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Form 990-PF Department of the Treasury Internal Revenue Service

EXTENDED TO AUGUST 15, 2010 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.
 Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

OMB No 1545-0052
2015
Open to Public Inspection

FUI	Cale	ildar year 2015 or lax year b	eginning			, and ending		
Na	ıme o	f foundation					A Employer identification	n number
F	BET	TYE REED SCHO	OLARSH:	IP FO	OUNDATION, IN	c.	20-169250	3
_		and street (or P O box number if n				Room/suite	B Telephone number	
3	346	MT ALTO ROAL)				706-413-1	784
		town, state or province, coun		r foreign j	oostal code	•	C if exemption application is	
F	ROM	E, GA 30165						
G	Chec	k all that apply:	nıtıal return		Initial return of a fo	ormer public charity	D 1. Foreign organization	ns, check here
		F	inal return		Amended return	-		
		A	Address chang	je	Name change		Foreign organizations mechanisms and attach of the control of	eeting the 85% test, computation
Н	Checl	k type of organization:	Section 50	01(c)(3) e	xempt private foundation		E If private foundation st	atus was terminated
	Se	ection 4947(a)(1) nonexempt	charitable tru	ıst 🔲	Other taxable private founda	ation	under section 507(b)(
1 F	aır m	arket value of all assets at end	d of year J	Account	ıng method: X Cash	Accrual	F If the foundation is in a	60-month termination
(f	rom	Part II, col. (c), line 16)		o	ther (specify)		under section 507(b)(
	- \$	288,	,925. <i>(P</i>	art I, colu	ımn (d) must be on cash b	oasis.)		
P	art I	(The total of amounts in column necessarily equal the amounts	Expenses	may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	,	necessarily equal the amounts	in column (a))	, may not	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grants,	etc., received		12,000.		N/A	
	2	Check If the foundation is		ch Sch B				
	3	Interest on savings and temporal cash investments	гу					
	4	Dividends and interest from	securities		8,161.	8,161.		STATEMENT 1
	5a	Gross rents						
	b	Net rental income or (loss)						
ē	6a	Net gain or (loss) from sale of ass Gross sales price for all			1,497.			
ē	þ	assets on line 6a	100,6	34.				<u> </u>
Revenue	7	Capital gain net income (from Par	rt IV, line 2)			1,497.		
_	8	Net short-term capital gain						
	9	Income modifications Gross sales less returns						
	10a							
		Less Cost of goods sold						
	l	Gross profit or (loss) Other income					<u></u>	
	11 12	Total. Add lines 1 through 1	11		21,658.	9,658.		
	13	Compensation of officers, director			13,800.	9,638.		0.
	14	Other employee salaries and			13,000.	0.	RECEIN	/ED
	1	Pension plans, employee be	=			·	2	10
ses	ı	Legal fees	alicilis					 \(\delta\)
ens	ı	Accounting fees	STMT	. 2	1,700.	1 700.	 	4016 S. 0.
Ä	ľ	Other professional fees	STMI		3,771.	1,700. 3,771.	0000	
ě	17	Interest			57.724	<u> </u>	OGDEN	, UT
rati	18	Taxes	STMT	¹ 4	446.	446.		0.
ist	19	Depreciation and depletion		_				
Ę	20	Occupancy		i			·	
Ad	21	Travel, conferences, and me	etings				· · · · · · · · · · · · · · · · · · ·	
Pu	22	Printing and publications	. •			-		
g	23	Other expenses	STMT	' 5	788.	788.		0.
atir	24	Total operating and admini	strative					
Operating and Administrative Expen		expenses. Add lines 13 thro	ough 23		20,505.	6,705.		0.
, 0	25	Contributions, gifts, grants p	oaid]	15,000.			15,000.
Ī	26	Total expenses and disburs	ements.					
_		Add lines 24 and 25		_,	35,505.	6,705.		15,000.
	27	Subtract line 26 from line 12): :		T			
ر ا		Excess of revenue over expenses			-13,847.			
		Net investment income (if ne)		2,953.		
	C	Adjusted net income (if negat	tive, enter -0-)				N/A	

BETTYE REED SCHOLARSHIP FOUNDATION,

20-1692503

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INC.

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Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold 2-story brick warehouse, or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) 1a JOHNSON & JOHNSON COM 07/21/1105/29/15 07/21/1105/29/15 b MICROSOFT CORP COM 08/05/1305/29/15 c EBAY INC 12/15/1105/29/15 d XEROX CORP COM 08/05/1305/29/15 e DIRECTV 08/05/1305/29/15 f PIMCO UNCONSTRAINED BOND FD 08/05/1305/29/15 g OMNICORP GROUP INC 08/05/<u>13</u>05/29/15 h NASDAQ INC AMERICAN INTERNATIONAL GROUP INC 08/05/1305/29/15 ___ VANGUARD INTERM-TRM BOND INDEX 07/22/1105/29/15 08/05/13<u>0</u>5/2<u>9/1</u>5 k ALPS ALPERIAN MLP ETF |08/05/13|05/29/15 | ANTHEM INC |07/21/11|05/29/15 m FISERV INC n ABBVIE |07/21/11<u>|0</u>5/29/<u>1</u>5 08/05/1309/01/15 o PIMCO ALL ASSET ALL AUTH (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 2,619. 1,732. 887. а 2,680. 1,546. 1,134. b 489. 422. 67. C 1,634. 710. d 2,344 907. 2,825. 1,918. е -50. 11,369. 11,319. f 28. 219. 191. g 360. 208. 568. h 67. 408. 341. 1 29,782. 29,679. 103. -864. 11,642. <u>12,506.</u> k 317. 670. 353. 296. 482. 186. m 331 137. 194. n 10,161 12,500. -2,339.0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) but not less than "-0-") (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any 887. 1,134. b 67. C 710. d 907. е -50. 28. g 208. h 67. 103. -864. 317. 296. m 194. n -2,339.0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } Capital gain net income or (net capital loss) 2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8

N/A

BETTYE REED SCHOLARSHIP FOUNDATION, INC. PAGE OF Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) 1a TRINITY INDUSTRIES INC 10/30/1405/29/15 10/30/1405/29/15 b TARGET CORP 10/30/1405/29/15 c LEGG MASON BW GLOBAL OPPORTUNITIES BOND FD 10/30/1405/29/15 d KOHL'S CORP 10/30/1405/29/15 e CONSTELLATION BRANDS INC 10/30/1405/29/15 f NVIDIA CORP 10/30/1405/29/15 g DEUTSCHE STRATEGIC EQUITY LONG/SH FD 10/30/1405/29/15 h HARMAN INTERNATIONAL INDUSTRIES INC 10/30/1405/29/15 INABORS INDUSTRIES LTD J CVS HEALTH CORP 10/30/1405/29/15 10/30/14<u>06/19/15</u> k DANAHER CORP 05/29/1509/01/15 I PIMCO ALL ASSET ALL AUTH |11/10/15|11/30/15 m FOUR CORNERS PPTY TR INC n CAPITAL GAINS DIVIDENDS 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price plus expense of sale (e) plus (f) minus (g) (or allowable) 2,654. -346. 2,308. a 174. 792. 618. b 4,670. 5,000. -330. C 80. 521. 441. d 228. 943. 715. е 70. 443. 373. f 198. 348. 6,150. g 599. 537. 62. h -404. 2,169. 2,573. -429. 83. 512. 211. 2,832 2,621. k 1,936. 2,138. -202. 1 -1<u>.</u> 13. 14. m 9. n 9. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) but not less than "-0-") (i) F.M.V. as of 12/31/69 over col. (j), if any as of 12/31/69 -346. a 174. b -330.C 80. d 228. е 70. f 198. g h 62. -404. 83. 211. k -202. 1 -1<u>.</u> m 9. n 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 1,497. Capital gain net income or (net capital loss) 2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c).

If (loss), enter "-0-" in Part I, line 8

	orm 990-PF (2015) BETTYE REED SCHOLARSHIP FOUNDATION, INC.		<u> 20 – </u>	<u> 1692</u>	2503	3	Page 4
	Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(c)	e), or 4	948	- see i	nstr	uctio	ns)
1	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)		ľ				
t	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%)	1				59.
	of Part I, line 27b						
(c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	J					
2	2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2_				0.
3	3 Add lines 1 and 2		3				<u>59.</u>
4	4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				0.
5	5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				<u>59.</u>
6	6 Credits/Payments:						
â	a 2015 estimated tax payments and 2014 overpayment credited to 2015		ļ				
t	b Exempt foreign organizations - tax withheld at source 6b						
C	c Tax paid with application for extension of time to file (Form 8868)						
C	d Backup withholding erroneously withheld 6d 6d						
7	7 Total credits and payments. Add lines 6a through 6d		7				0.
8	8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8				
9	9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9				<u>59.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10				
	1 Enter the amount of line 10 to be: Credited to 2016 estimated tax	ded ►	11				
Pa	Part VII-A Statements Regarding Activities						
1a	1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or i	ntervene	ın			Yes	No
	any political campaign?				1a		X
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the continuous for th	definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	publishe	d or				
	distributed by the foundation in connection with the activities.						,
C	c Did the foundation file Form 1120-POL for this year?				1c		X
d	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. ► \$	0.					
е	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	on					
	managers. ► \$0.						•
2	2 Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		X
	If "Yes," attach a detailed description of the activities.				İ		
3	3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporate to the IRS.	oration, o	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3_		X
	4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
	b If "Yes," has it filed a tax return on Form 990-T for this year?		N	/A	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		<u>X</u>
	If "Yes," attach the statement required by General Instruction T.						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					ł	
	By language in the governing instrument, or			İ			
	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	X	
7	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 XV			7	Х	
8a	Ba Enter the states to which the foundation reports or with which it is registered (see instructions)						
_	GA						
b	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	_X	ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)	for caler	ndar				
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	_			9	L	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresse	s S'	<u>rmt</u>	.8	10	X	

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Part VII-B Statements Regarding Activities for Which	Form 4/20 May be i	requirea (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire		r==1		
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	6?	Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? (see instructions)		Ye	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f				
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i	n Regulations		ļ	
section 53.4945 or in a current notice regarding disaster assistance (see instru	ıctions)?		N/A L	5b	
Organizations relying on a current notice regarding disaster assistance check t	nere		▶□□	1	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined		İ	
expenditure responsibility for the grant?	N	Γ/A	es No		
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).		ł		
${\bf 6a}$ Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		_	6b	X
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	es X No		\bot
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	y 		
List all officers, directors, trustees, foundation managers and their		T:			
4 Nilomo and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred compensation	(e) E	xpense int, other
(a) Name and address	to position	enter -0-)	and deterred compensation	allo	wances
ROGER L. MITCHELL	PRESIDENT				
346 MT ALTO ROAD		}			
ROME, GA 30165	10.00	13,800.	0.		0.
ALFRED R. MITCHELL	VICE PRESIDEN	T			
346 MT ALTO ROAD					
ROME, GA 30165	0.00	0.	0.		<u> </u>
ROBERT T. MASTERS	SECRETARY/TRE	ASURER			
346 MT ALTO ROAD		_	_		_
ROME, GA 30165	0.00	0.	0.		0.
	luded on line 4) 16 none	amtan UNIONE II			
Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(a) E	·vnoneo
(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	accou allov	xpense int, other wances
NONE					_
			τ		
total number of other employees paid over \$50,000			>		0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Hi Paid Employees, and Contractors (continued)	ighly		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."			
(a) Name and address of each person paid more than \$50,000 (b) Type of	f service	(c) Com	pensation
NONE			
		ļ	
		-	
			-
Total number of others receiving over \$50,000 for professional services		•	0
Part IX-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.	e	Expenses	;
1 N/A			
2			
3	-		
4			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount	
1 N/A			
2			
All other program-related investments. See instructions.			
3			
×			
Total. Add lines 1 through 3	>		0.
		Form 990-F	PF (2015)

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

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15,000.

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Part XIII Undistributed Income (see instructions)

1 Distributable amount for 2016 from Part XI, Inin 7 2 Undestructured recome, if any, as of the end of 2015 a Enter amount for 2014 donly 5 Total for proy years: 3 Excess distributions carryover, if any, to 2015; a From 2010		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
Inter 7	1 Distributable amount for 2015 from Part XI.	Corpus	Tours prior to 2011		
a Enter amount for 2014 only b Total for prior years: 5. Excess distributions carryover, if any, to 2015: a From 2010	l l				14,594.
a Excess distributions carryover, if any, to 2015: a From 2010	2 Undistributed income, if any, as of the end of 2015				
3 Excess distributions carryover, if any, to 2015: a From 2010	a Enter amount for 2014 only			0.	
3 Excess distributions carryover, if any, to 2015; a from 2010	b Total for prior years:		_		
a From 2010			0.		
bFrom 2011					
e From 2012 d from 2013 d From 2014 f Total of lines 3a through e 16 Qualifying distributions for 2015 from Part XII, line 4: Y S 15,000. a Applied to 2014, but not more than line 2a b Applied to undistributed income of prior years (Election required -see instructions) c Treated as distributions out of corpus (Election required -see instructions) d Applied to 2015 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryow replied to 2015 (of an amount appears in obtain (it), the same amount insults be shore in culture (a) b Prior years' undistributed income. Subtract line 4b from line 2b c Einet the amount of prior years' undistributed income for which a notice of deflorency has been issued, or on which the section 494(2) tax has been previously assessed d Subtract line 6b from line 6b. Taxable amount - see instructions e Undistributed income for 2014. Subtract line 4 from line 2. Taxable amount - see instruc- tines 4b from line 1. This amount must be distributed in 2016 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(1)(1)(f)(F) of 494(2)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2010 not applied to line 5 or line 7 4, 810.					
d From 2014 Trotal of lines 3a through e 16,228 .					
e From 2014 1 Total of lines 3 at through e 4 Ouslifying distributions for 2015 from Part XII, line 4: ► S 15,000. a Applied to 2014, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2015 distributable amount e Remaining amount distributed out of corpus Excess distributions carryover applied to 2015 (far in mount appears in octions (fig. the same amount indicated below: a Corpus Add lines 31, 46, and 4e Subtract line 4 b Prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 494/2(a) tax has been previously assessed 4 Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2014. Subtract line 4 from line 2a. Taxable amount - see instr. 1 Undistributed income for 2015. Subtract lines 4 d and 5 from line 1. This amount must be distributed in 2016 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 494(2)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2010 not applied on line 5 or line 7 4 ,810.					
Total of lines 3 at through e 4. Qualifying distributions for 2015 from Part XII, Im 4: № \$ 15,000. a Applied to 2014, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2015 distributable amount e Remaining amount distributed out of corpus 5. Excess distributions carryover applied to 2015 (first amount appears in octumin (di)) 6. Enter the net total of each column as indicated below: a Corpus Add Intensity 4.9, and 4e Subtract line 4b from line 2b 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 risseld, 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 2014. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2015. Subtract line 4d and 5 from line 1. This amount must be distributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributions carryover from 2010 8 Excess distributions carryover from 2010 not applied on line 5 or line 7					
4 Qualifying distributions for 2015 from Part XII, line 4 1 ► 5 15,000. A Applied to 2014, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c. Treated as distributions out of corpus (Election required - see instructions) d. Applied to 2015 distributable amount e. Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2015 (if an amount appear an column (id), the same amount must be elso minimal to the control of the complete of the control of		16 220			
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8 Excess distributions carryover from 2010 not applied on line 5 or line 7 4,810.		0			
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		4 810			
LACOUS SISTINGUIONS SETTYOFF TO ZOTO.		<u> </u>			
Subtract lines 7 and 8 from line 6a 11,824.	· · · · · · · · · · · · · · · · · · ·	11.824.			
	10 Analysis of line 9:				
a Excess from 2011 4, 374.	·				
b Excess from 2012 5, 495.					
c Excess from 2013 1,549.					
d Excess from 2014	d Excess from 2014				
e Excess from 2015 4 0 6 .	<u>e Excess from 2015</u> 406.				

Form 990-PF (2015) BETTYE	REED SCHOLA	RSHIP FOUND	ATION, INC		92503 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	I-A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo	or 2015, enter the date of	the ruling	▶		
b Check box to indicate whether the foun	dation is a private operation	ng foundation described i		4942(j)(3) or 494	12(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					<u>_</u>
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities			L		
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 X, 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 XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during t	the year-see instr	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			ributions received by the	foundation before the close	e of any tax
year (but only if they have contributed r	nore than \$5,000). (See s	ection 507(d)(2).)			
NONE					
b List any managers of the foundation wh			or an equally large porti	on of the ownership of a par	tnership or
other entity) of which the foundation ha	s a 10% or greater interes	st.			
NONE					
2 Information Regarding Contribut					
				not accept unsolicited reque	
the foundation makes gifts, grants, etc.	'				J
a The name, address, and telephone num	ber or e-mail address of t	he person to whom appli	cations should be addres	Ssed:	
SEE STATEMENT 9					
b The form in which applications should be	e submitted and informat	tion and materials they sh	ould include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	S. Such as by geographics	al areas, charitable fields	kinds of institutions or e	other factors:	
a, room on on minimum on on award	s, sadi ad by goograpillo	a. sas, charitation notas,	uo or moditationo, or t		

BETTYE REED SCHOLARSHIP FOUNDATION, INC. 20-1692503 Page 11 Form 990-PF (2015) Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year ANDREW SETH BROOME NONE N/A COLLEGE SCHOLARSHIP 2,000. ROME, GA 30161 NONE N/A COLLEGE SCHOLARSHIP BENJAMIN MASTERS 2,000, ROME GA 30161 NONE N/A COLLEGE SCHOLARSHIP MORRIS MITCHELL 2,000. ROME, GA 30161 COLLEGE SCHOLARSHIP DAVID MASTERS NONE N/A ROME GA 30161 2,000. MARY KATE SMITH NONE N/A COLLEGE SCHOLARSHIP ROME GA 30161 1,000. SEE CONTINUATION SHEET(S) Total ▶ 3a 15 000. **b** Approved for future payment NONE

Total

BETTYE REED SCHOLARSHIP FOUNDATION, INC. 20-1692503

Part XV Supplementary Information 3 Grants and Contributions Paid During the				
. Recipient		F	Durant	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome of business)	or substantial contributor	recipient		
JORDAN SHAW	NONE	N/A	COLLEGE SCHOLARSHIP	
ROME, GA 30161				2,000
WHITNEY FAITH SMITH	NONE	N/A	COLLEGE SCHOLARSHIP	0.000
OME, GA 30161				2,000
EAH-JOY SMITH	NONE	N/A	COLLEGE SCHOLARSHIP	
ROME, GA 30161				2,000
		ļ		
		}		
Total from continuation sheets				6.000

Enter aross	amounts unless otherwise indicated.	Unrelate	d business income	Exclud	ded by section 512, 513, or 514	(e)
		(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
-	n service revenue:	code		code		
		 				
		 				
		 				
		 		-		
		 				
f				 		
-	and contracts from government agencies			 		
	ship dues and assessments	 				
	on savings and temporary cash			1		
Investme				14	8,161.	
•	Is and interest from securities	 		14	0,101.	
	al income or (loss) from real estate:	 				
	-financed property					
	lebt-financed property	l				
	al income or (loss) from personal					
property		 		-		
	vestment income					
	loss) from sales of assets other	ĺĺ		10	1 407	
than inve				18	1,497.	
	me or (loss) from special events	<u> </u>				
	ofit or (loss) from sales of inventory			-		
11 Other rev	/enue:	1		[{		
		}				
						
d						
e					0 (50	
	Add columns (b), (d), and (e)	L	0.		9,658.	
	dd line 12, columns (b), (d), and (e)				13	9,658.
	neet in line 13 instructions to verify calculations.)					
Part XV	I-B Relationship of Activities to	the Acco	mplishment of Ex	empt	Purposes	
Line No.	Explain below how each activity for which incom			contribi	uted importantly to the accom	plishment of
▼	the foundation's exempt purposes (other than b					
	CASH AND INVESTMENTS AR	E HELD	TO FULFILL	THE	FOUNDATIONS :	EXEMPT
	PURPOSE.					
	·					
	· · · · · · · · · · · · · · · · · · ·					
						
					<u>_</u>	
						
		·				

	14/22						
		1					
Sign Here	Under penalties of perury, I declare that I have exa and belief, it is true, correct and complete special Signature of officer or trustee	tion of preparer (other than taxpayer			has any knowledge	May the IRS discurreturn with the prejshown below (see	parer
Paid	Print/Type preparer's name DAVID R. ESTES,	Preparer's signature CPADAVID R. E	ESTES, C	Date 08/15/16	Check if self- employed	PTIN P0054287	6
Prepa Use O		MOORE, LLC			Fırm's EIN ► 5	8-0940010	
_	I	ROAD ST, SUITE A 30161	450		Phone no. (7	706) 291-4	690
						Form 990-P	F (2015

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

0MB No 1545-0047

2015

Employer identification number Name of the organization BETTYE REED_SCHOLARSHIP FOUNDATION, INC 20-1692503 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 X 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 property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** I 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. Do not 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 is not covered by the General Rule and/or the Special Rules does not 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 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

BETTYE REED SCHOLARSHIP FOUNDATION, INC.

20-1692503

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	BETTYE A. REED IRREVOCABLE TRUST 228 NORTH 2ND AVE ROME, GA 30161	\$12,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\	Person Payroll Oncash Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)		

Employer identification number

BETTYE REED SCHOLARSHIP FOUNDATION, INC.

20-1692503

Part II	Noncash Property (see instructions) Use duplicate copies of Pa	art 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
		s	
(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
		\$	
(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 orga	anization		Employer Identification number						
BETTYE	REED SCHOLARSHIP FOUN	DATION, INC.	20-1692503						
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete of	ributions to organizations described in	section 501(c)(7), (8), or (10) that total more than \$1,000 for						
	completing Part III, enter the total of exclusively religiou	s, charitable, etc., contributions of \$1,000 or les	s for the year (Enter this info once) \$						
(-) N-	Use duplicate copies of Part III if addition								
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
Part I									
}									
L									
		(e) Transfer of gift							
1			B. I. S						
<u> </u>	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee						
1									
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
Part I	(2). 2.200 3.3								
}			_						
Ĺ									
ŀ	(e) Transfer of gift								
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee								
<u> </u>	Transferee's name, address, ar	1d ZIP + 4	Relationship of transferor to transferee						
:									
7.3									
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
Part I		 _							
<u> </u>									
	(e) Transfer of gift								
:	Transferee's name, address, ar	Relationship of transferor to transferee							
<u> </u>	Transieree's name, address, at	IU ZIF + 4	nelationship of transfer of to transfer ce						
(a) No									
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
raiti									
}-									
}		(e) Transfer of gift							
	Transferee's name, address, ar	Relationship of transferor to transferee							
1									
1									

FORM 990-PF DIVIDENT	OS AND INTER	EST FROM SECUR	ITIES ST	PATEMENT 1
GROSS SOURCE AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	
RIVER CITY BANK 8,170).	9. 8,161.	8,161.	
TO PART I, LINE 4 8,170).	9. 8,161.	8,161.	
FORM 990-PF	ACCOUNTI	NG FEES	Si	PATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING EXPENSE	1,700.	1,700.		0.
TO FORM 990-PF, PG 1, LN 16B	1,700.	1,700.		0.
FORM 990-PF (THER PROFES	SIONAL FEES	ទា	CATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	3,771.	3,771.	 	0.
TO FORM 990-PF, PG 1, LN 16C	3,771.	3,771.		0.
FORM 990-PF	TAX	ES	SI	CATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAX BASED ON INVESTMENT INCOME	446.	446.		0.
TO FORM 990-PF, PG 1, LN 18	446.	446.		0.

FORM 990-PF	O	THER E	XPENSES			STATEMENT
DESCRIPTION	(<i>)</i> EXPEN PER I		(B) NET INVE MENT INC			
PHONE & INTERNET CORPORATE REGISTRATION		758. 30.		758. 30.		0
TO FORM 990-PF, PG 1, LN 23		788.		788.		0
FORM 990-PF U.S. AND S	STATE/C	CITY G	OVERNMENT	OBLI	GATIONS	STATEMENT
DESCRIPTION		U.S GOV'		вос	OK VALUE	FAIR MARKET VALUE
VANGUARD INTERIM TRM BOND INI PIMCO UNCONSTRAINED BOND FUNI DOUBLELINE TOTAL RETURN BOND	D C	X X X			0. 14,312. 40,721.	0 14,312 40,721
TOTAL U.S. GOVERNMENT OBLIGAT	rions				55,033.	55,033
TOTAL STATE AND MUNICIPAL GOV	VERNMEN	T OBL	IGATIONS			
TOTAL TO FORM 990-PF, PART I	I, LINE	E 10A			55,033.	55,033
FORM 990-PF	COF	RPORATI	E STOCK			STATEMENT
DESCRIPTION				вос	OK VALUE	FAIR MARKET VALUE
CONOCOPHILLIPS FISERV INC JOHNSON & JOHNSON MICROSOFT CORP MOLSON COORS BREWING XEROX CORP PHILLIPS 66 ALPS ALERIAN MLP ETF PIMCO ALL ASSET INSTL CL ABBVIE AMERICAN INTERNAT'L GROUP INC DEERE & COMPANY DIRECTV EBAY INC FREEPORT MCMORAN COPPER & GOI					1,774. 3,018. 0. 0. 3,381. 0. 2,781. 0. 2,370. 2,727. 2,364. 0. 1,182. 907.	1,774 3,018 0 0 3,381 0 2,781 0 2,370 2,727 2,364 0 1,182 907

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NASDAQ INC .	3,025.	3,025.
NORFOLK SOUTHERN CORP	2,453.	2,453.
OMNICOM GROUP INC	2,648.	2,648.
ANTHEM INC	2,231.	2,231.
BLACKROCK GLOBAL LONG/SHORT CRED INSTL	14,379.	14,379.
DEUTSCHE STRATIGIC EQUITY LONG/SH FD	8,115.	8,115.
LEGG MASON BW GLOBAL OPP BOND FD	0.	0.
BANK OF AMERICA CORP	2,609.	2,609.
CAPITAL ONE FINL CORP	2,382.	2,382.
CELGENE CORP	2,994.	2,994.
CF INDUSTRIES HOLDINGS INC	2,041.	2,041.
CONSTELLATION BRANDS INC	3,134.	3,134.
CVS HEALTH CORP	2,542.	2,542.
DANAHER CORP	0.	0.
DTE ENERGY HOLDING	2,646.	2,646.
EMC CORP	2,388.	2,388.
GILEAD SCIENCES INC	2,530.	2,530.
ALPHABET INC	3,890.	3,890.
HARMAN INTL IND	1,978.	1,978.
HP INC	876.	876.
INTEL CORP	2,687.	2,687.
JP MORGAN CHASE & CO	2,905.	2,905.
KOHL'S CORP	1,953.	1,953.
METLIFE INC	2,411.	2,411.
	1,369.	1,369.
MURPHY OIL CORP	0.	1,309.
NABORS IND LTD	1,775.	1,775.
NATIONAL OILWELL VARCO INC	3,955.	3,955.
NVIDIA CORP	2,592.	2,592.
PUBLIC SERVICE ENTERPISE GROUP	3,226.	3,226.
ROPER IND INC	2,208.	2,208.
SCRIPPS NETWORKS INTERACTIVE INC		
STERICYCLE INC	2,653. 2,396.	2,653.
TARGET CORP		2,396.
THE ALLSTATE CORP	2,608.	2,608.
THERMO FISHER SCIENTIFIC INC	3,263.	3,263.
TRINITY IND INC	0.	0.
TYSON FOODS INC	3,627.	3,627.
UNUM PROVIDENT CORP	2,530.	2,530.
VERIZON COMMUNICATIONS INC	2,450.	
WAL-MART STORES INC	2,146.	2,146.
OPPENHEIMER STEELPATH MLC SELECT	10,036.	10,036.
PROSHARES ULTRASHORT RUSSELL 2000	5,815.	5,815.
PROSHARES ULTRASHORT QQQ	1,188.	1,188.
FEDERATED PRUDENT BEAR INSTL	1,391.	1,391.
LAZARD FUNDAMENTAL LONG/SHORT	9,115.	9,115.
LEUTHOLD FUNDS GRIZZLEY SH FD	5,961.	5,961.
ISHARES US AGGREGATE BOND ETF	30,351.	30,351.
APPLE INC	2,000.	2,000.
BIOGEN INC	1,532.	1,532.
DARDEN RESTAURANTS INC	2,418.	
FOUR CORNERS PPTY TR INC	290.	290.
HEWLETT PACKARD ENTERPRISE CO	1,125.	1,125.
MCKESSON CORP	1,972.	1,972.
PAYPAL HOLDINGS INC	1,557.	1,557.

BETTYE REED SCHOLARSHIP FOUNDATION, INC.		20-16925	503
STANLEY BLACK & DECKER INC WALGREENS BOOTS ALLIANCE INC	2,775. 2,384.	2,77	
TOTAL TO FORM 990-PF, PART II, LINE 10B	210,029.	210,02	29.
FORM 990-PF LIST OF SUBSTANTIAL CONT PART VII-A, LINE 1		STATEMENT	8
		STATEMENT	8

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT PART XV, LINES 2A THROUGH 2D

9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

ROGER L. MITCHELL 607 WEST 10TH STREET ROME, GA 30165

NAME OF GRANT PROGRAM

SCHOLARSHIP PROGRAM

FORM AND CONTENT OF APPLICATIONS

APPLICATIONS MUST INCLUDE: APPLICATION FORM, OFFICIAL TRANSCRIPTS, RESUME, STATEMENT OF FINANCIAL NEED, A LETTER OF RECOMMENDATION FROM A TEACHER, AND AN ESSAY ON THE TOPIC "THE ROLE OF HARD WORK, ACADEMICS, AND PHILANTHROPY IN MY LIFE"

ANY SUBMISSION DEADLINES

APRIL 15 OF EACH YEAR

RESTRICTIONS AND LIMITATIONS ON AWARDS

STUDENTS MUST ATTEND A COLLEGE IN FLOYD COUNTY, GEORGIA TO BE ELIGIBLE FOR THE SCHOLARSHIP