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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

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.

e Service ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

		ndar year 2015 or tax year be	ginning 01/01/201	.5	and endi		12/31/2015	
		oundation Family Foundation					er identification numb 10816	er
Nu	imber ar	nd street (or P O box number if mail is	not delivered to street address)		Room/suite		ne number (see instruc	tions)
58	0 Co	unty Road 2153				93655	29999	
		m, state or province, country, and ZIP coches TX	or foreign postal code 75965			C If exemp	tion application is pen	ding, check here▶
G	Check	k all that apply:   Initial retu	urn 🔲 Initial return	of a former	ublic charit	y D 1. Foreig	n organizations, check	here .
		☐ Final retu	····			2. Foreig	ın organizations meetir	a the 85% test
		☐ Address	<del></del>	<del> </del>		check	here and attach comp	utation · ▶
H		k type of organization: 🗵 So				section 6	foundation status was 507(b)(1)(A), check here	
ᆜ		on 4947(a)(1) nonexempt charit						
ı		narket value of all assets at	J Accounting method	: XI Cash	_ Accrual	1 1 11 11 10 100	indation is in a 60-mon	
		of year (from Part II, col. (c), 6) ► \$ 178964	Other (specify) (Part I, column (d) must be	on cash hasis	 1	under se	ection 507(b)(1)(B), chec	ck here ▶ [_
P	art I					<u> </u>	Τ	(d) Disbursements
		amounts in columns (b), (c), and (d)		(a) Revenue : expenses p		et investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instr		books		income	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc.,	received (attach schedule)	124133		<del></del>	<del> </del>	
	2	Check ► ☐ if the foundation is n						1
٠,-	3	Interest on savings and temp	orary cash investments	Ţ.		5	0	
20 IE	4	Dividends and interest from s	securities	2544		2544	0	
	5a	Gross rents		(		0	0	
, •	b	Net rental income or (loss)	0			····		
ge	6a	Net gain or (loss) from sale or						ļ <u>.</u>
ୂଟ	_b	Gross sales price for all assets on				<del></del>		
ě,	7	Capital gain net income (from			<u> </u>	5783		
_	8	Net short-term capital gain . Income modifications		·		····	5783	ļ ————————————————————————————————————
	10a	Gross sales less returns and allow	wances 0	· <del></del>			0	<del> </del>
روية ،	b		· 0					<del> </del>
CARTA Revenue	C	Gross profit or (loss) (attach s		0			0	
ij)	11	Other income (attach schedu	-			0	0	<u> </u>
	12	Total. Add lines 1 through 11	•	126682		8332	5783	
<u></u>	13	Compensation of officers, dir		(		0	0	0
xpenses	14	Other employee salaries and		(		0	0	0
en	15	Pension plans, employee ber	nefits			_0	0	0
	16a	• • • • • • • • • • • • • • • • • • • •		210		0	0	0
Je E	b	Accounting fees (attach sche	-	0		0	0	0
¥į	17 C	Other professional fees (attac	•	0		0	0	00
štr	17 18	Interest	tructions)	, ,		0	0	0
Ë:	19	Depreciation (attach schedule	e) and deriver of VED			0	0	<del>                                     </del>
튜	20	Occupancy	O) on the fermion of the same	100		0	0	0
Ĭ	21	Travel, conferences, and med	Hings ADD. 1. 0 2016	S		0	0	0
ī	22	Printing and publications	TI	OSC 00		0	0	0
Operating and Administrative	23	Other expenses (attach sche	dule)			0	0	0
Ē	24	Total operating and adm	inistrative expenses.					
era		Add lines 13 through 23	· · · · · · ·	361		0	0	0
Ö	25	Contributions, gifts, grants pa		31050			<u> </u>	31050
_	26	Total expenses and disburseme	ents. Add lines 24 and 25	31411		0	00	31050
	27	Subtract line 26 from line 12:		<b>~-</b>	ĺ			į (
	a	Excess of revenue over expen		95271	-+-	8332	<del> </del>	<del> </del>
	b	Net investment income (if negative distribution)  Adjusted net income (if negative distribution)	- '			0334	5700	
	<u> </u>	Aujusteu net income (il negi	ative, circi -U-)				5783	000 PE

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Form	990-PI	F (2015)				Page <b>2</b>
Pai		Balance Sheets Attached schedules and amounts in the description column	Beginning of year			f year
		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 Val	ue	(c) Fair Market Value
- {	1	Cash—non-interest-bearing	74650		57372	67372
	2	Savings and temporary cash investments	0		57164	57164
-	3	Accounts receivable ▶				
l		Less: allowance for doubtful accounts ▶ 0			0	0
	4	Pledges receivable ▶				
1		Less: allowance for doubtful accounts ▶ 0	0		0	0
	5	Grants receivable			0	0
- }	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)	0		0	0
	7	Other notes and loans receivable (attach schedule) ▶				
-		Less: allowance for doubtful accounts ▶ 0	. 0		0	0
Assets	8	Inventories for sale or use	_0		0	0
ŠŠ	9	Prepaid expenses and deferred charges	0		. 0	0
۲Į	10a	Investments—U.S. and state government obligations (attach schedule)	0		0	0
	b	Investments—corporate stock (attach schedule)	0	:	51469	54428
	C	Investments—corporate bonds (attach schedule)	0		0	0
	11	Investments—land, buildings, and equipment: basis ▶0				
1		Less: accumulated depreciation (attach schedule) ▶o	0		_0	
- }	12	Investments—mortgage loans	0		_0	0
ı	13	Investments—other (attach schedule)	0		0	0
- 1	14	Land, buildings, and equipment: basis ▶0				
		Less: accumulated depreciation (attach schedule) ▶ 0	0		0	0
	15	Other assets (describe ► )	0		0	0
ļ	16	Total assets (to be completed by all filers-see the				
İ		instructions. Also, see page 1, item l)	74650	1	76005	178964
	17	Accounts payable and accrued expenses	0		0	<del></del>
,,	18	Grants payable	0		0	
ĕ.	19	Deferred revenue	0		0	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0		0.	
ä.	21	Mortgages and other notes payable (attach schedule)	0	**-	0	
<b>-</b>	22	Other liabilities (describe ►	0		0	
	23	Total liabilities (add lines 17 through 22)	0		0	
seou		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.				
Ĕ   :	24	Unrestricted	74650	17	76005	
न्ह्र ।	25	Temporarily restricted	0		0	
<u> </u>	26	Permanently restricted	0		0	
Net Assets or Fund Bala		Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.				
ㅎ :	27	Capital stock, trust principal, or current funds	0		اه	
\$	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0	~		
Se	29	Retained earnings, accumulated income, endowment, or other funds	0	·	0	
¥ S	30	Total net assets or fund balances (see instructions)	01	<del></del>	0	
ह	31	Total liabilities and net assets/fund balances (see	<del>-</del>		$\neg \neg$	
<b>z</b>   '		instructions)	74650	17	6005	
Par		Analysis of Changes in Net Assets or Fund Balances	. 10301		30021	
		I net assets or fund balances at beginning of year—Part II, colur	nn (a), line 30 (must	agree with		
-		of-year figure reported on prior year's return)			4	0
9		r amount from Part I, line 27a			2	95271
		er increases not included in line 2 (itemize)			3	33211
Δ	<b>Σ</b> ddd	lines 1, 2, and 3			4	95271
_	_	11 1 4 1 1 1 - 0 m 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			5	952/1
6	Tota	eases not included in line 2 (itemize)   I net assets or fund balances at end of year (line 4 minus line 5)—F	Part II, column (b), line	30	6	95271

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Part	V Capital Gains and	Losses for Tax on Investme	nt Income	T = 12	· · · · · · · · · · · · · · · · · · ·	<del></del>
		kind(s) of property sold (e.g., real estate, e, 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)
1a	preferred stock, L	adenbug Thalmann		P	04/16/2015	09/25/2015
<u> </u>				P	ļ	<u> </u>
<u>C</u>				P		ļ
<u>d</u>			<del></del>	<u> </u>	<del> </del>	<del> </del>
<u>e</u>	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale	1	un or (loss) (f) minus (g)
a	380176	0		374393		5783
<u> </u>			<del></del>			
c d			<del></del>	<del></del>		
<u>u</u>						· · · · · · · · · · · · · · · · · · ·
	Complete only for assets show	ring gain in column (h) and owned by	the foundation	n on 12/31/69	(f) Gains (Co	ol (h) gain minus
	(i) F.M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) ol (j), if any	col. (k), but no	ot less than -0-) or from col (h))
a	0	0		0		5783
b						
С						
<u>d</u>			<del></del>			
<u>         e                           </u>					ļ	
2	Capital gain net income or	inet canital loss) {	so enter in Pa nter -0- in Pa		2	5783
3	If gain, also enter in Part I,	or (loss) as defined in sections 1: line 8, column (c) (see instruction	ons). If (loss			
				J	3	5783
Part		r Section 4940(e) for Reducate foundations subject to the se				
· If sect Was t	tion 4940(d)(2) applies, leave the foundation liable for the so	-	ole amount o	f any year in the	·	☐ Yes x No
1	Enter the appropriate amou	int in each column for each year;	see the instr	uctions before m	aking any entries.	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) of nonchantable-use a		(d) stribution ratio divided by col (c))
	2014	55	00		0	0
	2013		0		0	0
	2012		_ 0		0	0
	2011				0	0
	2010		0	····	——·	00
2 3	number of years the founda	or the 5-year base period—divide	the total on than 5 years	line 2 by 5, or by	the . 3 0	129609
4		naritable-use assets for 2015 fror				138698
5	Multiply line 4 by line 3 .				. 5	0
6	Enter 1% of net investment	income (1% of Part I, line 27b)			. 6	83
7	Add lines 5 and 6				. 7	83
8		s from Part XII, line 4 er than line 7, check the box in P				31050
	Part VI instructions.	er man line 1, check the box in P	ait vi, iine 11	o, and complete	ulat part using a	170 tax rate. See the

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On the St	641 (2013)		,	raye -
art		nstru	ctio	ns)
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		83	
	here X and enter 1% 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).			
_				
2 3	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  Add lines 1 and 2		0	<del> </del>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		83	<b> </b>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		0	<del>                                     </del>
6	Credits/Payments:		83	
а	2015 estimated tax payments and 2014 overpayment credited to 2015   6a			
b	Exempt foreign organizations—tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868) . 6c		i	
d	Backup withholding erroneously withheld 6d d			
7	Total credits and payments. Add lines 6a through 6d		d	
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached		0	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		83	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10		0	
11	Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ 0 Refunded ▶ 11	,	0	<u> </u>
	VII-A Statements Regarding Activities	· · · · · ·	V	AI-
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	4 -	Yes	NO
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1a		×
Ŋ	Instructions for the definition)?	1b		Y
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	1		
	published or distributed by the foundation in connection with the activities.			
C	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. $\triangleright$ \$ 0			
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		х
_	If "Yes," attach a detailed description of the activities.  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		
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 <b>Form 990-T</b> for this year?	4b		х
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.			<del></del>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	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	<b>.</b>	
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	<u>x</u>	<del></del>
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶			
L	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation	0.		
_		8b	ζ	
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,"	İ		
	complete Part XIV	9		v
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	- <del></del>		
	names and addresses	10	,	

Par	t VII-A	Statements Regarding Activities (continued)				
	-				Yes	No
11	At any	time during the year, did the foundation, directly or indirectly, own a controlled enti	ty within the			
	meaning	g of section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		х
12	Did the	foundation make a distribution to a donor advised fund over which the foundation or a	a disqualified			
	person	had advisory privileges? If "Yes," attach statement (see instructions)		12		х
13	Did the f	foundation comply with the public inspection requirements for its annual returns and exemption	application?	13	x	
	Website	address ▶				
14	The boo	e address ►  oks are in care of ► George M Dodson Telephone no	93655299	99		
	Located	at ▶ 580 County Road 2153 Nacogdoches ZIP+	4 ▶ TX 759	65		·
15	Section	t at ► 580 County Road 2153 Nacogdoches ZIP+.  4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check is	nere			▶ □
	and ente	er the amount of tax-exempt interest received or accrued during the year	▶ 15		0	
16		ime during calendar year 2015, did the foundation have an interest in or a signature or			Yes	No
	over a b	pank, securities, or other financial account in a foreign country?		16		х
		instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter	er the name of			
	the forei	ign country ►				
Parl	VII-B	Statements Regarding Activities for Which Form 4720 May Be Required				
	File For	m 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	_	he year did the foundation (either directly or indirectly):				
			]Yes ☒ No			
		ow money from, lend money to, or otherwise extend credit to (or accept it from) a				
			]Yes ⊠No			
		ish goods, services, or facilities to (or accept them from) a disqualified person? $ .   .               $			İ	
		compensation to, or pay or reimburse the expenses of, a disqualified person?	]Yes ⊠No			
		sfer any income or assets to a disqualified person (or make any of either available for	1v (77 a)-			
		. , ,	]Yes 🗵 No		]	
		te to pay money or property to a government official? (Exception. Check "No" if the			Ī	
		dation agreed to make a grant to or to employ the official for a period after ination of government service, if terminating within 90 days.)	1.4 EV.		i	
<b>L</b>			}			
b		swer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?			ļ	
		ations relying on a current notice regarding disaster assistance check here	L	1b		
_	_	foundation engage in a prior year in any of the acts described in 1a, other than except	(			
С		t corrected before the first day of the tax year beginning in 2015?	· .			
2		n failure to distribute income (section 4942) (does not apply for years the foundation w		1c		<u>x</u>
	operatin	g foundation defined in section 4942(j)(3) or 4942(j)(5)):	vas a private			
а		nd of tax year 2015, did the foundation have any undistributed income (lines 6d and			İ	
		XIII) for tax year(s) beginning before 2015?	Yes 🗵 No	ļ		
		list the years ▶ 20 , 20 , 20 , 20		ĺ	ļ	
b		e any years listed in 2a for which the foundation is <b>not</b> applying the provisions of sections are also as a section of section of sections are also as a section of section of sections are also as a section of section of sections are also as a section of sections are also as a			1	
		to incorrect valuation of assets) to the year's undistributed income? (If applying section slisted, answer "No" and attach statement—see instructions.)				
_				2b		
С		ovisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years, 20 , 20 , 20	ars nere.	1		
3a		foundation hold more than a 2% direct or indirect interest in any business enterprise				
- Ou			Yes X No			
ь	•	did it have excess business holdings in 2015 as a result of (1) any purchase by the fo				
D		ried persons after May 26, 1969; <b>(2)</b> the lapse of the 5-year period (or longer period app				
		sioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3)			1	
		15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to dete			ł	
		on had excess business holdings in 2015.)		3ь		
4a	Did the f	oundation invest during the year any amount in a manner that would jeopardize its charitable	e purposes?	4a		<u>x</u>
b		foundation make any investment in a prior year (but after December 31, 1969) that could j				<del></del>
		e purpose that had not been removed from jeopardy before the first day of the tax year begin		4b		х

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Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)		
5a	During the year did the foundation pay or incur any amount to:  (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes		
	(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ✓ No (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		
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)?	5b	
С	Organizations relying on a current notice regarding disaster assistance check here		
6a	If "Yes," attach the statement required by Regulations section 53.4945–5(d).  Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes Vo		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If "Yes" to 6b, file Form 8870.	6b	V
	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	7b	
Part		ploye	es,

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).							
(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				
chairma & screlary	0						
5	U		1				
director	•						
1	U	U					
director							
1	υ	ប	U				
director	^		_				
1	υ	0	'				
	(b) Title, and average hours per week devoted to position chairma & screlary 5 director 1 director 1	(b) Title, and average hours per week devoted to position  chairma & scretary 5  director 1  director 1  0	(b) Title, and average hours per week devoted to position  chairma & screlary 5  director 1  director 1  0  (c) Compensation (if not paid, enter -0-)  (if not paid, enter -0-)  (d) Contributions to employee benefit plans and deferred compensation  o 0  0  0  0  0				

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			>	

	information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors (continued)	iployees,
3 Five hig	hest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
<del></del>		0
Fotal number of	of others receiving over \$50,000 for professional services	0
Part IX-A		
Part IX-A	Summary of Direct Charitable Activities	
	tion's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
2		
_		
3		
4		
		ı
Part IX-B	Summary of Program-Related Investments (see instructions)	· · · · · · · · · · · · · · · · · · ·
	o largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
2		
All other masses	m related investments. Can patricular a	
	m-related investments. See instructions.	
3		
Fotal. Add line:	s 1 through 3	
		orm <b>990-PF</b> (2015

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Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	ign fou	ndations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	34900
b	Average of monthly cash balances	1b	105910
C	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	140810
е	Reduction claimed for blockage or other factors reported on lines 1a and		-
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	140810
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	2112
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	138698
6	Minimum investment return. Enter 5% of line 5	6	6935
Part	XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating f	oundat	ions
	and certain foreign organizations check here ► □ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	6935
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.) 2b		
C	Add lines 2a and 2b	2c	83
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	6852
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	6852
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	6852
Part	XII Qualifying Distributions (see instructions)		
	Au Guanying 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	31050
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1 1	
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	31050
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	31050
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years	g wheth	er the foundation

Form **990-PF** (2015)

Part	XIII Undistributed Income (see instruction	ons)			
1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	<b>(c)</b> 2014	(d) 2015
	line 7				6852
2	Undistributed income, if any, as of the end of 2015:				
а	Enter amount for 2014 only				)
b	Total for prior years: 20,20,20		0		
3	Excess distributions carryover, if any, to 2015:				
а	From 2010	_			
b	From 2011	1			1
c	From 2012	1			ì
d	From 2013				•
e	From 2014	Í			
f	Total of lines 3a through e	1			
4	Qualifying distributions for 2015 from Part XII, line 4: ► \$ 31050	(			
а	Applied to 2014, but not more than line 2a .				
	Applied to undistributed income of prior years	<del></del>			· · · · · · · · · · · · · · · · · · ·
~	(Election required—see instructions)				İ
_	Treated as distributions out of corpus (Election		. 0		
С	required—see instructions)				
	•	0			
d	Applied to 2015 distributable amount				0
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2015	0			0
	(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. Subtract line 5	0.			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b		o		
С	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		
d	Subtract line 6c from line 6b. Taxable				<del></del>
	amount—see instructions		0.		
•	4a from line 2a. Taxable amount—see				
	instructions				
f	Undistributed income for 2015. Subtract lines			0	·
•	4d and 5 from line 1. This amount must be				
	distributed in 2016		Ì		
_					6852
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				•
	170(b)(1)(F) or 4942(g)(3) (Election may be	0			
_	required—see instructions)				
8	Excess distributions carryover from 2010 not	0			
_	applied on line 5 or line 7 (see instructions) .				
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9:				
а	Excess from 2011				
b	Excess from 2012 0				
c	Excess from 2013 0				
ď	Excess from 2014 0			ļ	
	Excess from 2015 0				
<u> </u>	LAGOGG HOITI 2010	[			

Part	XIV Private Operating Founda	<b>tions</b> (see instruc	tions and Part V	II-A, question 9)		
1a	If the foundation has received a ruling		•	, ,		
	foundation, and the ruling is effective for	2015, enter the dat	e of the ruling	▶		/_/
b	Check box to indicate whether the four	ndation is a private	operating foundation	on described in sec	tion	) or  4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) rotal
	each year listed	5783	0	0	0	5783
b	85% of line 2a	4916	0	,	0	4916
C	Qualifying distributions from Part XII,					
	line 4 for each year listed	31050			o	31050
d	Amounts included in line 2c not used directly for active conduct of exempt activities		0		0	0
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	31050	0	9		31050
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:					
	(1) Value of all assets	d	0	o	d	0
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)	0	o	d	0	О
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed	4623	0	d	0	4623
С	"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)	0	0	0	0	0
	(2) Support from general public and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)	0	0	0		0
	(3) Largest amount of support from					
	an exempt organization	0	a	0	0	0
	(4) Gross investment income		0	0	d	0
Part		•	•	e foundation ha	d \$5,000 or mo	re in assets at
	any time during the year-	see instructions	s.)			
1	Information Regarding Foundation I	_				
а	List any managers of the foundation v					y the foundation
	before the close of any tax year (but o	nly if they have cor	ntributed more that	n \$5,000). (See se	ction 507(d)(2).)	
	George M and Kaye R Dodson	***	<del></del>		<del>-,</del>	<u> </u>
b	List any managers of the foundation					ge portion of the
	ownership of a partnership or other en	itity) of which the fo	oundation has a 10	)% or greater inter	est.	
		· · · · · · · · · · · · · · · · · · ·				<u></u>
2	Information Regarding Contribution Check here ► ☒ if the foundation of unsolicited requests for funds. If the foundations, complete items 2a, b	only makes contrib oundation makes g	outions to presele	cted charitable or		
а	The name, address, and telephone nu	mber or e-mail add	lress of the person	to whom applicat	tions should be ad	dressed:
b	The form in which applications should	be submitted and	information and m	aterials they shou	ld include:	
С	Any submission deadlines:			······································		
d	Any restrictions or limitations on aw factors:	ards, such as by	geographical area	as, charitable field	ds, kinds of instit	tutions, or other

Page **11** Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient Foundation show any relationship to Purpose of grant or status of **Amount** any foundation manager or substantial contributor contribution Name and address (home or business) recipient Paid during the year а **Frontiers** PC international missionary fund 2230 PO Box 60730, Phoenix, AZ 65082 Grace Bible Church PC church general fund 6000 1334 N. University Dr., Nacogdoches, TX 75961 World Venture PC international missionary fund 900 1501 W. Mineral Ave, Littleton, CO 80120 PC international missionary fund 900 PO Box 1988, Eustis, FL 32727 Solid Foundation PC at-risk students education 2000 2220 E. Main St., Nacogdoches, TX 75965 Operation Mobilization PC international missionary fund 500 PO Box 444, Tyrone, GA 30290 Young Life PC international missionary fund 5800 PO Box 520, Colorado Springs, CO 80901 **Baptist Medical and Dental** PC international missionary fund 700 11 Plaza Dr, Hattiesburg, MS 39402 Kids Across America PC at-risk kids summer camp 2000 2036 Timberlake Rd, Branson, MO 65616 PC at-risk kids support 3000 PO Box 630212, Nacogdoches, TX 75963 **Heartbeat Pregnancy Center** PC low-income pregnancy assistance 5000 621 Russell Blvd, Nacogdoches, TX 75965 PC international missionary fund 2000 PO Box 1986, Grapevine, TX 76099 31050 За Approved for future payment 0

Pa	rt XVI-A Analysis of Income-Producing Ac	tivities				
Ente	r gross amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by secti	on 512, 513, or 514	(-)
1	Program service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
-	a		0		0	0
	b		0		0	0
	C		0		0	0
	d		0		0	0
	е		0		0	0
	f		0		0	0
	g Fees and contracts from government agencies		0		0	0
2	Membership dues and assessments		0		0	0
3	Interest on savings and temporary cash investments		0		0	0
4	Dividends and interest from securities		0		0	0
5	Net rental income or (loss) from real estate:					
	a Debt-financed property		0		0	0
	<b>b</b> Not debt-financed property		0		0	0
6	Net rental income or (loss) from personal property		0		0	0
7	Other investment income		0		0	0
8	Gain or (loss) from sales of assets other than inventory		0		0	0
9	Net income or (loss) from special events		0 -		0	0
10	Gross profit or (loss) from sales of inventory		0		0	0
11	Other revenue: a		0		0	0
	b	·	0		0	0
	С		0		0	0
	d		0		0	0
	A .		0		0	0
	·					
	Subtotal. Add columns (b), (d), and (e)		0		0	0
13	Total. Add line 12, columns (b), (d), and (e)		0		13	0
13 See	<b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations	s.)				
13 See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the Ad	s.) ccomplishm	ent of Exempt	Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the Ad	s.) ccomplishm	ent of Exempt	Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the Ad	s.) ccomplishm	ent of Exempt	Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the Ad	s.) ccomplishm	ent of Exempt	Purposes	13	0
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13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the Ad	s.) ccomplishm	ent of Exempt	Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the Ad	s.) ccomplishm	ent of Exempt	Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the Ad	s.) ccomplishm	ent of Exempt	Purposes	13	0
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13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the Ad	s.) ccomplishm	ent of Exempt	Purposes	13	0
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13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the Ad	s.) ccomplishm	ent of Exempt	Purposes	13	0
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13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the Ad	s.) ccomplishm	ent of Exempt	Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the Ad	s.) ccomplishm	ent of Exempt	Purposes	13	0
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the Ad	s.) ccomplishm	ent of Exempt	Purposes	13	0

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Page	ı	•

Part	XVII		n Regarding Tran	sfers To and Transa	ctions and F	lelationsh	ips With	Noncha		
1	in sec	e organization of	directly or indirectly	engage in any of the follo section 501(c)(3) organiz	owing with any ations) or in se	other orga ection 527,	nization d relating to	escribed political	Yes	No
а							12(1)			
		to the contract of the contrac						1a(1) 1a(2)	X	
b	(2) Other assets						14(2)	<u>×</u> —		
								1b(1)	İ	
		The state of the s						1b(1)	<u> x</u>	
		·						1b(3)	<u>  X                                   </u>	
								1b(4)	<del> x</del>	
								1b(5)	<u> </u>	
								1b(6)	X	
•				sts, other assets, or paid					1c	<u>K</u>
				s," complete the following					<del></del>	X
u	value	of the goods, of	ther assets, or servi	ces given by the reporting ement, show in column (	ng foundation.	If the found	dation rec	eived less	than fair m	narket
(a) Line	no (t	) Amount involved	(c) Name of nonch	naritable exempt organization	(d) Descri	ption of transfe	ers, transacti	ons, and sha	ring arrangem	ents
		0								
		····								
			· · · · · · · · · · · · · · · · · · ·						,	
									<del>,</del>	
			<del></del>	<del>**                                   </del>						
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	descri	bed in section 5	ectly or indirectly aff 501(c) of the Code (or following schedule.	iliated with, or related to ther than section 501(c)(	o, one or more 3)) or in sectio	e tax-exem n 527? .	pt organiz		Yes 🛚	No
		(a) Name of organi	ization	(b) Type of organiza	ation		(c) Descripti	on of relation	ship	
							·· • • • • • • • • • • • • • • • • • •			
							<del></del> -		<del></del>	
		45,0		·						
	Under	penalties of penury, I	declare that I have examine	d this return, including accompany	ying schedules and	statements, and	I to the best o	f my knowledg	ge and belief, it	t is true,
Sign Here	correc	t, and complete. Deola	ation of preparer (other that	in taxpayer) is based on all information	ation of which prepa		wledge.	with the pr	S discuss this eparer shown tions)?   Yes	below
	Signa	ture of officer or trus	stee	Date	Title					
Paid		Print/Type preparer	's name	Preparer's signature		Date	Chec self-	ck l If	ΠN	
Prepa		Firm's name		1		<del></del>	Firm's EIN		· .···	
Use C		Firm's address ▶ Phone no								
								000-PE	(0.04.5)	

#### Schedule B

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

#### **Schedule of Contributors**

OMB No. 1545-0047

2015

Department of the Treasury Internal Revenue Service ► 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.

Name of the organization **Employer** identification number **Dodson Family Foundation** 47-2510816 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 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** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % 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) filling 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,

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).

literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

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

For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such

Name of organization

Dodson Family Foundation

Employer identification number
47-2510816

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	George M & Kaye R Dodson  580 County Road 2153  Nacogdoches, TX	\$ 108000 	Person Payroll Noncash  (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	Nuroad 777 LLC 8405 FM 1878 Nacogdoches, TX 75961	\$ 16133 85	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		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		

Name of organization

Dodson Family Foundation

Employer identification number 47-2510816

Page 3

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) NOT APPLICABLE (a) No. (c) FMV (or estimate) (b) (d) from Date received Description of noncash property given Part I (see instructions) NOT APPLICABLE \$ (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) \$ (c) (a) No. (d) (b) FMV (or estimate) from **Date received** Description of noncash property given (see instructions) Part I \$ (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I \$ (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (see instructions) Part I \$

Name of c	organization			Employer identification number				
	amily Foundation			47-2510816				
Part III	Exclusively religious, charitable, e (10) that total more than \$1,000 fo the following line entry. For organiza contributions of \$1,000 or less for the Use duplicate copies of Part III if add	r the year from any one tions completing Part III, ne year. (Enter this inform	<b>contributor.</b> Complete enter the total of exclus	columns (a) through (e) and ively religious, charitable, etc.,				
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gif	t (d) De	(d) Description of how gift is held				
	NOT APPLICABLE							
-	(e) Transfer of gift							
<u> </u>	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee				
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gif	t (d) De:	scription of how gift is held				
	NOT APPLICABLE							
	(e) Transfer of gift							
	Transferee's name, address, a	Relationship of tra	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gif	t (d) De	scription of how gift is held				
<u> </u>	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
Ì								
(a) No. from Part I	(b) Purpose of gift (c) Use		: (d) Des	scription of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					