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\*CHANGE TO ACCOUNTING PERIOD CHANGE IN ACCOUNTING PERIOD Return of Organization Exempt From Income Tax OMB No 1545-0047 2015 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. **Open to Public** Department of the Treasury Internal Revenue Service Inspection ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2015 calendar year, or tax year beginning 10/01/15, and ending 12/31/15 D Employer Identification number C Name of organization Check if applicable Walker College Foundation Address change WALKER COLLEGE FOUNDATION Doing business as 63-0369216 Name change Number and street (or P O box if mail is not delivered to street address) E Telephone number 205-221-9803 Initial return P. O. Box 2228 Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated Jasper AL 35502 697,580 G Gross receipts \$ Amended return Name and address of principal officer H(a) Is this a group return for subordinates? Application pending HOLLY TRAWICK P. O BOX 2228 H(b) Are all subordinates included? If "No." attach a list (see instructions) **JASPER** AL 35501 X 501(c)(3) Tax-exempt status (insert no ) 4947(a)(1) or Website: N. H(c) Group exemption number X Corporation Year of formation 1950 Form of organization Association M State of legal domicile Other > Part I Summary 1 Briefly describe the organization's mission or most significant activities: See Schedule O Activities & Governance 2 Check this box ► If the organization discontinued its operations or disposed of more than 25% of its net assets. 17 3 Number of voting members of the governing body (Part VI, line 1a) 17 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 1 5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 6 Total number of volunteers (estimate if necessary) 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7b Prior Year Current Year 250,751 63,401 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 413,066 -20,559 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -413,953 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 249,864 42,842 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 164,515 0 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 78,585 19,133 15 Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 21,775 108,415 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 351,515 40,908 18 Total expenses Add lines 13-17 (must equal Part IX, column (A -101,651 19 Revenue less expenses Subtract line 18 from line 12 1,934 <del>AUG **0 8** 2016</del> Assets or 1 Balances Beginning of Current Year End of Year 9,027,641 9,026,604 20 Total assets (Part X, line 16) 3,170 2,273 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances Subtract line 21 from line 20 9,025,368 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete/Declaration of/preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign HOLLY ' Here TRAWICK EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name Preparer's signature Check Paid 08/03/16 self-employed CHARLES R WILSON P01043394 Preparer Wilson & Associates, 63-0910369 Kellum, Firm's EIN Firm's name **Use Only** 3825 Lorna Rd Ste 212 Hoover, AL 35244 205-221-2935 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

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Form **990** (2015)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	- 1	l	
	complete Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	, , , , , , , , , , , , , , , , , , , ,			
	complete Schedule D, Part VI	11a	х	
b	•			~
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С				v
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	, , , , , , , , , , , , , , , , , , , ,			v
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d		$\frac{\mathbf{x}}{\mathbf{x}}$
e	- · · · · · · · · · · · · · · · · · · ·	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445		X
122	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		<u> </u>
ı Ła	Schedule D. Parts XI and XII	12a		X
ь	Was the organization included in consolidated, independent audited financial statements for the tax year? If	124		
_	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	}	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		$\frac{\mathbf{x}}{\mathbf{x}}$
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		$\frac{\mathbf{x}}{\mathbf{x}}$
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	170		
-	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	- V V V V		
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18_		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		<u>x</u>

## Form 990 (2015) Walker College Foundation Part IV Checklist of Required Schedules (2015) Checklist of Required Schedules (continued)

Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H  b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  21  X  22  Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  23  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J  24  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24c  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  25a  Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a pnor year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2?			<del></del>	14	
b If Yes's to line 203, off the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5.00 of grants or orther assistance to any domestic organization or part IX, column (A), line 12 if Yes', complete Schedule I, Parts I and II  21 X  22 X  23 Did the organization report more than \$5.00 of grants or orther assistance to or for domestic individuals on Part IX, column (A), line 22 if Yes', complete Schedule I, Parts I and II  22 Did the organization cansers "Yes' to Part IVI, Section A, line 3.4 or 6 shout compensation of the organization cansers "Yes' to Part IVI, Section A, line 3.4 or 6 shout compensation of the organization cannot grant or be a state of the	202	Did the organization operate one or more hospital facilities? If "Vos." complete Schedule H	200	Yes	No
12 Did the organization report more than \$5.000 of grants or other assistance to any domestic organization or domestic programmation Part IX. Columin (A), line 17 Meys. Compile Schedule   Part Is is and II   22		· · · · · · · · · · · · · · · · · · ·		$\vdash$	
domestic government on Part IX, column (A), line 17 II "res," complete Schedule I, Parts I and II 21 IX Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X. column (A), line 27 II "res," complete Schedule I, Parts I and III 22 X X Did the organization answer "res" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, flustees, key employees, and highest compensated employees? If "Yes," complete Schedule J X X Did the organization have a last exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K if "No," go to line 25a			200	$\vdash$	
22 X  23 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX. Outmin A), in 22 If IVes. Complete Schedule I, Parts I and III  23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the compensation and the section of the section of the last day of the yes, that was issued after December 31, 2002? If "Yes", answer lines 24b through 24d and complete Schedule K If "No," go to line 25a  24 Did the organization invest any proceeds of lax-evempt bonds beyond a temporary period exception?  25 Did the organization analysis of the last day of proceeds of lax-evempt bonds beyond a temporary period exception?  26 Did the organization analysis of "Yes", complete Schedule L, Part I of defease any tax-exempt bonds beyond a temporary period exception?  26 Did the organization act as an *on behalf of "issuer for bonds outstanding at any time during the year?  27 Did the organization and analysis of "Yes", complete Schedule L, Part I organization by the organization being an analysis of the second of the		·	21		¥
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organization's current and former officers, directors, fusitees, key employees, and highest compensated employees? If "Yes," complete Schedule J  23	23				
employees? If "Yes," complete Schedule J 420 Did the organization have at an excession to dissue with an outstanding principal amount of more than 5100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer fines 24b through 24d and complete Schedule K. If "No." go to line 25s Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year? Did the organization and at as an "on behalf of issuer for bonds outstanding at any time during the year? Did the organization and as an "on behalf of issuer for bonds outstanding at any time during the year? Did the organization and as an "on behalf of issuer for bonds outstanding at any time during the year? Did the organization with a disqualified person during the year? If "Yes," complete Schedule L. Part II Did the organization and the ternascion has not been reported on any of the organizations for Forms 990 or 900-E2? If "Yes," complete Schedule L. Part II Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustes, key employees, highest compensated employees, or disqualified person? If "Yes," complete Schedule L. Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L. Part II Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L. Part IV  Was the organization aparty to a business transaction with one of the following parties (see Sc		· · · · · · · · · · · · · · · · · · ·			
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No." go to line 25a Did the organization inwest any proceeded of tax-exempt bonds beyond a temporary period exception? 24b Did the organization inwest any proceeded of tax-exempt bonds beyond a temporary period exception? 24c Did the organization makes an orn behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization and as an orn behalf of issuer for bonds outstanding at any time during the year? 24d Did the organization are with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I 25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any ourrent or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II 26b Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27c X 28b Was the organization provide a grant or other assistance to an officer, director, trustee, key employee? If "Yes," complete Schedule L, Part IV 27c A complete Schedule L, Part IV 28c A A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c A A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule N, Part II 29c			23		х
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b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 (If Yes,* complete Schedule L, Part II 25b X)  25b Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, bighest compensated employees, or disqualified persons? If Yes,* complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If Yes,* complete Schedule L, Part III 27 X  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 17 28c and Armily member of a current or former officer, director, trustee, or key employee? If Yes,* complete Schedule L, Part IV 28c and Armily member of a current or former officer, director, trustee, or key employee? If Yes,* complete Schedule L, Part IV 28c and Part IV 28c and Part IV 38c and	25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27   1   25b   X    25b   Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II   26   X    27		transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
If "Yes," complete Schedule L, Part I   25b   X   2   2   2   2   2   2   2   2   2	þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
26 Did the organization report any amount on Parl X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, fustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Parl II 26 X  27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Parl III 27 X  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Parl IV 28 X  28 A family member of any of these persons? If "Yes," complete Schedule L, Parl IV 28 X  28 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Parl IV 28 X  28 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Parl IV 28 X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X  30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Parl II 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	i		
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disqualified persons? If "Yes," complete Schedule L, Part II  7 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantal contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III  8 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV)  8 A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  9 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  9 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  9 A n entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or maintent of the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  9 Did the organization receive contributions of art, histonical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I  10 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I  11 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  12 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part II  13 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part IIII and on IV, and Part V, line 1  14 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  15 Section 501(c)(3) organizat	26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
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· · · · · · · · · · · · · · · · · · ·	38				
		19? Note. All Form 990 filers are required to complete Schedule O	38_		<u> </u>

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and X reportable gaming (gambling) winnings to prize winners? 1c Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? X 3a If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial X account)? 4a If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? X 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h 7h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 а 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c X Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14h

Form 990 (2015) Walker College Foundation 63-0369216 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 17 Enter the number of voting members included in line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship wth X any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members. stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? X 8a Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No X **10a** Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters. affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Х 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe in Schedule O how this was done 12¢ 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ▶ None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records.

2030 Third Avenue

AL 35501

205-221-9803

Jasper

George E Deavours

	T.T . 7 1	A . 7 7	Foundation
QQN /2N15\	Walker	COLLEGE	KOUDGALION
01111 330 (2013)			

63	t _	n	2	6	a	2	1	6
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Latí An	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and
	Independent Contractors
	Charle if Cahadala O contains a response or note to envilon in this Doct VIII

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons

(A) Name and Title	(B) Average hours per week (list any hours for	bo off	(C) Position do not check more than one ox, unless person is both an fficer and a director/trustee)			s both	an ee)	(D)  Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(4-21033-16130)	organization and related organizations
(1) HOLLY TRAWICK										
	40.00							50.000	•	
EXECUTIVE DIRECTOR	0.00	X	_	X	_			72,000	0	0
(2) Ms Sue Ellen Sur	1.00									
Trustee	0.00	x						o	0	0
(3) William B Long	0.00	<u> </u>		-	-	┢			<u> </u>	
(o) waranam D Dong	1.00				ŀ					
Trustee	0.00	x						o	0	0
(4) Dr. D. G. Brisco									· · ·	
•	1.00									
Trustee	0.00	X						0	0	0
(5) Dr. Stan Eggers										
	1.00									
Trustee	0.00	X		<u> </u>		Ш		. 0	0	0
(6) Fred May	7 00									
Manuach a a	1.00								^	^
Trustee (7) Lawson W Murphy	0.00	X		-				0	0	0
(/) nawson w murphy	1.00									
Trustee	0.00	x						o	0	0
(8) Al McAdams	0.00	1				H				
(-,	1.00									
Trustee	0.00	x						o	0	0
(9) Ronnie Shaw						П				
_	1.00									
Trustee	0.00	X						0	0	0
(10)Brent Thornley										
	1.00			1						
Trustee	0.00	X	<u> </u>		<u> </u>	Щ		. 0	0	0
(11)Ms. Becky Tracy										
<u>.</u> ,	1.00									•
Trustee DAA	0.00	X						0	0	0 Form <b>990</b> (2015)

Part VII . Section A. Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)	· · · · · · · · · · · · · · · · · · ·			<u>.gc                                    </u>
(A) Name and title	(B) Average hours per week (list any hours for	bo of	Position (do not check more than one box, unless person is both an officer and a director/trustee)		ал	(D)  Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	c	(F) Estima amoun othe compens	ted t of r ation	-		
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W 2 loss missy		organiza and rela	ation ated	
(12) Eddie Jackson	1	<b> </b>	<del>                                     </del>										
Trustee	1.00	x						o	o				0
(13) Ms. Marthanne	Brown 1.00							_					
Trustee (14) Dr. Jack L Mo	0.00	X	-			$\vdash$		0	0				0
(14) DI. Udck II M	1.00												
Trustee	0.00	x						0	0			_	0
(15) Dr. Jerald M	1												
Trustee	1.00	x						_	o				0
(16) Steve Byars	0.00	^					-	0	0				
, ,,	1.00												
Trustee	0.00	X						0	0				0
(17) Dr. David J H													
Trustee	1.00	x		1				o	o				0
(18) Al Simmons		┌╌	<del>                                     </del>										<u> </u>
Trustee	1.00	x						0	0				0
1b Sub-total	1	<u> </u>			<u> </u>		<u> </u>	72,000					
c Total from continuation shed d Total (add lines 1b and 1c)	ets to Part VII,	Sect	ion A	4			<b>&gt;</b>	72,000					
Total number of individuals (in reportable compensation from				thos	e lis	ted a	bov		\$100,000 of				
reportable compensation from	tile organization		<u> </u>			-					[	Yes	No
3 Did the organization list any for employee on line 1a? If "Yes,"								oyee, or highest compensa	nted		3		x
4 For any individual listed on line organization and related organ	e 1a, is the sum	of re	port	able	com	pens	atio						
<ul><li>individual</li><li>Did any person listed on line 1</li></ul>	la receive or acc	en la c	^omr	one	ation	fron		y unrelated organization of	r individual		4		X
for services rendered to the or									Illulvidual		5		X
Section B. Independent Contracto			-					·					
Complete this table for your five compensation from the organical compensation from the organical compensation.										ear			
	(A) business address								(B) tion of services		Co	(C) npensati	on
						-							
						•							
									<del>-</del>				
•													
2 Total number of independent of	contractors (incli	ıdına	bud r	not	limite	ed to	the	se listed above) who			.,	• •	
received more than \$100,000									0				
DAA											For	n 990	(2015)

F	art V		ment of Reve ( if Schedule (		ntains a	response	or note to any line	in this Part VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated car	mpaigns	1a						
Gra	b	Membership o	dues	1b			}			
ts, (	c	Fundraising e	vents	1c			]			
ᆵ	d	Related organ	nizations	1d			]	1		1
S.E	е	Government grants	(contributions)	1e			]			
e tio	f	All other contributio								
뜣		and similar amount	s not included above	_1f		63,401	.]			
Program Service Revenue Contributions, Gifts, Grants	g		ons included in lines 1a-	1f	\$					
<u>ੂੰ ਭ</u>	h	Total. Add lin	es 1a–1f		÷.	<u> </u>	63,401	,, ,,		
u	_					Busn. Code				1
eve	2a								ļ	
9	b									
Ž	C							<del></del>		ļ
Š	a						<del></del>			
grar	e	All other press								
Po	a		ram service reve	nue		<b></b>			<u> </u>	
	3		come (including o	dıvider	nde intere			<u> </u>	1	T
				71410C1	ius, iriter		50,794	50,794		ľ
	4	and other similar amounts) 4 Income from investment of tax-exempt bond proceed 5 Royalties				roceeds >	30,,51	307731		<del> -</del>
	_					<b>•</b>				- 3.
		.,	(ı) Real		(n) l	Personal				
	6a	Gross rents					1			
	b	Less rental exps								
	С	Rental inc or (loss)					]			
	_d	Net rental inco	ome or (loss)			<b>•</b>				
	/a	sales of assets				Other				
		other than inventory 583,385			ļ					
	b	Less cost or other								
		basis & sales exps	654,					-	-	
		Gain or (loss)		353	<u></u>					
		Net gain or (lo	· ·	. 1			-71,353	······		
e	ва		om fundraising ever	nts				` ` `		
Ę		(not including \$								
8		See Part IV, line	reported on line 1c)							
Other Revenue	h	Less direct ex	•	a b						
ŏ			(loss) from fund	(	events					
ļ			om gaming activities	r	, 0.0110					
		See Part IV, line		a						
	ь	Less: direct ex		ь		-				
			(loss) from gami	ing ac	tivities	•				
			f inventory, less	ا ٽ						
- }		returns and all		a					<u>.</u>	
İ	b	Less: cost of g	goods sold	<b>b</b> [	_					
ļ	Ç	Net income or	(loss) from sales	s of inv	ventory	•				
ļ		Misc	cellaneous Revenue			Busn. Code				
	11a	•								
	b					<u> </u>				
ĺ	С	•••								
	d	All other reven	- **		•	L			,	
		Total. Add line	•			🟲	45 51=	<b>.</b>	`	
	12	Total revenue	. See instruction	s.		<u> </u>	42,842	-20,559	0	0

# Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete al

Sect	ion 501(c)(3) and 501(c)(4) organizations must co Check if Schedule O contains a respo			piete column (A).	
Do 5	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to domestic organizations	• •	схрензез	general expenses	expenses
•	and domestic governments. See Part IV, line 21		f		
2	Grants and other assistance to domestic				
-	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
3	,		Ī		
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16		<u> </u>		
4	Benefits paid to or for members		F	· · · · · · · · · · · · · · · · · · ·	
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	10 000	10.000	· · · · · · · · · · · · · · · · · · ·	
7	Other salaries and wages	18,200	18,200		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	933	933		<u> </u>
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	700		700	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	8,664		8,664	
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	990	990		
14	Information technology	·			
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,839	1,839		:
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	406		406	<u></u>
23	Insurance				
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	Miscellaneous	4,689	4,689		
a b	Insurance	3,896	3,896		
	Repairs & Maint	591	591		
٦ 5	repairs a raine	391			
d	All other evenence	+			
e	All other expenses	40,908	31,138	9,770	0
25	Total functional expenses. Add lines 1 through 24e	40,908	31,138	9,110	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here				
DAA	following SOP 98-2 (ASC 958-720)		L		- 000
2					Form 990 (2015)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 559 1 559 Cash-non-interest bearing 164,688 169,128 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L Notes and loans receivable, net 7 Inventories for sale or use 8 6,978 6,978 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or 636,243 10a other basis. Complete Part VI of Schedule D 1,732 634,917 634,511 b Less. accumulated depreciation 10b 8,219,462 8,216,465 11 Investments—publicly traded securities 11 12 Investments—other securities. See Part IV, line 11 12 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 9,026,604 9,027,641 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 3,170 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 3,170 2,273 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 5,539,062 5,504,811 27 Unrestricted net assets 1,500,479 28 1,509,495 Temporarily restricted net assets 28 1,983,893 2,011,062 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 9,023,434 33 9,025,368 9,026,604 9,027,641 Total liabilities and net assets/fund balances

Form **990** (2015)

Form	990 (2015) Walker College Foundation 63-0369216		•	1	Page <b>12</b>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		42	,842
2	Total expenses (must equal Part IX, column (A), line 25)	2		40	,908
3	Revenue less expenses Subtract line 2 from line 1	3		1,934	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,		,434
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	9,	025	,368
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Ye	s No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		[	$\neg$	<b>T</b>
	If the organization changed its method of accounting from a pnor year or checked "Other," explain in		_		
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	2a ]	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				$\top$
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2	2b ]	x
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				$\top$
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2	c c	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3	a	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3	b	

SCHEDULE A (Form 990 or 990-EZ) Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

2015

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Walker College Foundation

Employer identification number 63 - 0369216

P;	art i	Reas	on for Public Charity	Status (All organizations	must co	mpiete	this part.) See instruction	<u>ns.                                      </u>		
The	o <u>rg</u> ai	nization is not	a private foundation because	e it is: (For lines 1 through 11, c	check only	one box	.)			
1		A church, cor	nvention of churches, or ass	ociation of churches described i	n section	170(b)(ʻ	i)(A)(i).			
2		A school des	cribed in section 170(b)(1)(	A)(ii). (Attach Schedule E (Form	n 990 or 9	90-EZ))				
3		A hospital or	a cooperative hospital servi	ce organization described in sec	ction 170	(b)(1)(A)(	iii).			
4			•	d in conjunction with a hospital o	described	ın sectio	n 170(b)(1)(A)(iii). Enter the h	ospital's name,		
5	X	-	on operated for the benefit of	of a college or university owned	or operate	ed by a g	overnmental unit described in			
6		section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).								
7	H	An organization that normally receives a substantial part of its support from a governmental unit or from the general public								
'	Ш	•	•		Jili a gove	en intenta	unit or from the general public	•		
	$\Box$		section 170(b)(1)(A)(vi). (C		. 11 \					
8	H	-		170(b)(1)(A)(vi). (Complete Part	•	بالمراجعة				
9	Ш	_	•	1) more than 33 1/3% of its supp			• • •	JSS		
		· ·		npt functions—subject to certain	•	•				
			•	nd unrelated business taxable in	•		•			
10	$\Box$		-	0, 1975. See <b>section 509(a)(2).</b> exclusively to test for public safe						
11	H	•	• '	exclusively for the benefit of, to p	•		• • • •	coc of		
''	Ц	_	-	ions described in section 509(a	-		•			
		the box in line	es 11a through 11d that dese	cribes the type of supporting org	ganization	and com	plete lines 11e, 11f, and 11g.			
а		Type I. A sup	porting organization operate	ed, supervised, or controlled by	its suppoi	ted orgar	nization(s), typically by giving			
		the supported	d organization(s) the power t	o regularly appoint or elect a ma	ajority of t	he directo	ors or trustees of the supporting	g		
	_	organization.	You must complete Part I'	V, Sections A and B.						
b		Type II. A su	pporting organization superv	vised or controlled in connection	with its s	upported	organization(s), by having			
		control or ma	nagement of the supporting	organization vested in the same	e persons	that conf	rol or manage the supported			
		organization(	s). You must complete Par	rt IV, Sections A and C.						
C		Type III func	tionally integrated. A supp	orting organization operated in o	connectio	n with, an	d functionally integrated with,			
	_	its supported	organization(s) (see instruc	tions). <b>You must complete Par</b>	t IV, Sec	tions A, I	), and E.			
d		Type III non-	functionally integrated. A	supporting organization operate	d in conn	ection wit	h its supported organization(s)			
		that is not fur	nctionally integrated. The org	ganization generally must satisfy	/ a distribi	ution requ	irement and an attentiveness			
	_	requirement (	(see instructions). You mus	t complete Part IV, Sections A	and D, a	nd Part \	<i>I</i> .			
е	$\sqcup$	Check this bo	ox if the organization receive	d a written determination from t	he IRS th	at it is a T	ype I, Type II, Type III			
		_		nctionally integrated supporting of	organizatı	on.				
f			of supported organizations					<u> </u>		
9			ving information about the su		[			<del> </del>		
(i		e of supported janization	(ii) EIN	(lii) Type of organization (described on lines 1–9		rganization ir governing	(v) Amount of monetary support (see	(vi) Amount of other support (see		
	٠.5	,		above (see instructions))	1 .	ment?	instructions)	instructions)		
					Yes	No				
A)					103	NO.				
^, 										
B)										
C)					<del> </del>					
D)										
E)										
					-					
Tota	1									
~10	•		F	l	<u> </u>	t				

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

SEC	alon A. Fublic Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	255,984	412,103	162,539	250,751	63,401	1,144,778	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3	255,984	412,103	162,539	250,751	63,401	1,144,778	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)					-		
6	Public support. Subtract line 5 from line 4						1,144,778	
Sec	tion B. Total Support							
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total	
7	Amounts from line 4	255,984	412,103	162,539	250,751	63,401	1,144,778	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	263,179	252,902	230,680	281,911		1,028,672	
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	335,324	-85,239	365,761	-460,923		154,923	
11	Total support. Add lines 7 through 10	<u> </u>					2,328,373	
12	Gross receipts from related activities, etc.	,				12	50,794	
13	First five years. If the Form 990 is for the	-	second, third, fou	rth, or fifth tax yea	r as a section 501	(c)(3)	_	
<del></del>	organization, check this box and stop her				.,	· · · · · ·	<u> </u>	
	tion C. Computation of Public Su				·-		T	
14	Public support percentage for 2015 (line 6			ı (f))		14	49.17%	
15	Public support percentage from 2014 Scho					15	61.01%	
16a	33 1/3% support test—2015. If the organ				3 1/3% or more, c	heck this	<b>.</b> •••	
	box and stop here. The organization quali		•				<b>▶ X</b>	
b	33 1/3% support test—2014. If the organian about the bay and star bars. The assertion				5 is 33 1/3% or mo	ore,	. □	
170	check this box and stop here. The organization and singularities a	•	• • • • • • • • • • • • • • • • • • • •	•	4Ch li	44.5		
IIa	10%-facts-and-circumstances test—201							
	10% or more, and if the organization meets				•			
	Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization							
b	· · · · · · · · · · · · · · · · · · ·							
~	15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.							
	Explain in Part VI how the organization me				· ·			
	supported organization	,cto trie Tacto-ariti-t	sistemotes les	n. THE Organization	n quames as a pt	ibiidy	▶ □	
18	Private foundation. If the organization did	finoticheck a boy o	n line 13 162 166	17a or 17h che	ck this hovered se	e	<b>-</b> _	
	instructions	OHOUR & DOX OF	10, 100, 100	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	on and box and se		▶ □	
		·						

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Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

Sec	ction A. Public Support	quality under t	ne tests listed t	below, please c	omplete Part I	1.)	
-	ndar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(2) 2015	(D. T-4-1
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	(a) 2011	(6) 2012	(6) 2013	(u) 2014	(e) 2015	(f) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge			1			
6	Total. Add lines 1 through 5			-			
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support						
	ndar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6				<del></del>		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop her		t, second, third, for	urth, or fifth tax yea	r as a section 501	(c)(3)	▶ □
Sec	tion C. Computation of Public Su		tage	<del>,</del>		-	
15	Public support percentage for 2015 (line 8	, column (f) divided	by line 13, colum	n (f))		15	%
16	Public support percentage from 2014 Scho	edule A, Part III, lir	ne 15			16	%
	tion D. Computation of Investme	nt Income Per	centage				
17	Investment income percentage for 2015 (li		•	, column (f))		17	%
18	Investment income percentage from 2014				•	. 18	<u>%</u>
19a	33 1/3% support tests—2015. If the orga						, ,
<b>L</b>	17 is not more than 33 1/3%, check this bo						▶ _
b	33 1/3% support tests—2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization						▶ □
20	Private foundation. If the organization did						· [-
		<del></del>				·	

Part IV Supporting Organizations

> (Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations
---

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported 2 organization was described in section 509(a)(1) or (2). Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. **3**a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. 4b Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) 4c 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document). 5a Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). Was the organization controlled directly or indirectly at any time during the tax year by one or more 9a disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI. 9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI. 9b Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9с 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below 10a

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

determine whether the organization had excess business holdings.)

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Supporting Organizations (continued) Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? 11a **b** A family member of a person described in (a) above? 11b A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. Section B. Type I Supporting Organizations No Yes Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. Section C. Type II Supporting Organizations Yes No 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s) Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s) 2 By reason of the relationship described in (2), did the organization's supported organizations have a 3 significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard Section E. Type III Functionally-Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions) The organization satisfied the Activities Test. Complete line 2 below. а b The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions) 2 Activities Test. Answer (a) and (b) below. Yes No Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b Parent of Supported Organizations. Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. 3a b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. 3b

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	anizati	ions	rage v		
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All					
other Type III non-functionally integrated supporting organizations must complete Section	ons A thro	ough E			
Section A - Adjusted Net Income		(A) Pnor Year	(B) Current Year (optional)		
1 Net short-term capital gain	1				
2 Recoveries of pnor-year distributions	2				
3 Other gross income (see instructions)	3				
4 Add lines 1 through 3	4				
5 Depreciation and depletion	5				
6 Portion of operating expenses paid or incurred for production or		<del></del> . <del></del>			
collection of gross income or for management, conservation, or					
maintenance of property held for production of income (see instructions)	6				
7 Other expenses (see instructions)	7				
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8				
Section B - Minimum Asset Amount		(A) Pnor Year	(B) Current Year (optional)		
Aggregate fair market value of all non-exempt-use assets (see					
instructions for short tax year or assets held for part of year)			,		
a Average monthly value of securities	1a				
b Average monthly cash balances	1b	•			
c Fair market value of other non-exempt-use assets	1c				
d Total (add lines 1a, 1b, and 1c)	1d				
e Discount claimed for blockage or other					
factors (explain in detail in Part VI)					
Acquisition indebtedness applicable to non-exempt-use assets	2				
3 Subtract line 2 from line 1d	3	•			
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,					
see instructions)	4				
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6 Multiply line 5 by 035	6				
7 Recovenes of prior-year distributions	7				
8 Minimum Asset Amount (add line 7 to line 6)	8				
Section C - Distributable Amount			Current Year		
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2 Enter 85% of line 1	2	`	<u></u>		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4 Enter greater of line 2 or line 3	4				
5 Income tax imposed in prior year	5				
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	1 1				
emergency temporary reduction (see instructions)	6				
7 Check here if the current year is the organization's first as a non-functionally-integrate		supporting organization	(see		
instructions)					

Schedule A (Form 990 or 990-EZ) 2015

Par	Type III Non-Functionally Integrated 509(a)(3)	Supporting Organiza	tions (continued)	
Sect	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purp	•		
2	Amounts paid to perform activity that directly furthers exempt purpos			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of sup	ported organizations		
4_	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organizations	zation is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3_	Excess distributions carryover, if any, to 2015:			
a				
b				
С				
d	From 2013			
е	From 2014			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
<u>    i                                </u>	Carryover from 2010 not applied (see instructions)			
<u> </u>	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2015 from Section			
	D, line 7 \$			
a	Applied to underdistributions of prior years			·
b	Applied to 2015 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4		·	
5	Remaining underdistributions for years prior to 2015, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions)		·····	
6	Remaining underdistributions for 2015 Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3			
	and 4c.			
8	Breakdown of line 7:			
<u>a</u>				
<u>b</u>				
	Excess from 2013			
	Excess from 2014			***************************************
е	Excess from 2015	1 1		

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 Walker College Foundation

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Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part II, Line 10 - Other Income Detail

Unrealized Gain (Loss)on Securities

154,923

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2015

Open to Public Inspection

Name of the organization Employer identification number Walker College Foundation 63-0369216 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 3 Aggregate value of grants from (dunng year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the penodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Complete it the organizatio	<u>ii answered i es on re</u>	nin 990, Part IV, line	ria. See Form 990, F	art A, III le 10
Description of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Book value
	(investment)	(other)	depreciation	
1a Land	337,499			337,499
<b>b</b> Buildings	290,356			290,356
c Leasehold improvements				
d Equipment		4,053	1,081	2,972
e Other		4,335	651	3,684
Total. Add lines 1a through 1e (Column (d) must	634,511			

Schedule D (Form 990) 2015 Walker College Foundation 63-0369216 Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (b) Book value (c) Method of valuation (including name of security) Cost or end-of-year market value (1) Financial derivatives (2) Closely-held equity interests (3) Other (A). (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form 990, Part X, col (B) line 12 ) ▶ Investments—Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation Cost or end-of-year market value (1) (2) (3) (4) (5) <u>(</u>6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col (B) line 13.) ▶ Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) ▶ Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6)(7) (8) (9)Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Sche	edule D (Form 990) 2015 Walker College Foundation	63-	-0369216	Page <b>4</b>
Pa	Reconciliation of Revenue per Audited Financial Sta	tements With Reven	ue per Return.	
	Complete if the organization answered "Yes" on Form 9	90, Part IV, lin <u>e 12a.</u>		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Pa	art XII Reconciliation of Expenses per Audited Financial St	•	nses per Return.	
	Complete if the organization answered "Yes" on Form 9	90, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Pnor year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
þ	Other (Describe in Part XIII )	4b		
C	Add lines 4a and 4b		4c	
5	Total expenses, Add lines 2 and 4s. (This must equal Form 000, Part Line 49)	<b>\</b>	=	

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D (Form 990) 2015 Walker College Foundation
Part XIII Supplemental Information (continued)

63-0369216

SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2015

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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Name of the organization

Walker College Foundation

Employer Identification number 63 - 0369216

Form 990 - Organization's Mission

Provide funds for 1) The scholarship committee of Bevill State Community College, 2) For program enhancements and operating expenses (hand sanitizers, assistance for the athletic department, student awards, and expenses associated with meetings and conferences.

Form 990, Part VI, Line 2 - Related Party Information Among Officers

Sue Ellen Summers David Rowland

Trustee Trustee

Father and daughter

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 All members will be given the opportunity to review the return being filed.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation The organization makes its governing documents, conflict of interest policy, and financial statements available to the public upon request.