶PO BOX 5346 COLUMBUS GA ZIP+4 ▶31906

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** —check here . . . ▶ ☐
and enter the amount of tax-exempt interest received or accrued during the year . . . ▶ 15

			Yes	No
16	At any time during calendar year 2024, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶	16		No

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)		No
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1a(2)		No
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		No
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		No
	(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)		No
	(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)		No
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		No
c	Organizations relying on a current notice regarding disaster assistance check here. ▶ ☐			
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 2024?	1d		No
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 2024, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2024?	2a		No
	If "Yes," list the years ▶ 20____ , 20____ , 20____ , 20____			
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		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here. ▶ 20____ , 20____ , 20____ , 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	3a		No
b	If "Yes," did it have excess business holdings in 2024 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 Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2024.)*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2024?	4b		No

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))?	5a(1)		No
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	5a(2)		No
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	5a(3)		No
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	5a(4)		No
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	5a(5)		No
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	5b		
c	Organizations relying on a current notice regarding disaster assistance check ▶ ☐			
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).*	5d		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	6a		No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? *If "Yes" to 6b, file Form 8870.*	6b		No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	7a		No
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		
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 during the year?	8		No

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

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

(a) Name and address	**(b)** Title, and average hours per week devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	**(e)** Expense account, other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). 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
ROBERT BECKUM 5031 SPYGLASS COURT COLUMBUS, GA 31909	DIRECTOR 40.00	200,000		
JACKLYN T SILVA PO BOX 1371 SMITHS STATION, AL 36877	ADMIN 40.00	55,305		

Total number of other employees paid over $50,000 ▶

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

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

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

Total number of others receiving over $50,000 for professional services. ▶

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	
2	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions. **3**	
Total. Add lines 1 through 3 ▶	

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	352,375,149
b	Average of monthly cash balances	1b	4,431,572
c	Fair market value of all other assets (see instructions)	1c	0
d	**Total** (add lines 1a, b, and c)	1d	356,806,721
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	
3	Subtract line 2 from line 1d	3	356,806,721
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	5,352,101
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3	5	351,454,620
6	**Minimum investment return.** Enter 5% (0.05) of line 5	6	17,572,731

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	17,572,731
2a	Tax on investment income for 2024 from Part V, line 5	2a	336,253		
b	Income tax for 2024. (This does not include the tax from Part V.)	2b			
c	Add lines 2a and 2b			2c	336,253
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	17,236,478
4	Recoveries of amounts treated as qualifying distributions			4	
5	Add lines 3 and 4			5	17,236,478
6	Deduction from distributable amount (see instructions)			6	
7	**Distributable amount** as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1			7	17,236,478

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	11,473,126
b	Program-related investments—total from Part VIII-B	1b	
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	11,473,126

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2023	(c) 2023	(d) 2024
1 Distributable amount for 2024 from Part X, line 7				17,236,478
2 Undistributed income, if any, as of the end of 2024:				
a Enter amount for 2023 only.			10,823,143	
b Total for prior years: 20 ___ , 20___ , 20___				
3 Excess distributions carryover, if any, to 2024:				
a From 2019.				
b From 2020.				
c From 2021.				
d From 2022.				
e From 2023.				
f **Total** of lines 3a through e				
4 Qualifying distributions for 2024 from Part XI, line 4: ▶ $ 11,473,126				
a Applied to 2023, but not more than line 2a			10,823,143	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2024 distributable amount.				649,983
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2024. *(If an amount appears in column (d), the same amount must be shown in column (a).)*				
6 **Enter the net total of each column as indicated below:**				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b				
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.				
d Subtract line 6c from line 6b. Taxable amount —see instructions				
e Undistributed income for 2023. Subtract line 4a from line 2a. Taxable amount—see instructions				
f Undistributed income for 2024. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2025				16,586,495
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)				
8 Excess distributions carryover from 2019 not applied on line 5 or line 7 (see instructions) . . .				
9 **Excess distributions carryover to 2025.** Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2020. . . .				
b Excess from 2021. . . .				
c Excess from 2022. . . .				
d Excess from 2023. . . .				
e Excess from 2024. . . .				

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2024, enter the date of the ruling . . . . . ▶

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

	Tax year	Prior 3 years			(e) Total
	(a) 2024	(b) 2023	(c) 2022	(d) 2021	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed					
b 85% (0.85) of line 2a					
c Qualifying distributions from Part XI, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part IX, line 6 for each year listed . .					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

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

DANIEL P AMOS

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.

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. See instructions

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

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

c Any submission deadlines:

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

Part XIV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				
b *Approved for future payment*				
Total . . . . . ▶ **3b**				

Part XV-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	563,742	
4 Dividends and interest from securities			14	5,896,539	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income				9,248,587	
8 Gain or (loss) from sales of assets other than inventory					11,709,762
9 Net income or (loss) from special events:					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)				15,708,868	11,709,762
13 **Total.** Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)				13	27,418,630

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

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

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

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a Transfers from the reporting foundation to a noncharitable exempt organization of:			
(1) Cash	1a(1)		No
(2) Other assets	1a(2)		No
b Other transactions:			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
(3) Rental of facilities, equipment, or other assets	1b(3)		No
(4) Reimbursement arrangements	1b(4)		No
(5) Loans or loan guarantees	1b(5)		No
(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

(a) Line No.	**(b)** Amount involved	**(c)** Name of noncharitable exempt organization	**(d)** Description of transfers, transactions, and sharing arrangements

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

b If "Yes," complete the following schedule.

(a) Name of organization	**(b)** Type of organization	**(c)** Description of relationship

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.

******	2025-10-24	******
Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below? See instructions. ☐ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
TAMARA L CALLIER				P00246298
Firm's name ▶ CALLIER-WITT CPAS LLP				Firm's EIN ▶58-2266952
Firm's address ▶ 7290 NORTH LAKE DR SUITE 503 COLUMBUS, GA 31909				Phone no. (706) 321-9111

Form 990PF Part VII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week **(b)** devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	Expense account, **(e)** other allowances
DANIEL P AMOS PO BOX 5566 COLUMBUS, GA 31906	Chairman 0.00	0		
KATHELEN AMOS PO BOX 5566 COLUMBUS, GA 31906	Trustee 0.00	0		
LAUREN AMOS PO BOX 5566 COLUMBUS, GA 31906	Trustee 0.00	0		
LAURA SMITH PO BOX 5566 COLUMBUS, GA 31906	Trustee 0.00	25,000		
TAMARA CALLIER 7290 NORTH LAKE DRIVE STE 503 COLUMBUS, GA 31909	Trustee 0.00	25,000		

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
FOCUS ON TRUTH 1252 CEDAR AVENUE COLUMBUS, GA 31906	NONE	NC	FINANCIAL SUPPORT	33,000
ST PAUL UMC 2101 WILDWOOD AVE COLUMBUS, GA 31906	NONE	NC	FINANCIAL SUPPORT	10,000
VALLEY RESCUE MISSION PO BOX 1232 COLUMBUS, GA 31902	NONE	NC	FINANCIAL SUPPORT	400,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
GOOD SAMARITAN HEALTH 1015 DOLAD LEE HOLLOWELL PKWY NW ATLANTA, GA 30318	NONE	NC	FINANCIAL SUPPORT	35,000
OPEN DOOR COMMUNITY HOUSE 2405 2ND AVE COLUMBUS, GA 31901	NONE	NC	FINANCIAL SUPPORT	170,000
DUKE UNIVERSITY 2138 CAMPUS DRIVE DURHAM, NC 27708	NONE	NC	FINANCIAL SUPPORT	750,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
ASBURY THEOLOGICAL SEMINARY 204 N LEXINGTON AVE WILMORE, KY 40390	NONE	NC	FINANCIAL SUPPORT	128,976
MERCY MED 3702 2ND AVE COLUMBUS, GA 31904	NONE	NC	FINANCIAL SUPPORT	175,000
UNIVERSITY OF CUMBERLANDS 6191 COLLEGE STATION DRIVE WILLIAMSBURG, KY 40769	NONE	NC	FINANCIAL SUPPORT	125,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
TEEN ADVISORS 1316 WILDWOOD AVE COLUMBUS, GA 31906	NONE	NC	FINANCIAL SUPPORT	10,000
FELLOWSHIP OF CHRISTIAN ATHLETES 8701 LEEDS ROAD KANSAS CITY, MO 64129	NONE	NC	FINANCIAL SUPPORT	45,000
INTERNATIONAL FRIENDS MINISTRY 3404 UNIVERSITY AVE COLUMBUS, GA 31907	NONE	NC	FINANCIAL SUPPORT	50,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
YOUNG LIFE 1137 LOCKWOOD AVE COLUMBUS, GA 31906	NONE	NC	FINANCIAL SUPPORT	210,000
SAFEHOUSE MINISTRIES 2101 HAMILTON ROAD COLUMBUS, GA 31904	NONE	NC	FINANCIAL SUPPORT	110,000
TEEN CHALLENGE 15 W 10TH STREET COLUMBUS, GA 31901	NONE	NC	FINANCIAL SUPPORT	10,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
AGAPE YOUTH FAMILY CENTER 2210 MARIETTA BLVD NW ATLANTA, GA 30318	NONE	NC	FINANCIAL SUPPORT	30,000
THE HOUSE OF TIME 1200 WYNNTON ROAD COLUMBUS, GA 31906	NONE	NC	FINANCIAL SUPPORT	40,000
EYE CARE TO THE NEEDY INC 2616 WARM SPRINGS ROAD COLUMBUS, GA 31904	NONE	NC	FINANCIAL SUPPORT	60,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
HEARTBOUND MINISTRIES INC PO BOX 191703 ATLANTA, GA 31119	NONE	NC	FINANCIAL SUPPORT	20,000
CLEMENT ARTS 2303 DOUBLE CHURCHES ROAD COLUMBUS, GA 31909	NONE	NC	FINANCIAL SUPPORT	30,000
MUST MINISTRIES 1280 FIELD PARKWAY MARIETTA, GA 30066	NONE	NC	FINANCIAL SUPPORT	25,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
MICAH'S PROMISE 4078 MILGEN ROAD COLUMBUS, GA 31907	NONE	NC	FINANCIAL SUPPORT	36,000
GORDON-CONWELL THEOLOGICAL SEMINARY 130 ESSEX STREET SOUTH HAMILTON, MA 01982	NONE	NC	FINANCIAL SUPPORT	1,500,000
SEATTLE PACIFIC UNIVERSITY 3307 3RD AVENUE WEST SEATTLE, WA 98119	NONE	NC	FINANCIAL SUPPORT	250,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
MILITARY COMMUNITY YOUTH MINISTRIES 540 NORTH CASCADE AVE COLORADO SPRINGS, CO 80903	NONE	NC	FINANCIAL SUPPORT	10,000
GREATER ATLANTA CHRISTIAN SCHOOL 1575 INDIAN TRAIL ROAD NORCROSS, GA 30093	NONE	NC	FINANCIAL SUPPORT	30,000
THE FOUNDATION FOR THEOLOGICAL 11 BROADWAY SUITE 615 NEW YORK, NY 10004	NONE	NC	FINANCIAL SUPPORT	750,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
ATLANTA YOUTH ACADEMY 2120 FORREST PARK ROAD ATLANTA, GA 30315	NONE	NC	FINANCIAL SUPPORT	10,000
WESLEY GLEN MINISTRIES 4580 NORTH MUMFORD ROAD MACON, GA 31210	NONE	NC	FINANCIAL SUPPORT	20,000
BILLY GRAHAM EVANGELISTIC ASSOCIATI 1 BILLY GRAHAM PARKWAY CHARLOTTE, NC 28201	NONE	NC	FINANCIAL SUPPORT	2,000,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
ANCIENT WAY FARMS 799 MAYO ROAD ELLERSLIE, GA 31807	NONE	NC	FINANCIAL SUPPORT	10,000
TRUTH SPRING ACADEMY 3314 5TH AVENUE COLUMBUS, GA 31904	NONE	NC	FINANCIAL SUPPORT	100,000
EAGLE RANCH 5500 UNION CHURCH ROAD FLOWERY BRANCH, GA 30542	NONE	NC	FINANCIAL SUPPORT	35,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
MAGNOLIA MANOR 2001 SOUTH LEE STREET AMERICUS, GA 31709	NONE	NC	FINANCIAL SUPPORT	5,000
METHODIST HOME FOR CHILDREN 304 PIERCE AVENUE MACON, GA 31204	NONE	NC	FINANCIAL SUPPORT	75,000
FOUNDATION OF WESLEY WOODS 1817 CLIFTON ROAD NE ATLANTA, GA 30329	NONE	NC	FINANCIAL SUPPORT	125,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
GAMMON THEOLOGICAL SEMINARY 653 BECKWITH STREET SW ATLANTA, GA 30314	NONE	NC	FINANCIAL SUPPORT	250,000
UNITED THEOLOGICAL SEMINARY 4501 DENLINGER ROAD DAYTON, OH 45426	NONE	NC	FINANCIAL SUPPORT	500,000
MPACT MEN'S MINISTRIES 4450 PORTAGE TRAIL MELBOURNE, FL 32940	NONE	NC	FINANCIAL SUPPORT	10,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
RESTORING THE SOUL PO BOX 32126 LAKEWOOD, CO 80227	NONE	NC	FINANCIAL SUPPORT	25,000
NAOMI'S VILLAGE PO BOX 270057 FLOWER MOUND, TX 75027	NONE	NC	FINANCIAL SUPPORT	180,000
SAMARITAN'S PURSE PO BOX 3000 BOONE, NC 28607	NONE	NC	FINANCIAL SUPPORT	1,035,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
THE WESLEY HERITAGE FOUNDATION PO BOX 311 MIDLAND, GA 31820	NONE	NC	FINANCIAL SUPPORT	75,000
CLIFTON SANCTUARY MINISTRIES 369 CONNECTICUT AVENUE ATLANTA, GA 30307	NONE	NC	FINANCIAL SUPPORT	10,000
THE LA VIDA CNTR AT GORDON COLLEGE 255 GRAPEVINE ROAD WENHAM, MA 01984	NONE	NC	FINANCIAL SUPPORT	50,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
PAN-AFRICAN ACAD CHRST SURGEON PO BOX 735262 DALLAS, TX 75373	NONE	NC	FINANCIAL SUPPORT	250,000
BAYLOR UNIVERSITY 1311 S 5TH ST WACO, TX 76706	NONE	NC	FINANCIAL SUPPORT	750,000
ST LUKE UNITED METHODIST CHURCH 1104 SECOND AVENUE COLUMBUS, GA 31901	NONE	NC	FINANCIAL SUPPORT	130,850
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
RADICAL MENTORING 1151 Hammond Drive Suite 240 ATLANTA, GA 30346	NONE	NC	FINANCIAL SUPPORT	10,000
STEWART COMMUNITY HOME 1125 15th Street COLUMBUS, GA 31901	NONE	NC	FINANCIAL SUPPORT	40,000
TOCCOA FALLS COLLEGE 107 Kincaid Drive MSC 846 TOCCOA FALLS, GA 30598	NONE	NC	FINANCIAL SUPPORT	75,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
THE GOOD SAMARITAN 1605 ROBERTA DRIVE MARIETTA, GA 30008	NONE	NC	FINANCIAL SUPPORT	25,000
FIELDS OF GRACE MINISTRIES 18334 GA HWY 85-W SHILOH, GA 31826	NONE	NC	FINANCIAL SUPPORT	46,800
COURAGE FOR LIFE 1000 WHITLOCK AVENUE MARIETTA, GA 30064	NONE	NC	FINANCIAL SUPPORT	15,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
WESLEY BIBLICAL SEMINARY 7800 I-55 N 7342 JACKSON, MS 39216	NONE	NC	FINANCIAL SUPPORT	250,000
GLOW INTERNATIONAL INC 503 PINE ST PALMETTO, GA 30268	NONE	NC	FINANCIAL SUPPORT	10,000
GILGAL INC 541 MOBILE AVENUE ATLANTA, GA 30315	NONE	NC	FINANCIAL SUPPORT	15,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
CLASSIC CITY CHURCH 386 N MILEDGE AVE ATHENS, GA 30601	NONE	NC	FINANCIAL SUPPORT	5,000
PRINCE AVENUE BAPTIST CHURCH 3691 MONROE HWY BOGART, GA 30622	NONE	NC	FINANCIAL SUPPORT	5,000
PRISON ALLIANCE 3001 SPRING FOREST RD STE 101 RALEIGH, NC 27616	NONE	NC	FINANCIAL SUPPORT	15,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
MANNA FUND 3305 BRECKINRIDGE BLVD DULUTH, GA 30096	NONE	NC	FINANCIAL SUPPORT	10,000
CITY OF REFUGE INC 1300 JOSEPH E BOONE BLVD NW ATLANTA, GA 30314		NC	FINANCIAL SUPPORT	15,000
ST FRANCIS XAVIER CHURCH 2030 ST STEPHEN ROAD MOBILE, AL 36617	NONE	NC	FINANCIAL SUPPORT	2,500
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
HOPE HEALS 4279 ROSWELL RD NE ATLANTA, GA 30342	NONE	NC	FINANCIAL SUPPORT	25,000
A3 PO BOX 3307 CERRITOS, CA 90703	NONE	NC	FINANCIAL SUPPORT	100,000
SAGAMORE INSTITUTE PO BOX 301076 INDIANAPOLIS, IN 46230	NONE	NC	FINANCIAL SUPPORT	20,000
Total . . . . . ▶ **3a**				11,473,126

Form 990PF Part XIV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

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
a *Paid during the year*				
PARADISE ATL ENRICHMEN TCENTER PO BOX 20468 ATLANTA, GA 30325	NONE	NC	FINANCIAL SUPPORT	100,000
Total . . . . . ▶ **3a**				11,473,126

TY 2024 Accounting Fees Schedule

Name: SOMA FOUNDATION INC

EIN: 46-3994466

Software ID: 24020490

Software Version: 2024v5.2

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CALLIER WITT	22,525	22,525	0	0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491300004125

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2024 Depreciation Schedule

Name: SOMA FOUNDATION INC
EIN: 46-3994466
Software ID: 24020490
Software Version: 2024v5.2

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
OFFICE FURNITURE	2019-12-19	4,580	4,141	200DB	9.58 %	439			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491300004125

TY 2024 Land, Etc. Schedule

Name: SOMA FOUNDATION INC

EIN: 46-3994466

Software ID: 24020490

Software Version: 2024v5.2

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
Furniture and Fixtures	13,173	13,173		
Machinery and Equipment	6,893	6,893		

TY 2024 Legal Fees Schedule

Name: SOMA FOUNDATION INC
EIN: 46-3994466
Software ID: 24020490
Software Version: 2024v5.2

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ALSTON & BIRD	49,332	49,332	0	0
PAGE SCRANTOM	26,827	26,827	0	0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491300004125

TY 2024 Other Assets Schedule

Name: SOMA FOUNDATION INC

EIN: 46-3994466

Software ID: 24020490

Software Version: 2024v5.2

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
ART COLLECTION	219,000	219,000	219,000

TY 2024 Other Decreases Schedule

Name: SOMA FOUNDATION INC
EIN: 46-3994466
Software ID: 24020490
Software Version: 2024v5.2

Description	Amount
PENALTIES	3,365
ROUNDING	3

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491300004125

TY 2024 Other Expenses Schedule

Name: SOMA FOUNDATION INC

EIN: 46-3994466

Software ID: 24020490

Software Version: 2024v5.2

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK CHARGES	18			
COMPUTER EXPENSE	6,372			
CONFERENCES	52,751			
CONTINUING EDUCATION	13,779			
DUES & SUBSCRIPTIONS	198			
GROUP INSURANCE	598			
INSURANCE	19,626			
MANAGEMENT FEES	139,304			
MARKETING	1,581			
MEALS	704			

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSE	3,869			
PAYROLL REIMBURSEMENT	-56,382			
POSTAGE EXPENSE	2,966			
RENT	10,913			
REPAIRS & MAINTENANCE	493			
SOMA INVESTMENTS - CHARITABLE CONT	947	947		
SOMA INVESTMENTS - OTHER DEDUCTIONS	303	303		
SOMA INVESTMENTS - OTHER DEDUCTIONS	574,610	574,610		
SOMA INVESTMENTS - PORTFOLIO	1,447,822	1,447,822		
SOMA INVESTMENTS - PORTFOLIO OTHER	29,089	29,089		

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SOMA INVESTMENTS - ROYALTY EXPENSE	3,532	3,532		
SOMA INVESTMENTS - SEC 179	157	157		
SOMA INVESTMENTS - SEC 59(E)(2)	231,610	231,610		
SOMA INVESTMENTS - SEC 743(B) NEG INC AJ	219	219		
TELEPHONE	2,475			

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TY 2024 Other Income Schedule

Name: SOMA FOUNDATION INC

EIN: 46-3994466

Software ID: 24020490

Software Version: 2024v5.2

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Other Investment Income	9,248,587	9,248,587	

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TY 2024 Other Increases Schedule

Name: SOMA FOUNDATION INC

EIN: 46-3994466

Software ID: 24020490

Software Version: 2024v5.2

Other Increases Schedule

Description	Amount
UNREALIZED GAIN	25,548,476

TY 2024 Other Professional Fees Schedule

Name: SOMA FOUNDATION INC

EIN: 46-3994466

Software ID: 24020490

Software Version: 2024v5.2

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	20,133	20,133	0	0

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TY 2024 Taxes Schedule

Name: SOMA FOUNDATION INC
EIN: 46-3994466
Software ID: 24020490
Software Version: 2024v5.2

Taxes Schedule

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	336,253			
FOREIGN TAX - FIDELITY	1,007	1,007		
FOREIGN TAX - SOMA INVESTMENTS	72,917	72,917		
GENERAL TAXES	30			
PAYROLL TAXES	19,156			

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Schedule B (Form 990) (Rev. January 2025)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization
SOMA FOUNDATION INC

Employer identification number
46-3994466

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☑ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☑ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . . ▶ $ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization	Employer identification number
SOMA FOUNDATION INC	46-3994466

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DANIEL P AMOS PO BOX 5566 COLUMBUS, GA 31906	$ 4,461,804	☐ Person ☐ Payroll ☑ Noncash (Complete Part II for noncash contributions.)
2	DANIEL P AMOS PO BOX 5566 COLUMBUS, GA 31906	$ 7,538,901	☐ Person ☐ Payroll ☑ Noncash (Complete Part II for noncash contributions.)
3	DANIEL P AMOS PO BOX 5566 COLUMBUS, GA 31906	$ 1,079,978	☐ Person ☐ Payroll ☑ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)
-		$	☐ Person ☐ Payroll ☐ Noncash (Complete Part II for noncash contributions.)

Name of organization
SOMA FOUNDATION INC

Employer identification number
46-3994466

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	56400 SHARES AFLAC STOCK	$ 4,461,804	2024-02-21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	75650 SHARES AFLAC STOCK	$ 7,538,901	2024-08-02
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
3	10425 SHARES AFLAC STOCK	$ 1,079,978	2024-12-27
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		$	

Name of organization	Employer identification number
SOMA FOUNDATION INC	46-3994466

Part III ***Exclusively*** **religious, charitable, etc., contributions to organizations described in section 501(c) (7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once. See instructions.) $ ____________

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
-	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
-	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
-	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
-	