

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](http://www.irs.gov/Form990PF) for instructions and the latest information.**

OMB No. 1545-0047  
**2022**  
**Open to Public Inspection**

**For calendar year 2022, or tax year beginning 01-01-2022, and ending 12-31-2022**

Name of foundation GENE & FLORENCE MONDAY FOUNDATION INC		<b>A Employer identification number</b> 62-1518306	
Number and street (or P.O. box number if mail is not delivered to street address) 1810 AILOR AVENUE	Room/suite	<b>B Telephone number (see instructions)</b> (865) 525-0238	
City or town, state or province, country, and ZIP or foreign postal code KNOXVILLE, TN 37921		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here..... <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>	
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ..... <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <u>5,996,888</u>		<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis.)</i>	
		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ..... <input type="checkbox"/>	

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)				
	<b>2</b> Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B				
	<b>3</b> Interest on savings and temporary cash investments				
	<b>4</b> Dividends and interest from securities	88,724	88,724		
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	111,972			
	<b>b</b> Gross sales price for all assets on line 6a	216,435			
	<b>7</b> Capital gain net income (from Part IV, line 2)		111,972		
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less: Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)					
<b>12 Total.</b> Add lines 1 through 11	200,696	200,696			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc.	0	0		0
	<b>14</b> Other employee salaries and wages				
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule)				
	<b>b</b> Accounting fees (attach schedule)	3,675	0		3,675
	<b>c</b> Other professional fees (attach schedule)				
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)	9,924	3,802		0
	<b>19</b> Depreciation (attach schedule) and depletion				
	<b>20</b> Occupancy				
	<b>21</b> Travel, conferences, and meetings				
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	68	68		0
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	13,667	3,870		3,675
	<b>25</b> Contributions, gifts, grants paid	200,000			200,000
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	213,667	3,870		203,675	
<b>27</b> Subtract line 26 from line 12:					
<b>a Excess of revenue over expenses and disbursements</b>	-12,971				
<b>b Net investment income</b> (if negative, enter -0-)		196,826			
<b>c Adjusted net income</b> (if negative, enter -0-)					

<b>Part II Balance Sheets</b> 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
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .			
	<b>2</b> Savings and temporary cash investments . . . . .	66,601	26,658	26,658
	<b>3</b> Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U.S. and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	7,345,514 <input checked="" type="checkbox"/>	5,945,308	5,945,308
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .	51,203 <input checked="" type="checkbox"/>	24,922	24,922
	<b>11</b> Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .			
	<b>14</b> Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
<b>15</b> Other assets (describe ▶ _____)				
<b>16 Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)	7,463,318	5,996,888	5,996,888	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)			
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b>			
	<b>24</b> Net assets without donor restrictions . . . . .	7,463,318	5,996,888	
	<b>25</b> Net assets with donor restrictions . . . . .			
	<b>Foundations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 26 through 30.</b>			
	<b>26</b> Capital stock, trust principal, or current funds . . . . .			
	<b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund			
	<b>28</b> Retained earnings, accumulated income, endowment, or other funds			
<b>29 Total net assets or fund balances</b> (see instructions) . . . . .	7,463,318	5,996,888		
<b>30 Total liabilities and net assets/fund balances</b> (see instructions) .	7,463,318	5,996,888		

<b>Part III Analysis of Changes in Net Assets or Fund Balances</b>		
<b>1</b> 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) . . . . .	<b>1</b>	7,463,318
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	-12,971
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	0
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	7,450,347
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____ <input checked="" type="checkbox"/>	<b>5</b>	1,453,459
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	<b>6</b>	5,996,888

**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.)
<b>1 a</b> JPM GRW ADVTG	P		2022-11-18
<b>b</b> NUCOR CORP	P	2011-03-15	2022-08-15
<b>c</b> JPM GRW ADVTG	P		2022-11-18
<b>d</b> CAPITAL GAINS DIVIDENDS	P		
<b>e</b>			

(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)
<b>a</b> 42,905		58,061	-15,156
<b>b</b> 25,000		25,000	0
<b>c</b> 17,095		21,402	-4,307
<b>d</b> 131,435			131,435
<b>e</b>			

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) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
<b>a</b>			-15,156
<b>b</b>			0
<b>c</b>			-4,307
<b>d</b>			131,435
<b>e</b>			

<b>2</b> 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	}	<b>2</b>	111,972
<b>3</b> 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	{		}	<b>3</b>	

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

Table with 11 rows for excise tax calculation. Includes fields for exempt foundations, tax under section 511, subtitle A tax, tax based on investment income, credits/payments, and total tax due/overpayment.

Part VI-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, political expenditures, foundation changes, unrelated business income, liquidation, and substantial contributors.

Part VI-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, distributions, public inspection requirements, and books in care.

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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

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in foreign countries.

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.

Table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

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

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

**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
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 (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. . . . . ▶		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
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
Total. Add lines 1 through 3 . . . . . ▶	0

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	6,312,751
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	99,973
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	6,412,724
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	6,412,724
<b>4</b>	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	96,191
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3.. . . .	<b>5</b>	6,316,533
<b>6</b>	<b>Minimum investment return.</b> Enter 5% (0.05) of line 5. . . . .	<b>6</b>	315,827

**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.)

<b>1</b>	Minimum investment return from Part IX, line 6. . . . .	<b>1</b>	315,827
<b>2a</b>	Tax on investment income for 2022 from Part V, line 5. . . . .	<b>2a</b>	2,736
<b>b</b>	Income tax for 2022. (This does not include the tax from Part V.). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	2,736
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	<b>3</b>	313,091
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	0
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	313,091
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1. . . . .	<b>7</b>	313,091

**Part XI Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	<b>1a</b>	203,675
<b>b</b>	Program-related investments—total from Part VIII-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4.. . . .	<b>4</b>	203,675



**Part XII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
<b>1</b> Distributable amount for 2022 from Part X, line 7				313,091
<b>2</b> Undistributed income, if any, as of the end of the 2022:				
<b>a</b> Enter amount for 2021 only. . . . .			274,909	
<b>b</b> Total for prior years: 20___, 20___, 20___		0		
<b>3</b> Excess distributions carryover, if any, to 2022:				
<b>a</b> From 2017. . . . .				
<b>b</b> From 2018. . . . .				
<b>c</b> From 2019. . . . .				
<b>d</b> From 2020. . . . .				
<b>e</b> From 2021. . . . .				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	0			
<b>4</b> Qualifying distributions for 2022 from Part XI, line 4: <b>▶</b> \$ <u>203,675</u>				
<b>a</b> Applied to 2021, but not more than line 2a			203,675	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2022 distributable amount. . . . .				0
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2022. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .		0		
<b>c</b> 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	
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions. . . . .		0		
<b>e</b> Undistributed income for 2021. Subtract line 4a from line 2a. Taxable amount—see instructions. . . . .			71,234	
<b>f</b> Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2023. . . . .				313,091
<b>7</b> 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			
<b>8</b> Excess distributions carryover from 2017 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9</b> <b>Excess distributions carryover to 2023.</b> Subtract lines 7 and 8 from line 6a. . . . .	0			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2018. . . . .				
<b>b</b> Excess from 2019. . . . .				
<b>c</b> Excess from 2020. . . . .				
<b>d</b> Excess from 2021. . . . .				
<b>e</b> Excess from 2022. . . . .				

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 2022, 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) 2022	(b) 2021	(c) 2020	(d) 2019	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed . . . . .					
<b>b</b> 85% (0.85) of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XI, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test—enter:					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part IX, line 6 for each year listed . . . . .					
<b>c</b> "Support" alternative test—enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> 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).)

**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

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**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

ROB MONDAY PRESIDENT  
PO BOX 1  
KNOXVILLE, TN 37901  
(865) 525-0238

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

GRANT APPLICATION FORM, PROGRAM DESCRIPTION, BUDGET FOR THE PROGRAM, CURRENT FINANCIAL REPORT, AUDIT FOR THE MOST RECENT FISCAL YEAR, LIST OF BOARD MEMBER AND OFFICERS OF THE APPLICANT ORGANIZATION, COPY OF MINUTES OF BOARD MEETING AUTHORIZING SUBMISSION OF APPLICATION, COPY OF LETTER OF DETERMINATION OF TAX EXEMPT STATUS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, COPY OF IRS REPORT 990 FOR THE PREVIOUS FISCAL YEAR, COPY OF SOLICITATION PERMIT FROM CITY OF KNOXVILLE AND TN SECRETARY OF STATE, AND MOST RECENT ANNUAL REPORT

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**c** Any submission deadlines:

APPLICATIONS ARE DUE JULY 1 BUT ARE ACCEPTED IF REC'D BEFORE THE GRANTS COMMITTEE MEETING IN SEPT.

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

AWARDS MUST BE USED FOR CHARITABLE, RELIGIOUS OR EDUCATIONAL PURPOSES.

**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)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . . ▶ <b>3a</b>				
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . . ▶ <b>3b</b>				0



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

Part XVI

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?

Table with 3 columns: Question, Yes, No. Rows include 1a(1) Cash, 1a(2) Other assets, 1b(1) Sales of assets, 1b(2) Purchases of assets, 1b(3) Rental of facilities, 1b(4) Reimbursement arrangements, 1b(5) Loans or loan guarantees, 1b(6) Performance of services, and 1c Sharing of facilities.

a Transfers from the reporting foundation to a noncharitable exempt organization of:

- (1) Cash
(2) Other assets

b Other transactions:

- (1) Sales of assets to a noncharitable exempt organization
(2) Purchases of assets from a noncharitable exempt organization
(3) Rental of facilities, equipment, or other assets
(4) Reimbursement arrangements
(5) Loans or loan guarantees
(6) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation.

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.

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.

Schedule table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

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.

Sign Here

Signature of officer or trustee: \*\*\*\*\* Date: 2023-05-09 Title: \*\*\*\*\*

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

Paid Preparer Use Only

Table for paid preparer information including name (KIMBERLY W YOUNG CPA), signature, date, firm name (PUGH & COMPANY PC), address (315 N CEDAR BLUFF RD SUITE 200 KNOXVILLE, TN 37923), PTIN (P00745372), and EIN (62-1142155).

<b>Form 990PF Part VII Line 1 - List all officers, directors, trustees, foundation managers and their compensation</b>				
<b>(a) Name and address</b>	<b>Title, and average hours per week (b) devoted to position</b>	<b>(c) Compensation (If not paid, enter -0-)</b>	<b>(d) Contributions to employee benefit plans and deferred compensation</b>	<b>Expense account, (e) other allowances</b>
SETH KEHNE	PRESIDENT	0	0	0
1815 JACKSON RD KNOXVILLE, TN 37921	1.00			
WILL ROTHERMEL	TREASURER	0	0	0
5306 RIVERBRIAR RD KNOXVILLE, TN 37919	1.00			
CARA KNAPP	SECRETARY	0	0	0
9048 SHALLOWFORD RD KNOXVILLE, TN 37923	1.00			
JAMES S MONDAY	DIRECTOR	0	0	0
208 BUSBEE ROAD KNOXVILLE, TN 37920	1.00			
SETH KEHNE	VICE PRESIDENT	0	0	0
7910 HIGH HEATH KNOXVILLE, TN 37919	1.00			
JACK LACEY MD	DIRECTOR	0	0	0
1932 ALCOA HWY KNOXVILLE, TN 37920	1.00			
RON CUNNINGHAM	DIRECTOR	0	0	0
PO BOX 1 KNOXVILLE, TN 37901	1.00			
WILLIAM E MONDAY IV	DIRECTOR	0	0	0
208 BUSBEE ROAD KNOXVILLE, TN 37920	1.00			
ROBERT W MONDAY	DIRECTOR	0	0	0
902 KERMIT DRIVE KNOXVILLE, TN 37912	1.00			
KEN HOLBERT	DIRECTOR	0	0	0
PO BOX 1 KNOXVILLE, TN 37901	1.00			
JOHN LACEY	DIRECTOR	0	0	0
1645 BOTSFORD DR KNOXVILLE, TN 37922	1.00			

**Form 990PF Part XIV Line 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)				
<b>a</b> <i>Paid during the year</i>				
ANGELIC MINISTRIES 1218 N CENTRAL ST KNOXVILLE, TN 37917	NONE	PUBLIC CHARITY	CHRISTIAN BASED ORGANIZATION WHICH PROVIDES HOUSEHOLD ITEMS AT NO COST TO THE NEEDY	11,000
BOYS AND GIRLS CLUBS OF TENNESSEE VALLEY 220 CARRICK ST KNOXVILLE, TN 37917	NONE	PUBLIC CHARITY	ENHANCE THE LIVES OF YOUTHS	15,000
INTERFAITH HEALTH CLINIC 315 GILL AVE KNOXVILLE, TN 37917	NONE	PUBLIC CHARITY	PROVIDE AFFORDABLE MEDICAL, DENTAL AND MENTAL HEALTH CARE TO THOSE WITHOUT INSURANCE	6,000
<b>Total . . . . . ▶ 3a</b>				200,000

**Form 990PF Part XIV Line 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)				
<b>a</b> <i>Paid during the year</i>				
KNOX COUNTY ASSOCIATION OF BAPTISTS 7709 WESTLAND DR KNOXVILLE, TN 37919	NONE	PUBLIC CHARITY	CENTER FOR UNDER PRIVILEGED CHILDREN AFTER SCHOOL CARE AND SUMMER CAMPS	5,000
METRO DRUG COALITION 4930 LYONS VIEW DR KNOXVILLE, TN 37919	NONE	PUBLIC CHARITY	STRIVE TO CREATE A HEALTH AND SAFE COMMUNITY FREE OF SUBSTANCE MISUSE.	10,000
REMOTE AREA MEDICAL 220 STOCK CREEK BLVD ROCKFORD, TN 37853	NONE	PUBLIC CHARITY	MEDICAL CLINICS DELIVERING FREE DENTAL, VISION, AND MEDICAL CARE TO UNDER SERVED AND UNINSURED INDIVIDUALS	20,000
<b>Total . . . . . ▶ 3a</b>				200,000



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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
RESTORATION HOUSE 2205 VILLAGE PLACE WAY KNOXVILLE, TN 37923	NONE	PUBLIC CHARITY	RESTORE SINGLE MOTHERS AND THEIR CHILDREN.	5,000
SPARK- EAST TN TECHNOLOGY 116 CHILDRESS ST SW KNOXVILLE, TN 37920	NONE	PUBLIC CHARITY	TO CONNECT PEOPLE WITH DISABILITES AND MAKE TECHNOLOGY ACCESSIBLE TO EVERYONE.OPLE WITH DISABLILITES AND MAKE TECHNOLOGY ACCESSIBLE TO EVERYONE	5,000
SOAR YOUTH MINISTRIES DBA THRIVE LONSDALE 1317 CONNECTICUT KNOXVILLE, TN 37921	NONE	PUBLIC CHARITY	TO SHARE THE GOSPEL THROUGH RELATIONSHIPS ANCHORED IN THE LOVE OF CHRIST THROUGH AFTERSCHOOL, SUMMER PROGRAMS AND MENTORING.	10,000
<b>Total . . . . . ▶ 3a</b>				200,000

**Form 990PF Part XIV Line 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)				
<b>a</b> <i>Paid during the year</i>				
VOLUNTEER MINISTRY CENTER 103 S GAY STREET KNOXVILLE, TN 37901	NONE	PUBLIC CHARITY	SUPPORT PROGRAMS FOR THE HOMELESS	25,000
YOKE YOUTH MINISTRIES PO BOX 3492 KNOXVILLE, TN 37927	NONE	PUBLIC CHARITY	CONNECTS STUDENTS WITH ADULT MENTORS FOR AFTERSCHOOL CLUBS, CAMPS AND SPECIAL EVENTS	5,000
MOBILE MEALS PO BOX 51650 KNOXVILLE, TN 37950	NONE	PUBLIC CHARITY	PROVIDES FOOD TO HOMEBOUND SENIOR ADULTS	14,000
<b>Total . . . . .</b>	<b>▶ 3a</b>			200,000

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FISH HOSPITALITY PANTRIES 800 NORTSHORE DR KNOXVILLE, TN 37919	NONE	PUBLIC CHARITY	PROVIDES GROCERIES TO AREA FAMILIES	10,000
FRIENDS OF LITERACY INC 4630 HOLSTON DR KNOXVILLE, TN 37914	NONE	PUBLIC CHARITY	IMPROVE ADULT, CHILD, AND FAMILY LITERACY IN EAST TN	4,000
GETAWAY DAYS 1810 AILOR AVE KNOXVILLE, TN 37921	NONE	PUBLIC CHARITY	PROVIDES YOUNG PEOPLE FROM CHALLENGING LIFE CONDITIONS AN OPPORTUNITY TO EXPERIENCE NEW CHALLENGES	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				200,000

**Form 990PF Part XIV Line 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)				
<b>a</b> <i>Paid during the year</i>				
KNOXVILLE YOUNG LIFE PO BOX 4457 MARYVILLE, TN 37802	NONE	PUBLIC CHARITY	FAITH BASED MINISTRY FOR MIDDLE, HIGH SCHOOL AND COLLEGE STUDENTS	15,000
RAISING A VOICE 1209 E MAGNOLIA AVE KNOXVILLE, TN 37917	NONE	PUBLIC CHARITY	END HUMAN TRAFFICKING THROUGH GOSPEL-CENTERED COMMUNITY TRANSFORMATION	10,000
SAFE FAMILIES FOR CHILDREN EAST TN 5401 KINGSTON PIKE ST 275 KNOXVILLE, TN 37919	NONE	PUBLIC CHARITY	NETWORK OF FAMILIES WHO CARE FOR CHILDREN FOR AS LONG AS NEEDED.	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				200,000

**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
<b>a</b> <i>Paid during the year</i>				
FRIENDS OF TN BABIES WITH SPECIAL NEEDS PO BOX 544 ALCOA, TN 37701	NONE	PUBLIC CHARITY	SUPPORT FOR FAMILIES WITH CHILDREN OF SPECIAL NEEDS	5,000
KNOXVILLE ACADEMY OF MEDICINE 115 SUBURBAN RD KNOXVILLE, TN 37923	NONE	PUBLIC CHARITY	PROVIDE HEALTH CARE FOR UNINSURED LOW INCOME RESIDENT	5,000
<b>Total . . . . .</b>				200,000

▶ 3a

**TY 2022 Accounting Fees Schedule****Name:** GENE & FLORENCE MONDAY FOUNDATION INC**EIN:** 62-1518306

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEES	3,675	0		3,675

**TY 2022 General Explanation Attachment****Name:** GENE & FLORENCE MONDAY FOUNDATION INC**EIN:** 62-1518306**General Explanation Attachment**

Identifier	Return Reference	Explanation	
1	DETAIL INFO REQUEST	FORM 990-PF, PART II, LINE 10B AND LINE 10C	THE INSTRUCTIONS FOR FORM 990-PF REQUIRE A SCHEDULE THAT LISTS EACH SECURITY HELD AT THE END OF THE YEAR, AND TO SHOW WHETHER THAT SECURITY IS REPORTED AT COST BASIS OR FMV. ALL SECURITIES ARE HELD IN A BROKERAGE ACCOUNT THROUGHOUT THE YEAR AND ARE REPORTED AT FMV. THIS SCHEDULE CAN BE PROVIDED TO THE IRS AT THEIR REQUEST.

**TY 2022 Investments Corporate Bonds Schedule****Name:** GENE & FLORENCE MONDAY FOUNDATION INC**EIN:** 62-1518306**Investments Corporate Bonds Schedule**

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
HILLIARD LYONS - FIXED INCOME	24,922	24,922



**TY 2022 Investments Corporate Stock Schedule****Name:** GENE & FLORENCE MONDAY FOUNDATION INC**EIN:** 62-1518306

## Investments Corporation Stock Schedule

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
HILLIARD LYONS - MUTUAL FUNDS	5,945,308	5,945,308

**TY 2022 Other Decreases Schedule****Name:** GENE & FLORENCE MONDAY FOUNDATION INC**EIN:** 62-1518306

<b>Description</b>	<b>Amount</b>
UNREALIZED GAIN/LOSS ON INVESTMENTS	1,453,459

**TY 2022 Other Expenses Schedule****Name:** GENE & FLORENCE MONDAY FOUNDATION INC**EIN:** 62-1518306**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE SUPPLIES	68	68		0

**TY 2022 Taxes Schedule****Name:** GENE & FLORENCE MONDAY FOUNDATION INC**EIN:** 62-1518306**Taxes Schedule**

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
EXCISE TAX	6,122	0		0
FOREIGN TAX ON DIVIDENDS	3,802	3,802		0