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Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052 2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ 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.irs.gov/form990pf.

For calendar year 2015 or tax year beginning , and ending Name of foundation Employer identification number THE BEARD-PAYNE FAMILY FOUNDATION 26-1441249 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 404-261-9496 4130 EAST BROOKHAVEN DRIVE, N.E. City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here GA 30319 ATLANTA G Check all that apply Initial return Initial return of a former public charity 1 Foreign organizations, check here Amended return Final return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization. X Section 501(c)(3) exempt private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust | Other taxable private foundation J Accounting method X Cash I Fair market value of all assets at Accrual If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col (c), Other (specify) 51,014 (Part I, column (d) must be on cash basis) line 16) ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for chantable expenses per amounts in columns (b), (c), and (d) may not necessarily equal purposes income Income books the amounts in column (a) (see instructions)) (cash basis only) 130,504 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ If the foundation is **not** required to attach Sch B 3 Interest on savings and temporary cash investments 877 877 877 Dividends and interest from securities 4 5a Gross rents Net rental income or (loss) h Stmt 1 -4,066 Net gain or (loss) from sale of assets not on line 10 75,294 Gross sales price for all assets on line 6a 0 Capital gain net income (from Part IV, line 2) 0 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold ¢ Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 877 877 127,315 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Stmt 2 2,100 Accounting fees (attach schedule) Other professional fees (attach schedule) C Ö 17 Interest S 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 659 Stmt 3 659 23 Other expenses (att sch) Total operating and administrative expenses. 2,759 909 0 Add lines 13 through 23 157,710 157,710 25 Contributions, gifts, grants paid 909 0 157,710 Total expenses and disbursements. Add lines 24 and 25 160,469 26 Subtract line 26 from line 12: 27 -33,154 Excess of revenue over expenses and disbursements 0 Net investment income (if negative, enter -0-) 877 Adjusted net income (if negative, enter -0-)

_	Davi I	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
_	Part I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing			
	2	Savings and temporary cash investments	49,737	20,541	20,541
	3	Accounts receivable ▶			
		Less. allowance for doubtful accounts ▶			
	4	Pledges receivable ▶		1	
	ŀ	Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	ł	disqualified persons (attach schedule) (see			
		instructions)			
	7	Other notes and loans receivable (att schedule)			
		Less allowance for doubtful accounts ▶ 0			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
₹	10a	Investments – U S and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule) See Stmt 4	29,257	25,299	30,473
	C	Investments – corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis			
		Less accumulated depreciation (attach sch.) ▶			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach sch.)			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers – see the			
_	1	instructions Also, see page 1, item I)	78,994	45,840	51,014
	17	Accounts payable and accrued expenses			
'n	18	Grants payable			
Ę.	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ā	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶)			
_	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
Ses	3	and complete lines 24 through 26 and lines 30 and 31.		4= 44	
a	24	Unrestricted	78,994	45,840	
Bal	25	Temporarily restricted			
<u>Б</u>	26	Permanently restricted			
Ē	3	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
Net Assets or Fund Balances	0.7				
ţ	27	Capital stock, trust principal, or current funds			
SSe	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Š	29	Retained earnings, accumulated income, endowment, or other funds	78,994	45,840	
Ne	30	Total liabilities and not assets (see instructions)	70,334	43,040	
	31	Total liabilities and net assets/fund balances (see instructions)	78,994	45,840	
-	Part I		10,334	45,640	
-		net assets or fund balances at beginning of year – Part II, column (a), line 30 (mu	ist agree with		
		of-year figure reported on prior year's return)	ist agree with	1	78,994
		amount from Part I, line 27a		2	-33,154
		r increases not included in line 2 (itemize)		3	33,131
		ines 1, 2, and 3		4	45,840
		eases not included in line 2 (itemize)		5	
		net assets or fund balances at end of year (line 4 minus line 5) – Part II, column ((b), line 30	6	45,840
	. 5141	The state of the s	·-,. ····		

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	e the kınd(s) of property sold (e g , real estate, house, or common stock, 200 shs MLC Co)	Income	(b) How acquired P – Purchase D – Donation	(c) Date (mo , d		(d) Date sold (mo , day, yr)
1a N/A						
b						
С				_		
d						
<u>e </u>			<u> </u>			L
(e) Gross sales price	(f) Depreciation allowed (or allowable)		rother basis ense of sale			or (loss)) minus (g)
<u>a</u>				<u> </u>		
<u>b</u>						
<u>c</u>						
<u>d</u>						
Complete only for assets showing	gain in column (h) and owned by the found	lation on 12/31//	<u> </u>			
Complete only for assets showing t						(h) gain minus less than -0-) or
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	• •	ss of col (i) (j), if any			om col (h))
a b			-			
c		<u></u>		-	•	
d						
e						
2 Capital gain net income or (net cap	ortal loss) If gain, also enter in Part If (loss), enter -0- in Part			2		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	.,,				
· · ·	column (c) (see instructions) If (loss), enter	r-0- in \				
Part I, line 8	(-) (-) (-) (-)	_		3		
	der Section 4940(e) for Reduced	Tax on Net	Investment Inco	ome		
	s part blank on 4942 tax on the distributable amount of a y under section 4940(e) Do not complete t		base period?			Yes X No
1 Enter the appropriate amount in ea	ach column for each year, see the instruction	ons before makı	ng any entries			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net valu	(c) e of noncharitable-use asse	ets		(d) inbution ratio divided by col (c))
2014	200,6	35	136,	781		1.466834
2013	492,3		538,			0.914504
2012	173,9		549,	288		0.316765
2011	146,8					
2010	157,5	0.01				
		90				
		90				
2 Total of line 1, column (d)		90		2		2.698103
3 Average distribution ratio for the 5-	year base period – divide the total on line :					
3 Average distribution ratio for the 5-			•	2		
Average distribution ratio for the 5- number of years the foundation has	year base period – divide the total on line 2 s been in existence if less than 5 years			3		0.899368
Average distribution ratio for the 5- number of years the foundation has	year base period – divide the total on line :		•			0.899368
Average distribution ratio for the 5- number of years the foundation ha Enter the net value of nonchantable	year base period – divide the total on line 2 s been in existence if less than 5 years		3	3		0.899368 69,658
Average distribution ratio for the 5- number of years the foundation had Enter the net value of nonchantable	year base period – divide the total on line 2 s been in existence if less than 5 years		3	3		0.899368 69,658
Average distribution ratio for the 5- number of years the foundation has Enter the net value of nonchantable Multiply line 4 by line 3	year base period – divide the total on line as been in existence if less than 5 years e-use assets for 2015 from Part X, line 5		•	3		0.899368 69,658
Average distribution ratio for the 5- number of years the foundation has Enter the net value of nonchantable Multiply line 4 by line 3 Enter 1% of net investment income	year base period – divide the total on line as been in existence if less than 5 years e-use assets for 2015 from Part X, line 5		•	3 4 5		0.899368 69,658 62,648
Average distribution ratio for the 5- number of years the foundation has Enter the net value of nonchantable Multiply line 4 by line 3 Enter 1% of net investment income	year base period – divide the total on line as been in existence if less than 5 years e-use assets for 2015 from Part X, line 5			3 4 5		0.899368 69,658 62,648
Average distribution ratio for the 5- number of years the foundation has Enter the net value of nonchantabl Multiply line 4 by line 3 Enter 1% of net investment income Add lines 5 and 6	eyear base period – divide the total on line as been in existence if less than 5 years e-use assets for 2015 from Part X, line 5 e (1% of Part I, line 27b)			3 4 5 6		2.698103 0.899368 69,658 62,648
number of years the foundation had Enter the net value of nonchantable Multiply line 4 by line 3 Enter 1% of net investment income Add lines 5 and 6 Enter qualifying distributions from 1	eyear base period – divide the total on line as been in existence if less than 5 years e-use assets for 2015 from Part X, line 5 e (1% of Part I, line 27b)	2 by 5, or by the		3 4 5 6 7		0.899368 69,658 62,648

	990-PF (2015) THE BEARD-PAYNE FAMILY FOUNDATION 26-1441249	,		Pa	age 4
_Pa	rt VI 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)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check				
	here ► X and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% 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-)				0
3	Add lines 1 and 2				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-				0
6	Credits/Payments:				
а	2015 estimated tax payments and 2014 overpayment credited to 2015				
b	Exempt foreign organizations – tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be. Credited to 2016 estimated tax ▶ Refunded ▶ 11	<u> </u>			
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		_X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				
	Instructions for the definition)?		1b		X
	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.				
С	Did the foundation file Form 1120-POL for this year?		1c		х
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 ▶ \$				
е	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?		2		X
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		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		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	/	7	X	
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_	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"				1
	complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10		X
		F	om 99	0-PF	(2015)

Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of

Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?

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 2015)

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X

3b

4a

N/A

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		Activities for Which Form	4/20 May be K	reduired (cont	inueu)			
5a	During the year did the foundation pay or inc		4045(-)\0		es X No			
	(1) Carry on propaganda, or otherwise atten			¹	′es X No	- 1		
	(2) Influence the outcome of any specific pu		to carry on,	п,	′es X No			
	directly or indirectly, any voter registration			= .				
	(3) Provide a grant to an individual for trave			Y	′es 🛚 No			
	(4) Provide a grant to an organization other		n described in	┌,	. 👽			
	section 4945(d)(4)(A)? (see instructions)			Y	′es 🛚 X No			
	(5) Provide for any purpose other than religi	_	or educational	□.	. 👽			
	purposes, or for the prevention of cruelty				′es X No			
þ	If any answer is "Yes" to 5a(1)–(5), did any of				/-	1		
	Regulations section 53 4945 or in a current in		•	•	N/A	5b		
	Organizations relying on a current notice reg	-			▶ 📙			
С	If the answer is "Yes" to question 5a(4), does	s the foundation claim exemption f	rom the tax	1				
	because it maintained expenditure responsit	ollity for the grant?		N/A 🗌 Y	′es 🗌 No			
	If "Yes," attach the statement required by Re	egulations section 53 4945-5(d)						
6a	Did the foundation, during the year, receive	any funds, directly or indirectly, to p	oay premiums	_				
	on a personal benefit contract?			Y	′es 🛚 X No			
b	Did the foundation, during the year, pay prer	niums, directly or indirectly, on a pe	ersonal benefit contr	act?		6b		X
	If "Yes" to 6b, file Form 8870							
7a	At any time during the tax year, was the four	ndation a party to a prohibited tax s	helter transaction?	Y	′es 🛚 X No			
b	If "Yes," did the foundation receive any proce	eeds or have any net income attrib	utable to the transac	tion?	N/A	7b		
Pa	art VIII Information About Office	ers, Directors, Trustees, Fo	oundation Mana	agers, Highly	Paid Employe	es,		
	and Contractors							
1 L	ist all officers, directors, trustees, foundate	tion managers and their compen	sation (see instruc	tions).				
	(a) Name and addre	ss	(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		ense acco allowance	
MA	RTHA B. PAYNE	ATLANTA	PRESIDENT					
	30 EAST BROOKHAVEN DRIVE, N.E.	GA 30319	10.00	o	o			0
	LLIAM P. PAYNE	ATLANTA	SECRETARY					_ <u>-</u>
	30 EAST BROOKHAVEN DRIVE, N.E.	GA 30305	10.00	0	0			0
	JO HIDT DROOMING DREVEY 11121							
2	Compensation of five highest-paid emplo	yees (other than those included	on line 1 - see ins	tructions). If non	e, enter	···-		
	NONE.				(d) Contributions to	l .		
	(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		ense acco allowance	
NO	NE							
			1					
						_		
						ļ		
				l		L		
ot a	I number of other employees hald over \$50.00	14 1				_	1	Λ

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Part VIII	Information About Officers, Directors, Trustees, Found	lation Managers, Highly Paid E	mployees,
	and Contractors (continued)		
3 Five high	est-paid independent contractors for professional services (see instru	uctions). 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		>
Down IV A	Summer of Direct Charitable Activities		-
Part IX-A	Summary of Direct Charitable Activities		
	s four largest direct chantable activities during the tax year. Include relevant statistical information so other beneficiaries served, conferences convened, research papers produced, etc	such as the number of	Expenses
1 N/A			
•			
2	-		
3			
<u> </u>			 -
4			
Part IX-B	Summary of Program-Related Investments (see instru	ictions)	<u> </u>
***************************************	argest 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		

Total. Add lines 1 through 3

qualifies for the section 4940(e) reduction of tax in those years

Pa	rt X • Minimum Investment Return (All domestic foundations must complete this part. Foreig	n four	ndations,
	see instructions)	т т	
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc.,		
	purposes.		25 002
а	Average monthly fair market value of secunties	1a	35,903
b	Average of monthly cash balances	1b	34,816
С	Fair market value of all other assets (see instructions)	1c	<u> </u>
d	Total (add lines 1a, b, and c)	1d	70,719
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0	1 1	_
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	70,719
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	1,061
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	69,658
6	Minimum investment return. Enter 5% of line 5	6	3,483
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	found	ations
	and certain foreign organizations check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	3, <u>483</u>
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,483
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	3,483
6	Deduction from distributable amount (see instructions)	6	<u> </u>
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	İ	
•	line 1	7	3,483
		<u> </u>	<u>*</u>
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	157,710
b	Program-related investments – total from Part IX-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 V, line 8, and Part XIII, line 4	4	157,710
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
,	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	157,710
U	Note: The execute on line 6 will be used in Bort V. column (b), in subsequent years when calculating whether the found		

Pa	rt XIII · Undistributed Income	(see instructions)				
			(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part X	α,	Corpus	Years prior to 2014	2014	2015
-	line 7					3,483
2	Undistributed income, if any, as of the end	d of 2015 [.]				
	Enter amount for 2014 only					
	Total for prior years: 20 , 20	. 20				
3	Excess distributions carryover, if any, to 2					
	From 2010	157,637				
	From 2011	146,885				
	From 2012	146,631				
	From 2013	465,511				
	From 2014	193,796				
	Total of lines 3a through e		1,110,460			
4	Qualifying distributions for 2015 from Part	: XII.				
	line 4 ▶ \$157,710	·				
а	Applied to 2014, but not more than line 2a	a				
b	Applied to undistributed income of prior ye	ears				
	(Election required – see instructions)				~~~~~	
С	Treated as distributions out of corpus (Ele	ection				
	required – see instructions)					
d	Applied to 2015 distributable amount					3,483
е	Remaining amount distributed out of corp	us	154,227			
5	Excess distributions carryover applied to	2015				
	(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:					
а	Corpus. Add lines 3f, 4c, and 4e. Subtrac	t line 5	1,264,687	,	·····	
b	Prior years' undistributed income. Subtract	ct				
	line 4b from line 2b					
C	Enter the amount of prior years' undistribu					
	income for which a notice of deficiency ha					
	been issued, or on which the section 494	2(a)				
	tax has been previously assessed					
d	Subtract line 6c from line 6b. Taxable					
	amount – see instructions					
е	Undistributed income for 2014 Subtract I	ine				
	4a from line 2a Taxable amount – see					
£	Instructions Undistributed income for 2015. Subtract I	1000				
T	4d and 5 from line 1. This amount must b					
	distributed in 2016					l o
7	Amounts treated as distributions out of co	ornus				
•	to satisfy requirements imposed by section	-				
	170(b)(1)(F) or 4942(g)(3) (Election may					
	required—see instructions)					
8	Excess distributions carryover from 2010	not		******	***************************************	
•	applied on line 5 or line 7 (see instruction		157,637			
9	Excess distributions carryover to 2016				***************************************	
-	Subtract lines 7 and 8 from line 6a		1,107,050			
10	Analysis of line 9:					
а	Excess from 2011	146,885				*****
b	Excess from 2012	146,631				
C	Excess from 2013	465,511				
d	Excess from 2014	193,796				
е	Excess from 2015	154,227				

3 Grants and Contributions Paid During the	Year or Approved for F	uture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	GOTHET GREEN	<u> </u>
a Paid during the year See Statement 5				
				157,710
		;		
Total	<u></u>		▶ 3a	157,71
b Approved for future payment		T	T 500	
N/A				
Total			▶ 3b	-
10(0)			F 30]_	

Part XVI-A			ed business income	Evolude	d by section 512, 513, or 514	
Enter gross amo	ounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Program se	rvice revenue:			ļ		(See instructions)
a		_				
ь				 		
		-		 		
		-		-		
e		_		1		
T	1	-		 		· · · · · · · · · · · · · · · · · · ·
-	d contracts from government agencies			 		
	dues and assessments			-		
	savings and temporary cash investments and interest from securities	-		 		877
	come or (loss) from real estate					
	anced property			+		
	t-financed property					
	come or (loss) from personal property			†	_	
7 Other invest	, , , , , , , , , , , , , , , , , , , ,			1		
	s) from sales of assets other than inventory			1		-4,066
	or (loss) from special events			1		-,
	or (loss) from sales of inventory			<u> </u>		
	ue a					
			1			
				1		
e						
12 Subtotal Ad	dd columns (b), (d), and (e)		()	0	-3,189
13 Total. Add I	ine 12, columns (b), (d), and (e)				13	-3,189
See worksheet	in line 13 instructions to verify calculations)					
Part XVI-B	Y					
Line No. ▼	Explain below how each activity for which incom accomplishment of the foundation's exempt pur					
N/A	accomplishment of the foundation's exempt par	poods (outlet und	y promong rando n		<u></u>	
					- · · · - · · · · · · · · · · · · · · ·	
_						
						
		<u> </u>				
		_				

Part X		Information Regarization	_	ansfers To an	d Transactio	ns and Relation	ships Wit	h Nonchar	itable		
1 Did				ie in any of the foll		other organization des	cribed			Yes	No
						ection 527, relating to					-110
	anization		51 (1.G.) 00000	00 ((0)(0) 0.ga		onen ez / , reidning te	pontiou.				
		om the reporting found	lation to a no	ncharitable exemi	ot organization c	f.					
	Cash	and reporting reality		,					1a(1)		X
• •	Other as	sets							1a(2)		X
	er transa										
		assets to a noncharite	able exempt	organization					1b(1)		X
		es of assets from a no			on				1b(2)		x
		f facilities, equipment,							1b(3)		X
` '		sement arrangements							1b(4)		X
		r loan guarantees							1b(5)		X
		ance of services or me	embership oi	fundraisıng solici	tations				1b(6)		X
		icilities, equipment, m							1c		X
	-		_			mn (b) should always	show the fa	ır market			
		•				the foundation receiv					
						the goods, other asse					
(a) Line		(b) Amount involved		of nonchaπtable exemp		ī		nsactions, and sha	aring arrangeme	nts	
N/A										•	
		-									
											
						_					
									_		
						<u> </u>					
						<u> </u>					
		•	-			c-exempt organization	s			(TE	1
		section 501(c) of the	· ·	than section 501(c)(3)) or in section	on 527?			Ye	es X] No
b If "Y		plete the following sc	hedule			T					
) Name of organization		(b) Type of o	rganization		(c) Descript	tion of relationship			
N/A	7		_								
					-						
	Under nen	alties of perium. I declare th	nat I have evamu	ned this return, includin	a accompanyon sch	edules and statements, and	to the hest of r	ny knowledge and	thelief it is true		
						which preparer has any kno					
			_					I 1	RS discuss this re reparer shown bi		
Sign	\vee	1 (,	Λ	1		1 ,		(see instr		Yes	No
lere		Nex Ha	KH	1 Me	14	129/1/2	DDFC	IDENT			
	Signa	iture of officer or trustee	$\frac{1}{1}$	CG 00-			Title	TDENT			
					Broom	· · · · · · · · · · · · · · · · · · ·		<u> </u>	Data	<u> </u>	
	Pontry	pe preparer's name			Preparer's signatu		Z-1_	,	Date	Check	f
Paid	Almer	L. Frost		,	Uma	$r \propto \cdot /$	nt		1/28/1/0	self-em	throkea
Preparer			- & Rar	re, LLP	1-1-6/1104	· · · · · · · · · · · · · · · · · · ·	· · y	PTIN	P00968	767	7
Jse Only	Firm's n			ard Pkwy	Suite 12	2			46-403		
	Funsa		aretta,	_	05-8860	_	}		404-25		
_		1110116		<u> </u>				i none no	Form 99		

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

2015

THE BEARD-PA	YNE FAMILY FOUNDATION		26-1441249
Organization type (check o			
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization		
	4947(a)(1) nonexempt chantable trust not treated as a	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 pri	vate foundation	
	501(c)(3) taxable private foundation		
	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule.	eral Rule and a Special Rule	e. See
General Rule			
	filing Form 990, 990-EZ, or 990-PF that received, during the year property) from any one contributor. Complete Parts I and II sontributions		
Special Rules			
regulations under s 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that rections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule at that received from any one contributor, during the year, total the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990	A (Form 990 or 990-EZ), Pa contributions of the greater o	rt II, line of (1)
contributor, during	described in section 501(c)(7), (8), or (10) filing Form 990 or 9 the year, total contributions of more than \$1,000 exclusively for nal purposes, or for the prevention of cruelty to children or anim	religious, charitable, scienti	ific,
contributor, during contributions totale during the year for General Rule appli	described in section 501(c)(7), (8), or (10) filing Form 990 or 9 the year, contributions exclusively for religious, chantable, etc., d more than \$1,000. If this box is checked, enter here the total an exclusively religious, chantable, etc., purpose Do not comples to this organization because it received nonexclusively religions during the year	purposes, but no such contributions that were rece lete any of the parts unless	eived the
990-EZ, or 990-PF), but it r	nat is not covered by the General Rule and/or the Special Rules nust answer "No" on Part IV, line 2, of its Form 990, or check to to certify that it does not meet the filing requirements of Scheo	he box on line H of its Form	990-EZ or on its

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

THE BEARD-PAYNE FAMILY FOUNDATION

Employer identification number 26-1441249

Part I	Contributors (see instructions). Use duplicate copies	eded.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	William P. Payne Martha B. Payne 4130 East Brookhaven Drive, N.E. Atlanta GA 30319	\$ 75,504	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No. 2	Name, address, and ZIP+4 William P. Payne Martha B. Payne 4130 East Brookhaven Drive, N.E. Atlanta GA 30319	Total contributions \$ 55,000	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 Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
110.	realite, address, and En 1 4	\$	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)

THE BEARD-PAYNE FAMILY FOUNDATION

Employer identification number 26-1441249

Noncash Property (see instructions). Use duplicate	copies o	of Part II if additional spa	ce is needed.
(b) Description of noncash property given		l l	(d) Date received
925 Shares-Vanguard Dividend App			
	\$	75,504	05/11/15
(b) Description of noncash property given			(d) Date received
	\$		
(b) Description of noncash property given			(d) Date received
	\$		
(b) Description of noncash property given			(d) Date received
	\$		
(b) Description of noncash property given			(d) Date received
	\$		
(b) Description of noncash property given			(d) Date received
	(b) Description of noncash property given 925 Shares - Vanguard Dividend App (b) Description of noncash property given (b) Description of noncash property given 925 Shares-Vanguard Dividend App \$ (b) Description of noncash property given Description of noncash property given 925 Shares-Vanguard Dividend App (b) Description of noncash property given (c) FMV (or estimate) (see instructions) \$ (c) FMV (or estimate) (see instructions)		

Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

	Net Gain / Loss	·	9	-4,060	-4,066	
	1	₹	.	'	∙ν."	
	Depreciation				0	
	ı	•	J}	ı	∙r Ο∥	
	Expense					
	1	₹	ም	ı	Ω- ∥	
	Cost	7	T, 298 \$	78,062	79,360	
اہ		a. 1	:Л- a.		₹/}	
How Received	Sale Price	Purchase	1,292 \$ Purchase	74,002	75,294	
		,	rn-			
	Date Sold	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5/11/15 \$	Various	J 1	
Description	Date Acquired	APPREC-15 SH				
	Whom Sold	VANGUARD DIVIDEND APPREC-15 SH	Various Vargyard dividend apprec-914		Total	

Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	ACCOUNTING	Total
	↔	ψ
Total	2,100	2,100
Inve	₩.	w
Net estment	250	250
Adjusted Net	w	W.
Charitable Purpose	ۍ ا	\$

Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses

Charitable Purpose	w		w
Adjusted Net	ጭ		w.
Net Investment		629	659
Inve	₩		w
Total		629	629
-	ጭ		ψ.
Description		Expenses INVESTMENT ADVISORY FEES	Total

26-1441249	Federal Statements	
Statement	Statement 4 - Form 990.PF Part II I ine 10b - Cornorate Stock Investments	
	Beginning End of Basis of	Fair Market
JPMORGAN CHASE & CO	\$ 19,274 \$ 19,274 Cost	\tag{8} \text{Value} \\ \xample \text{21,064} \\ \xample \text{21,064} \\ \xample \text{21,064} \\ \xample \text{21,064} \\ \xample \text{21,064} \\ \xample \text{21,064} \\ \xample \text{21,064} \\ \xample \text{21,064} \\ \xample \text{21,064} \\ \xample \text{21,064} \\ \xample \text{21,064} \\ \xample \text{21,064} \\ \xample \text{21,064} \\ \xample \
VANGUAKD DIV AFFKCIALION Total	\$ 25,299	\$ 30,473
Statement 5 - Form 990-PF	m 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year	ring the
Name	Address	
Address	Relationship Status Purpose	Amount
Cancer Support Community	5775 Peachtree Dunwoody R	, C
Atlanta GA 30342 A Blessing to the Nation	118 Timberlost Trail	001
Suwanee GA 30024	7001 VOD O D	250
Georgia Engitsh Buildoy Resoue Winder GA 30680	Y	250
Path Foundation	P.O. Box 14327	CCU
for for	Main Street	
Moultrie GA 31/68 Peachtree Presbyterian Church	3434 Roswell Rd. NW	000
Atlanta GA 30305 Georgia Health Sciences	1120 15th St. Fl-1000	20,000
gusta GA	* C. P. C.	25,000
Marist School Atlanta GA 30319		15,000
Peachtree Presbyterian Church	3434 Roswell Rd. NW	50.000
Shepherd Center Foundation	2020 Peachtree Rd. NW	2 E C C
Grand Teton Park Foundation	P.O. Box 249	
Moose WY 83012		100
NSDA		031

University of Notre Dame

University of Notre Dame Notre Dame IN 46556

Federal Statements

ions Paid During the	
nd Contribu	
a - Grants a	ontinued)
t XV, Line 3	Year (c.
990-PF, Part XV,	
atement 5 - Form	
Statement	

	Amount 8,000 2,500 2,500 100	
	Purpose	
Address	Relationship Status P.O. Box 1472 515 Denmark St #1200 805 Mt. Vernon Hwy	960 Johnson Ferry Rd. 3430 Duluth Park Lane 1762 Clifton Rd. 2020 Peachtree Rd. NW P.O. Box 926 P.O. Box 7458 3434 Roswell Rd. NW 3010 Paces Mill Rd. 282 Mt. Paran Rd. NW P.O. Box 14327 501 Whitaker St.
Name	University of Ga Athletic Assoc Athens GA 30603 Bulloch Cty Boys & Girls Club Statesboro GA 30458 Holy Innocence Episcopal School Atlanta GA 30327	Ovarian Cancer Institute Atlanta GA 30342 Peachtree Christian Hospice Duluth GA 30096 Emory University Atlanta GA 30322 Shepherd Center Foundation Atlanta GA 30309 Presbyterian Homes of Ga Quitman GA 31643 Univ of Texas at Austin Austin TX 78713 Peachtree Presbyterian Church Atlanta GA 30305 Vinings Historic Preservation Soc Atlanta GA 30329 The Schenck School Atlanta GA 30327 PATH Foundation Atlanta GA 30324 The Ga Historical Society Savannah GA 31401

Federal Statements

Statement 5 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

	Amount																			
	Purpose																			
Address	Status	Sugarloaf Pkwy.	Box 2122	Box 171	Broad St.	Center Place	Peachtree Dunwoody R	Peachtree St. NE	Cave Spring Rd.	al Plaza, Box 317	1400 Coleman Ave	767 Clifton Road, N. E.	0,777 D0,474700 G170001	שכוורו פפ מרו פפר	First Street	ghway	Box 1472	Division Street	Timberlost Trail	Druid Hills Road
	Relationship	e500 Su	P.O. BO	P.O. BO	302 S.	1000 Ce	5775 Pe	191 Pea	1014 Ca	ess 3 Central	1400 Co	767 Cli	00 7770	D4 # / / / /	501 Fir	2700 Highway	ъ. о.	1000 N.	118 Tim	North D
Name	Address	Community Fnd. for NE Georgia Duluth GA 30097	IAM, Inc.	Women's Resource	Decacur GA 30031 Thornwell Home for children	Salvation Army	Norcross GA 30093 Cancer Support Community Atlanta GA 30342	Grady Health Foundation Atlanta GA 30303		National Alliance on Mental Illness	Mercer University Press	Fernbank Museum	Atlanta GA 30307	cathedral of Saint Filling Atlanta GA 30305	First Presbyterian Church Atlanta GA 31768	Arthritis Foundation of Alabama	University of Ga. Athletic Assoc.	Athens GA 30003 Get Your Guts in Gear, Inc. Peekskill NY 10566	ع و ژ	Skyland Trail Atlanta GA 30303

26-1441249	Federal Statements	ements	
Statement 5 - Fo	orm 990-PF, Part XV, Line 3a - Gr	Statement 5 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the	
	Year (contin	(pen	
Name	Address		
Address	Relationship Status	Purpose	Amount
King's Ridge Christian School Alpharetta GA 30005 Anne's Bikes for Children Foundatio Main Street Moultrie GA 31768 Total	H ~.		157,710
			ಬ