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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

OMB No. 1545-0047

2005

Name of organization		Employer identification number
SHELDON Foundation, Inc		20 1941647
Organization type (check or	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	√ 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private fo	oundation
	☐ 527 political organization	
Form 990-PF	☐ 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private found	ation
	☐ 501(c)(3) taxable private foundation	
	covered by the General Rule or a Special Rule . (Note: Only a section of section of the General Rule and a Special Rule—see instructions.)	on 501(c)(7), (8), or (10)
General Rule—		
	g Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 to contributor. (Complete Parts I and II.)) or more (in money or
Special Rules—		
sections 1.509(a)-3/1.	o) organization filing Form 990, or Form 990-EZ, that met the $33\frac{1}{3}$ % s 170A-9(e) and received from any one contributor, during the year, a camount on line 1 of these forms. (Complete Parts I and II.)	
during the year, aggre	r), (8), or (10) organization filing Form 990, or Form 990-EZ, that receive gate contributions or bequests of more than \$1,000 for use exclusive educational purposes, or the prevention of cruelty to children or animal	ely for religious, charitable,
during the year, some not aggregate to mor the year for an exclus applies to this organiz	(a), (b), or (10) organization filing Form 990, or Form 990-EZ, that receive contributions for use <i>exclusively</i> for religious, charitable, etc., purpose than \$1,000. (If this box is checked, enter here the total contribution <i>ively</i> religious, charitable, etc., purpose. Do not complete any of the Fixation because it received nonexclusively religious, charitable, etc., contribution to the fixation because it received nonexclusively religious, charitable, etc., contributions.	ses, but these contributions did ns that were received during Parts unless the General Rule ontributions of \$5,000 or more
990-EZ, or 990-PF), but they	are not covered by the General Rule and/or the Special Rules do not a must check the box in the heading of their Form 990, Form 990-EZ, to not meet the filing requirements of Schedule B (Form 990, 990-EZ,	or on line 2 of their Form

Employer identification number

SHELDON Foundation, Inc. 20:1941647 Part I Contributors (See Specific Instructions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution James S. Rice, Director 1 Person Payroll 128 Sunshine Dr. 8786 Noncash (Complete Part II if there is Harvest, AL 35749 a noncash contribution.) (a) (c) (d) Aggregate contributions No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (c) (d) (a) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (a) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (c) (d) (a) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.)