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STANKED BEET 1918

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

		endar year 2015 or tax year beginning		, 2015, and endir		, 20
		of foundation . T.			A Employer identifi	cation number
_		ROS BENEVOLENT SOCIETY 12550				6020972
ľ	lumbe	r and street (or P O box number if mail is not delivered	to street address)	Room/suite	B Telephone numbe	er (see instructions)
		REGIONS BANK TRUST DEPT, PC			25	1-690-1024
C	ity or	town, state or province, country, and ZIP or foreign pos	tal code			
					C If exemption applicate pending, check here	
_!	MOB:	ILE, AL 36652-2886		·		
G	Che	ck all that apply Initial return	Initial return	of a former public chari	ty D 1 Foreign organizati	ions, check here >
		Final return	Amended ret		2 Foreign organizati	
_		Address change	Name change		85% test, check he computation	
H	Che	ck type of organization: X Section 501(c)(3) exempt private fo	oundation	E If private foundation	status was terminated
\perp	s	ection 4947(a)(1) nonexempt charitable trust	Other taxable pri)(1)(A), check here .
ı		·	unting method X Ca	ish Accrual	F If the foundation is it	n a 60-month termination
		,	ther (specify)		under section 507(b)(1)(B) check here . >
_			column (d) must be on cas	sh basis)		
P	art l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable
		may not necessarily equal the amounts in	expenses per	income	income	purposes
_		column (a) (see instructions))	books			(cash basis only)
	1	Check y if the foundation is not required to				
1	2	Check X attach Sch B				
	3	Interest on savings and temporary cash investments-	2.	2.		STMT 1
	4	Dividends and interest from securities	6,124.	5,404.		STMT 2
	5a	Gross rents				
		Net rental income or (loss)	F 430			
ue		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	5,430.			
Revenue		assets on line 6a 50, 434.		F 420		
æ	7	Capital gain net income (from Part IV, line 2) .		5,430.		
	8	Net short-term capital gain				
	9 10a	Income modifications	(~~)			
		and allowances	, , , , , , , , , , , , , , , , , , ,	RECEIVED		
		Less Cost of goods sold	Ş	1	1821	
	11	Other income (attach schedule)	5	NOV 22 2018	 Ÿ 	
	12	Total. Add lines 1 through 11	11,556	10-836.		
_	13	Compensation of officers, directors, trustees, etc		OGDEN. UT		
es	14	Other employee salaries and wages		NONE	NONE	
penses	15	Pension plans, employee benefits		NONE	NONE	
	162	Legal fees (attach schedule)				
Ü	ь	Accounting fees (attach schedule) STMT. 3.	1,000.	NONE	NONE	1,000
<u>چ</u>	С	Other professional fees (attach scheduler, 4.	2,453.	2,453.		
rat	17	Interest				
ist	18	Taxes (attach schedule) (see instructions). 5.	268.	58.		
Ę	19	Depreciation (attach schedule) and depletion.				
Ď	20	Occupancy				
P	b c 17 18 19 20 21	Travel, conferences, and meetings		NONE	NONE	
а	22	Printing and publications		NONE	NONE NONE	
gu	23 24 25	Other expenses (attach schedule) STMT. 6.	200.			36
ati	24	Total operating and administrative expenses.				
De	}	Add lines 13 through 23	3,921.	2,511.	NONE	
0		Contributions, gifts, grants paid	12,415.			12,415
_	26	Total expenses and disbursements Add lines 24 and 25	16,336.	2,511.	NONE	13,451
	27	Subtract line 26 from line 12				1
		Excess of revenue over expenses and disbursements	-4,780.	0.305		
	ם ן	Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)		8,325.		

JSA For Paperwork Reduction Act Notice, see instructions. GO4594 9155 09/30/2016 11:12:29

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Form 990-PF (2015)

		Attached schedules and amounts in the		3-0020312	rage Z
Part I	Balance Sheets	description column should be for end-of-year amounts only (See instructions)	Beginning of year (a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-hear	ing	7,883.	21,052	21,052
'		•	12 054	 	
2	*	cash investments		3,002	3,002
3	Accounts receivable			一种的一种种种种的一种	-
١.		btful accounts			-1-2-2-2-12-2-
4	Pledges receivable ▶_		Li ducidi da		·- '
		btful accounts			
5					
6		officers, directors, trustees, and other			
	disqualified persons (att	ach schedule) (see instructions)	TOTAL PROPERTY OF THE PARTY OF		
7	Other notes and loans re	eceivable (attach schedule) 🕨	A Contract Contract	The state of the s	4.,
	Less allowance for doul	btful accounts ►NONE			
Assets	Inventories for sale or us	se			
9	Prepaid expenses and d	eferred charges			
₹ 10a	Investments - U.S. and state	government obligations (attach schedule)			
ь	Investments - corporate	stock (attach schedule) . STMT .7	105,337.	97,654	. 108,216
c		bonds (attach schedule). STMT .8	118.817.	116,729	111.288
11	Investments - land, building	gs, ▶	THE RESERVE OF THE PERSON NAMED IN	THE THE PARTY OF THE	L
	and equipment basis Less accumulated deprecia	ation >			(Part - Start Saderana Francis C. 1)
12	(attach schedule)	toons			-
13		loans			
14	Land, buildings, and			BRANCH CHERVEY AND THE TOTAL	
	equipment basis Less accumulated deprecia	ation		والمراجع والمستقيدة والمشارك والمتعادر والمتعادر	
4-	(attach schedule)				
15 16	Other assets (describe				
16		completed by all filers - see the age 1, item l)		041 025	046 350
+-				241,037	. 246,158
17		accrued expenses			
رم 18 دم					
Liabilities 20 21 22	Deferred revenue				ME MARCHANICA POLICE
≥ 20		ors, trustees, and other disqualified persons .			
<u>e</u> 21		otes payable (attach schedule)			tioned a
_ 22	Other liabilities (describe	e >)			TO THE STATE OF TH
					1
23		es 17 through 22)	<u> </u>	NONI	
		low SFAS 117, check here . ▶			Market Was as an all
Salances 25	and complete lines 2	24 through 26 and lines 30 and 31.			
E 24	Unrestricted				
2 5	Temporarily restricted				
	Permanently restricted		-]
Assets or Fund	Foundations that do	not follow SFAS 117, ► X			# 1 A C 48 > _ /
=	check here and com	plete lines 27 through 31.			
27 دي	Capital stock, trust princ	cipal, or current funds	245,911.	241,037	The state of the s
₩ 28	Paid-in or capital surplus, or	r land, bldg , and equipment fund			Demokratica in the second
<u>ن</u> 29	Retained earnings, accumu	lated income, endowment, or other funds			1
30 31	Total net assets or fund	d balances (see instructions)	245,911.	241,037	The state of the same
Ž 31	Total liabilities and	net assets/fund balances (see			Park the same
		· · · · · · · · · · · · · · · · · · ·	245,911.	241,037	. <u> </u>
		nges in Net Assets or Fund Bala			
		balances at beginning of year - Part			1
		d on prior year's return)			245,911.
		line 27a		2	-4,780.
		ded in line 2 (itemize) ► ROUNDING		3	6.
				4	241,137.
		n line 2 (itemize) ►CHECK CLEARING TIM		5	100.
6 Tot	al net assets or fund b	alances at end of year (line 4 minus	line 5) - Part II, column (b), line 30 6	241,037.
					Form 990-PF (2015)

Par	IV Capital	Gains	and Losses for Tax on Inv	restment Income			
`	(a)	(b) How acquired P - Purchase	(c) Date acquired	(d) Date sold			
2-story brick warehouse, or common stock, 200 shs. MLC Co) 1a PUBLICLY TRADED SECURITIES						(mo , day, yr)	(mo , day, yr)
1a	PUBLICLY TRA	ADED S	SECURITIES				
b					<u> </u>		
Ç					ļ		
d							
e						ļ	l
	(e) Gross sales price	e _	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
а	50,43	34.		45,004.			5,430.
b							
C							
d					ļ		
е							
	Complete only for	assets sh	owing gain in column (h) and owner	d by the foundation on 12/31/69		Gains (Col. (h) g	
(i) FMV as of 12/31,	/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	col	(k), but not less Losses (from co	
а							5,430.
C							
d							
е							
	C		()	f gain, also enter in Part I, line 7			
2	Capital gain net in	come or	(net capital loss)	f (loss), enter -0- in Part I, line 7	2		<u>5,430.</u>
		•	or (loss) as defined in sections				
	lf gain, also ente	r in Par	t I, line 8, column (c) (see in	structions). If (loss), enter -0- in			
			<u> </u>		3		
Par	t V Qualifica	tion Ur	nder Section 4940(e) for Re	duced Tax on Net Investment	Income		
				ibutable amount of any year in the	base perio	d?	X Yes No
			ot qualify under section 4940(e).				
		iate amo	ount in each column for each yea	ar, see the instructions before makii	ng any ent	ries.	
	(a) Base period years		(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution	
_Cale	ndar year (or tax year begii	nning in)	Adjusted qualitying distributions	TVEC VALUE OF HORIZITATIONE-USE ASSETS		(col (b) divided by	/ col (c))
	2014						
	2013						
	2012 2011				 		
	2010				 		
	2010				+		
2	Total of line 1, col	lumn (d)			2		
				de the total on line 2 by 5, or by the			
3	_		•	ess than 5 years	1 - 1		
	number of years t	ne round	dation has been in existence in le	ess than 5 years			
4	Enter the net valu	e of non	charitable-use assets for 2015 f	rom Part X, line 5	4		
5	Multiply line 4 by	line 3 .			5		
6	Enter 1% of net in	vestmer	nt income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6				7		
_	.						
8	Enter qualifying di If line 8 is equal Part VI instruction	to or gr	ons from Part XII, line 4 eater than line 7, check the bo	x in Part VI, line 1b, and complete	that part	using a 1% ta	x rate See th
JSA	Tare Vi monucion	·					OOO DE voors

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

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

Enter the states to which the foundation reports or with which it is registered (see instructions)

Form 990-PF (2015)

X

Х

X

Х

7

8ь

LOUID 3	990-Fr (2015)			age •
Part	VII-A Statements Regarding Activities (continued)			
_	the state of the s		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
-	person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ REGIONS BANK TRUST DEPARTMENT Telephone no ▶ (251) 690-	-102	4	
• •	Located at ▶ 11 N. WATER ST. 25TH FLOOR, MOBILE, AL ZIP+4 ▶ 36602			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	ТΤ
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			•
	the foreign country	, ,		
Pari	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
19	During the year did the foundation (either directly or indirectly)	,	-	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	70 W		أد من
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	' .	,	, (
	disqualified person?	1 (to 7)	* .	1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			15. T
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<i>"</i> ' '	٠, -	(: }
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		٠,	1.5
	the benefit or use of a disqualified person)?	,		1
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			}
	foundation agreed to make a grant to or to employ the official for a period after	, ,		
	termination of government service, if terminating within 90 days)	- ''	1	, , ,d
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			, ÷,
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	ļ	
	Organizations relying on a current notice regarding disaster assistance check here			,
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	,		
•	were not corrected before the first day of the tax year beginning in 2015?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		ļ .	1
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	1 2 3		
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and	18.36	٠, ١	11 , 7
_	6e, Part XIII) for tax year(s) beginning before 2015?	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1	
	If "Yes." list the years ▶ 0	1	51.00	
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	1 1	. , ,4 .	!
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			,
	all years listed, answer "No" and attach statement - see instructions.)	2b		X
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	17.00-44	*********	
_	>	5 100	P	1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		Carle.	tank 9
	at any time during the year?	1	2.4	
b	of "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or	11.0	1 5 gg - 1. 1 1 2 4 1 4 1	
_	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	1	.	1 . :
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	44	٠	2-4
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	1	1.	
	foundation had excess business holdings in 2015.)	3b		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	. * *	1	1
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X
		_	O DE	

ırm 990-PF (2015)		63-60	20972		Page 6
Part VII-B Statements Regarding Activities	for Which Form 4	720 May Be Req	uired (continued)		
5a During the year did the foundation pay or incur any ar	nount to			T	
(1) Carry on propaganda, or otherwise attempt to infli	uence legislation (section	n 4945(e)) ⁷	. Yes X No	•	
(2) Influence the outcome of any specific public	election (see section 4	1955), or to carry on	, — —		
directly or indirectly, any voter registration drive?				•	
(3) Provide a grant to an individual for travel, study, o	r other similar purposes?	·	. Yes X No	·	
(4) Provide a grant to an organization other than	a charitable, etc., org	anization described ii			1
section 4945(d)(4)(A)? (see instructions)				•	
(5) Provide for any purpose other than religious,	charitable, scientific, I	iterary, or educationa			
purposes, or for the prevention of cruelty to children				1 1	
b If any answer is "Yes" to 5a(1)-(5), did any of t				1 1	
Regulations section 53.4945 or in a current notice reg	-			5b	
Organizations relying on a current notice regarding di					
c If the answer is "Yes" to question 5a(4), does t		•			
because it maintained expenditure responsibility for the			. Yes No	'	
If "Yes," attach the statement required by Regulations					
6a Did the foundation, during the year, receive any on a personal benefit contract?			Yes X No		
				6ь	X
b Did the foundation, during the year, pay premiums, di If "Yes" to 6b, file Form 8870	rectly or munectly, on a p	personal benefit contra		. 05	
7a At any time during the tax year, was the foundation a	narty to a prohibited tay	shelter transaction?	Yes X No	,	İ
b If "Yes," did the foundation receive any proceeds or ha					
Part VIII Information About Officers, Direc					
and Contractors 1 List all officers, directors, trustees, foundation	managers and their	compensation (see	instructions)		
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense	account,
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allow	ances
ARIA P WEICHMAN	PRESIDENT				
861 OLD SHELL RD, MOBILE, AL 36607	1 1	-0-	1 ^ 1		
001 000 00000 rml 1001001 100 0001		-0-	-0-		-0-
EORGE C PANAYOUTOU	VICE PRESIDENT	0-	-0-		-0-
EORGE C PANAYOUTOU	VICE PRESIDENT	-0-	-0-		-0-
EORGE C PANAYOUTOU 243 CAPITAIN KIDD REEF, PENSACOLA, FL 32507-9432 OHN R WEICHMAN	VICE PRESIDENT 1 SECRETARY	-0-	-0-		-0-
EORGE C PANAYOUTOU 243 CAPITAIN KIDD REEF, PENSACOLA, FL 32507-9432 OHN R WEICHMAN	VICE PRESIDENT				-0- -0-
EORGE C PANAYOUTOU 243 CAPITAIN KIDD REEF, PENSACOLA, FL 32507-9432 OHN R WEICHMAN	VICE PRESIDENT 1 SECRETARY	-0-	-0-		-0-
EORGE C PANAYOUTOU 243 CAPITAIN KIDD REEF, PENSACOLA, FL 32507-9432 OHN R WEICHMAN 861 OLD SHELL RD, MOBILE, AL 36607	VICE PRESIDENT 1 SECRETARY 1	-0- -0-	-0-	ons) If nor	-0-
EORGE C PANAYOUTOU 243 CAPITAIN KIDD REEF, PENSACOLA, FL 32507-9432 OHN R WEICHMAN 861 OLD SHELL RD, MOBILE, AL 36607	VICE PRESIDENT 1 SECRETARY 1	-0- -0-	-0-	ons). If nor	-0-
EORGE C PANAYOUTOU 243 CAPITAIN KIDD REEF, PENSACOLA, FL 32507-9432 OHN R WEICHMAN 861 OLD SHELL RD, MOBILE, AL 36607 2 Compensation of five highest-paid employed "NONE."	VICE PRESIDENT 1 SECRETARY 1 es (other than thos	-0- -0- se included on lin	-0- -0- e 1 - see instruction	<u> </u>	-0- -0-
EORGE C PANAYOUTOU 243 CAPITAIN KIDD REEF, PENSACOLA, FL 32507-9432 OHN R WEICHMAN 861 OLD SHELL RD, MOBILE, AL 36607 2 Compensation of five highest-paid employee	VICE PRESIDENT 1 SECRETARY 1 es (other than thos	-0- -0-	-0- -1 - see instruction (d) Contributions to employee benefit plans and deferred	ons). If nor (e) Expense other allov	-0- -0- ne, ente
EORGE C PANAYOUTOU 243 CAPITAIN KIDD REEF, PENSACOLA, FL 32507-9432 OHN R WEICHMAN 861 OLD SHELL RD, MOBILE, AL 36607 2 Compensation of five highest-paid employed "NONE." (a) Name and address of each employee paid more than \$50,000	VICE PRESIDENT 1 SECRETARY 1 es (other than thos	-0- -0- se included on lin	-00- (d) Contributions to employee benefit	(e) Expense	-0- -0- ne, ente
EORGE C PANAYOUTOU 243 CAPITAIN KIDD REEF, PENSACOLA, FL 32507-9432 OHN R WEICHMAN 861 OLD SHELL RD, MOBILE, AL 36607 2 Compensation of five highest-paid employed "NONE." (a) Name and address of each employee paid more than \$50,000	VICE PRESIDENT 1 SECRETARY 1 es (other than thos	-0- -0- se included on lin	-0- -1 - see instruction (d) Contributions to employee benefit plans and deferred	(e) Expense	-0- -0- ne, ente
EORGE C PANAYOUTOU 243 CAPITAIN KIDD REEF, PENSACOLA, FL 32507-9432 OHN R WEICHMAN 861 OLD SHELL RD, MOBILE, AL 36607 2 Compensation of five highest-paid employed "NONE."	VICE PRESIDENT 1 SECRETARY 1 es (other than thos	-0- -0- se included on lin- (c) Compensation	-0- 1 - see instruction (d) Contributions to employee benefit plans and deferred compensation	(e) Expense	-0- -0- ne, ente
EORGE C PANAYOUTOU 243 CAPITAIN KIDD REEF, PENSACOLA, FL 32507-9432 OHN R WEICHMAN 861 OLD SHELL RD, MOBILE, AL 36607 2 Compensation of five highest-paid employed "NONE." (a) Name and address of each employee paid more than \$50,000	VICE PRESIDENT 1 SECRETARY 1 es (other than thos	-0- -0- se included on lin- (c) Compensation	-0- 1 - see instruction (d) Contributions to employee benefit plans and deferred compensation	(e) Expense	-0- -0- ne, ente
EORGE C PANAYOUTOU 243 CAPITAIN KIDD REEF, PENSACOLA, FL 32507-9432 OHN R WEICHMAN 861 OLD SHELL RD, MOBILE, AL 36607 2 Compensation of five highest-paid employed "NONE." (a) Name and address of each employee paid more than \$50,000	VICE PRESIDENT 1 SECRETARY 1 es (other than thos	-0- -0- se included on lin- (c) Compensation	-0- 1 - see instruction (d) Contributions to employee benefit plans and deferred compensation	(e) Expense	-0- -0- ne, ente
EORGE C PANAYOUTOU 243 CAPITAIN KIDD REEF, PENSACOLA, FL 32507-9432 OHN R WEICHMAN 861 OLD SHELL RD, MOBILE, AL 36607 2 Compensation of five highest-paid employed "NONE." (a) Name and address of each employee paid more than \$50,000	VICE PRESIDENT 1 SECRETARY 1 es (other than thos	-0- -0- se included on lin- (c) Compensation	-0- 1 - see instruction (d) Contributions to employee benefit plans and deferred compensation	(e) Expense	-0- -0- ne, ente
EORGE C PANAYOUTOU 243 CAPITAIN KIDD REEF, PENSACOLA, FL 32507-9432 OHN R WEICHMAN 861 OLD SHELL RD, MOBILE, AL 36607 2 Compensation of five highest-paid employed "NONE." (a) Name and address of each employee paid more than \$50,000	VICE PRESIDENT 1 SECRETARY 1 es (other than thos	-0- -0- se included on lin- (c) Compensation	-0- 1 - see instruction (d) Contributions to employee benefit plans and deferred compensation	(e) Expense	-0- -0- ne, ente

and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONI	E."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
ONE	
	NONE
	MONI
otal number of others receiving over \$50,000 for professional services	NONE
art IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 NONE	
2	
3	
4	
Company of December 11 and 12	
Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments. See instructions	
3NONE	
otal. Add lines 1 through 3	

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	n foundati	ons,
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	249,199.
b	Average of monthly cash balances	1b	10,682.
C	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	259,881.
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	NONE
3	Subtract line 2 from line 1d	3	259,881.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	3,898.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	255,983.
6	Minimum investment return. Enter 5% of line 5	6	12,799.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ▶ and do not complete this part.)	dations	
1	Minimum investment return from Part X, line 6	1	12,799.
2 a	Tax on investment income for 2015 from Part VI, line 5 2a 167.		
_ b	Income tax for 2015. (This does not include the tax from Part VI.) . 2b		
c	Add lines 2a and 2b	2c	167.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	12,632.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	12,632.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
-	line 1	7	12,632.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	13,451.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	13,451.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		<u> </u>
	Enter 1% of Part I, line 27b (see instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	13,451.
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when co	alculating w	hether the foundation

Form **990-PF** (2015)

Page 9

Pa	t XIII Undistributed Income (see instruct	tions)			
1	Distributable amount for 2015 from Part XI,	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
•	line 7				12,632.
2	Undistributed income, if any, as of the end of 2015				
	Enter amount for 2014 only.			12,412.	
	Total for prior years 20 13 ,20,20		448.		
	Excess distributions carryover, if any, to 2015				
	From 2010 NONE				
	From 2011 NONE				
	From 2012 NONE				
	From 2013 NONE				
	From 2014 NONE		Ì		
	Total of lines 3a through e	NONE			
	Qualifying distributions for 2015 from Part XII,		-		
4	line 4 \blacktriangleright \$ 13,451.				
_	Applied to 2014, but not more than line 2a			12,412.	
				12,112.	
k	Applied to undistributed income of prior years (Election required - see instructions)		448.		
	Treated as distributions out of corpus (Election				
	required - see instructions)	NONE			
(Applied to 2015 distributable amount				591.
•	Remaining amount distributed out of corpus	NONB			
5	Excess distributions carryover applied to 2015 .	NONB			NONE
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as indicated below:				
í	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	NONE			
	Prior years' undistributed income. Subtract				
•	line 4b from line 2b				
•	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	tax has been previously assessed		NONE		
	Subtract line 6c from line 6b. Taxable				
•	amount - see instructions				
(Undistributed income for 2014. Subtract line				
	4a from line 2a Taxable amount - see				
	instructions			-	
1	Undistributed income for 2015 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2016				12,041.
,	Amounts treated as distributions out of corpus				
,	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)	NONE			
_					• •
8	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	NONE			
_	r i i		<u> </u>		
9	Excess distributions carryover to 2016.	NONE			
40	Subtract lines 7 and 8 from line 6a	1,0112			
	Analysis of line 9. a Excess from 2011 NONE				
	NONE				
	Excess from 2012 NONE Excess from 2013 NONE	,			
	d Excess from 2014 NONE				
	Excess from 2014 NONE				
			1		Form 990-PF (2015)

_	t XIV Private Op	erating Foundations	(see instructions a	 	ion 9)	NOT APPLICABLE
	If the foundation has					
	foundation, and the ruling	=				
b	Check box to indicate	•	_			2(j)(3) or 4942(j)(5)
_	Oligon Box to maiotic	Tax year		Prior 3 years		
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	I or the minimum investment		(6) 2014	(6) 2013	(4) 2012	
	return from Part X for each					
	year listed				-	
b	85% of line 2a					
C	Qualifying distributions from Part					
	XII, line 4 for each year listed .					
đ	Amounts included in line 2c not					
	used directly for active conduct of exempt activities					
е	Qualifying distributions made					
	directly for active conduct of					
	exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b or c for the					
	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)					
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest- ment return shown in Part X,					
	line 6 for each year listed					
C	"Support" alternative test - enter					
	(1) Total support other than	1				
	gross investment income (interest, dividends, rents,					
	payments on securities	•				
	loans (section 512(a)(5)), or royalties)	1				
	(2) Support from general					
	public and 5 or more exempt organizations as					
	provided in section 4942					
	(j)(3)(B)(m)			 		
	port from an exempt	1				
	organization					
Da	(4) Gross investment income. rt XV Suppleme	ntary Information (Complete this part	t only if the found	ation had \$5 000	or more in assets at
Га	any time d	luring the year - see	instructions.)	comy in the round	ation nad 40,000	Or more in assets at
1	Information Regarding					
				are than 2% of the to	stal contributions re	ceived by the foundation
	before the close of an	y tax year (but only if t	hey have contributed	more than \$5,000). (See section 507(d)(2	?).)
		, , , , ,	,			
_	NONE	t the foundation who	0410 100/ or more	of the stock of a cou	rnoration for an equ	ually large portion of the
	LIST any managers of	rship or other entity) o	own 10% or more	on has a 10% or greate	rporation (or an equ er interest	any large portion of the
		asing or other charge c	, willow the realization	minus a rozo or groun		
	NONE					
_	1.7	0 1 1 1 0	O'th Laser Cabalana	Lin at Dunnung		
2	Information Regardin	-				
						is and does not accept
				rants, etc. (see instru	ictions) to individua	ls or organizations under
	•	plete items 2a, b, c, ai				
a	The name, address, a	nd telephone number	or e-mail address of th	ne person to whom ap	oplications should be	addressed
t	The form in which app	plications should be su	ibmitted and informat	ion and materials the	y should include	
_	: Any submission dead	lines:	.			* '
	•					
_	Any restrictions or	limitations on award	s, such as by geog	raphical areas, char	itable fields, kinds	of institutions, or other
•	factors		, 3,-3		.,	, = =

Part XV Supplementary Information 3 Grants and Contributions Paid Duri	(continued)	oved for F	uture Payment	
Recipient Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	1	A :
Name and address (home or business)	any foundation manager	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor			
a raid daring the year				
SEE STATEMENT 16				12,415.
				•
	ii			I
			•	
				п
			j	
		İ		
Table			▶ <u>3</u> a	12,415
Total			3a	12,413
b Approved for future payment		i		
		1		
				1
				1
		1		
Total			▶ 3b	

Part XVI-	Analysis of Income-Produ	ucing Act	vities			
Enter gross a	mounts unless otherwise indicated	Unrel	eted business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
		(a)	(b)	(c)	(d)	function income
1 Program	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
						
f						
• •••	and contracts from government agencies					
_	ship dues and assessments					
	n savings and temporary cash investments			14	2.	
	s and interest from securities			14	6,124.	
5 Net renta	al income or (loss) from real estate					
a Debt-	financed property					
b Not d	lebt-financed property	,				
	income or (loss) from personal property			-		······································
	vestment income			18	5,430.	
,	oss) from sales of assets other than inventory	/		10	5,130.	
	me or (loss) from special events · · · ofit or (loss) from sales of inventory					
•	venue a					
е						
	Add columns (b), (d), and (e)				11,556.	11 556
	dd line 12, columns (b), (d), and (e)				13	11,556.
Part XVI-	B Relationship of Activities		ccomplishment of	Evennt Pur	noses	
Line No	Explain below how each activity					uted importantly to the
▼	accomplishment of the foundati					
	·					
						
						· · · · · · · · · · · · · · · · · · ·
						··· - · · · · · · · · · · · · · · · · ·
					<u> </u>	
-						
			NOT APPLICAE	BLE		
						
						
						
				•		
						
						·
						

Form 990-PF (2015)		63-6020372			•
Par	XVII Information Regarding Transfers To and Exempt Organizations	Transactions and Relationships With N	Voncharita	ıble	
ì	Did the organization directly or indirectly engage in any of	the following with any other organization describ	oed 1	Yes	_

	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political						No			
	organiza				ŭ		• ,			
а	Transfer	s from the reportin	g foundation to	a noncharitable e	xempt organi	zation of:				
	(1) Cash	1						1a(1)		X
	(2) Othe	er assets						1a(2)		X
		ansactions:								.,
										X
										X
									-	X
										X
										X
	-									X
						chedule. Column (b)			fair n	
						undation. If the found				
	value in	any transaction of	or sharing arrang	gement, show in	column (d) t	he value of the good	s, other assets, or s	ervice	s rec	eıved.
	ne no	(b) Amount involved	· · · · · · · · · · · · · · · · · · ·	noncharitable exempt o		T	fers, transactions, and sha			
						,				
			<u> </u>							
			ļ							
			-							
			-							
			-							
									-	
								-		
	describ	ed in section 501(c) of the Code (c			e or more tax-exemption section 527?		Y	es _	X No
D	it Yes,	complete the follo (a) Name of organizati		(h) Type (of organization		(c) Description of relation	nship		
		(a) Name of Organizati	1011	(5) 1 7 10 0	or or gornzanon		(0, 0 000)			
						schedules and statements, and preparer has any knowledge	to the best of my knowled	ige and	belief i	t is true,
Sig	- 1 -	(Anon)	1 1		- bear		May the B	RS discu	ss this	return
Her		VY HOUR -	Wucan		5/20/6	PRESIDENT		reparer		below
	Jugn	ature of officer or fruste		Date [,	Title	(see instruction	ons}?	Yes	No
	MA	RIA WEICHMAN Print/Type preparer's r		Preparer's signa	One (\	Date	[01 .] [1]	PTIN		
Paid	d			Trehater 2 signa	Shorke	เปลือใน	Check if self-employed		2116	aз
	parer	JULIE S EHM		K. ATRUST DE		- INDIA		P012		03_
	Only		EGIONS BAN		<u>. T</u>	<u>`</u>	Firm's EIN > 63	-037	LOSI	
J36	. Only		OBILE, AL		36	652-2886	Phone no 251-6	590-	1024	
		<u> </u>	יסטנטטן אט			2000				(2015)

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

STATEMENT

AND EXPENSES PER BOOKS			
	TOTAL		
DESCRIPTION	OTHER INTEREST		

NET INVESTMENT INCOME

REVENUE

STATEMENT

ND INTEREST FROM SECURITIE	REVENUE	AND EXPENSES	PER BOOKS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	'9	
F, PART I - DIVIDENDS			ON	1	DIVIDENDS AND INTEREST	
FORM 990PE			DESCRIPTION	1 1 1 1 1	DIVIDENDS	

NET INVESTMENT INCOME	 	5,404.	5,404
AND EXPENSES PER BOOKS	1 1 1 1 1 1 1 1	6,124.	6,124

TOTAL

FEES	
ACCOUNTING	
ŧ	i
Н	
PART	
990PF,	
FORM	

CHARITABLE PURPOSES	1,000.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	1,000.
DESCRIPTION	TAX PREPARATION FEE (NON-ALLOC TOTALS

1255000802

STATEMENT

63-6020972

FEES
PROFESSIONAL
OTHER
1
Н
PART
990PF,
FORM

	NET	INVESTMENT	INCOME	1 1 1 1 1 1	2,453.		2,453.))
REVENUE	AND	EXPENSES	PER BOOKS	1 3 5 1 1 1	2,453.	1 1 1 1 1 1 1 1 1	2,453.	H 11 H H H H H H H H H H H H H H H H H
			DESCRIPTION		INVESTMENT MGMT FEES-SUBJECT T		TOTALS	

AXES
I - I
, PART
990PF
FORM

FEN	INVESTMENT	INCOME	 		42.	16.	58.	U
REVENUE AND	EXPENSES	PER BOOKS	 1	268.			268.	
		DESCRIPTION		2014 FEDERAL EXTENSION	FOREIGN TAXES QULAIFIED DIVIDE	FOREIGN TAXES NONQUALIFIED DIV	TOTALS	

2

STATEMENT

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION

REVENUE AND EXPENSES PER BOOKS

CHARITABLE PURPOSES

164. 36.

2014 4720 PAYMENT CHECKING FEES

200.

TOTALS

36.

STATEMENT

9

SKYROS BENEVOLENT SOCIETY 1255000802

FORM 990PF, PART II - CORPORATE STOCK

ENDING FMV	29,482. 6,903. 6,585. 29,333. 10,534. 10,550. 1,136. 6,954.	108,216.
ENDING BOOK VALUE	25,541. 7,621. 5,492. 23,066. 9,735. 10,062. 1,197. 8,265. 6,675.	97,654.
BEGINNING BOOK VALUE	26,975. 6,364. 5,225. 26,478. 10,284. 10,556. 5,211. 7,037.	105,337.
		TOTALS
DESCRIPTION	INVESCO DIVERS DIV FD CL R5 AMERICAN CENTURY SM CAP JP MORGAN MID CAP VAL FD CL I JP MORGAN LG CAP GRWTH INVESCO INTL GRWTH FD CL R5 MFS RESH INTL FD CL I VIRTUS EMERGING MKTS OPP-I ARTISAN MID CAP FD-INV RS SMALL CAP GROWTH FUND	

STATEMENT

SKYROS BENEVOLENT SOCIETY 1255000802

FORM 990PF, PART II - CORPORATE BONDS

ENDING FMV 	11,146. 11,169. 36,468. 5,513. 36,506. 10,486. 111,288.
ENDING BOOK VALUE	12,129. 11,087. 38,044. 6,716. 37,028. 11,725. 116,729.
BEGINNING BOOK VALUE	11,569. 11,549. 38,882. 6,136. 38,696. 11,985.
	TOTALS
DESCRIPTION	TEMPLETON GLOBAL BD FD ADV TCW CORE FIXED INC FD FIDELITY INVST GRADE BD JOHN HANCOCK FUNDS III JPMORGAN CORE BOND FUND CL S PIMCO FOREIGN BOND #103

 ∞

STATEMENT

AVERAGE MONTHLY FMV - 990PF, PART X, LINES 1a-1c

	LINE la-FMV	LINE 1b-FMV	LINE 1c-FMV
MONTH	SECURITIES	CASH BALANCES	OTHER ASSETS
T337773 D37	052 740		
JANUARY	253,749.		
FEBRUARY	259,196.		
MARCH	259,057.		
APRIL	259,130.		
MAY	259,955.		
JUNE	257,250.		
JULY	260,282.		
AUGUST	239,139.		
SEPTEMBER	234,344.		
OCTOBER	241,432.		
NOVEMBER	241,755.		
DECEMBER	225,104.		
TOTAL	2,990,393.		
	==========	==========	===========
AVERAGE FMV	249,199.		
	_==========	=======================================	==========

SKYROS BENEVOLENT SOCIETY 1255000802 63-6020972 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: THE SALVATION ARMY RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 300. RECIPIENT NAME: HOME OF GRACE FOR WOMEN, **RELATIONSHIP:** NONE PURPOSE OF GRANT: CHARITABLE

RECIPIENT NAME:
LITTLE SISTERS OF THE
POOR
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

AMOUNT OF GRANT PAID

RECIPIENT NAME:
 PENELOPE HOUSE
RELATIONSHIP:
 NONE
PURPOSE OF GRANT:
 CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
 PUBLIC

RECIPIENT NAME:

USA CHILDREN AND WOMEN'S

HOSPITAL

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

AMOUNT OF GRANT PAID

RECIPIENT NAME:

RONALD MCDONALD HOUSE

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

1,400.

SKYROS BENEVOLENT SOCIETY 1255000802 63-6020972 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: ST. MARY'S HOME FOUNDATION RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 700. RECIPIENT NAME: BAYSIDE ACADEMY RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 250. RECIPIENT NAME: EASTER SEALS RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

AMOUNT OF GRANT PAID

STATEMENT 12

PUBLIC

RECIPIENT NAME:
PENSACOLA OPERA

PURPOSE OF GRANT: CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

RELATIONSHIP:

NONE

PUBLIC

200.

SKYROS BENEVOLENT SOCIETY 1255000802 63-6020972 FORM '990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: MOBILE PUBLIC LIBRARIES RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 250. RECIPIENT NAME: MOBILE SYMPHONY **RELATIONSHIP:** NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 276. RECIPIENT NAME: ST. MARY'S SCHOOL RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 400. RECIPIENT NAME: MITCHELL CANCER INSTITUTE RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE

AMOUNT OF GRANT PAID

PUBLIC

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

PURPOSE OF GRANT:

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

SKYROS BENEVOLENT SOCIETY 1255000802 63-6020972 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: FRIENDS OF MOBILE ANIMAL SHELTER RELATIONSHIP: NONE PURPOSE OF GRANT: ANIMAL RESCUE SHELTER FOUNDATION STATUS OF RECIPIENT: 100. RECIPIENT NAME: MOBILE POLICE FOUNDATION RELATIONSHIP: NONE PURPOSE OF GRANT: FOR OFFICERS KILLED OR WOUNDED IN SERVICE FOUNDATION STATUS OF RECIPIENT: 200. AMOUNT OF GRANT PAID RECIPIENT NAME: MULHERIN CUSTODIAL HOME RELATIONSHIP: NONE PURPOSE OF GRANT: CARE FOR MENTALLY HANDICAPPED FOUNDATION STATUS OF RECIPIENT: 700. AMOUNT OF GRANT PAID RECIPIENT NAME: USS ALABAMA BATTLESHIP COMMISSION RELATIONSHIP: NONE PURPOSE OF GRANT: MUSEUM FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

SKYROS BENEVOLENT SOCIETY 1255000802 63-6020972 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: WEEKS BAY FOUNDATION RELATIONSHIP: NONE PURPOSE OF GRANT: PROTECT NATURAL RESOURCES FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 500. RECIPIENT NAME: WOUNDED WARRIOR PROJECT RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAMS AND SERVICES FOR WOUNDED VETERANS FOUNDATION STATUS OF RECIPIENT: 300. AMOUNT OF GRANT PAID

12,415.

==========

TOTAL GRANTS PAID: