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

OMB No. 1545-0052

► Do not enter social security numbers on this form as it may be made public. mation about Form 990-PF and its separate instructions is at www.irs.cov/form

		alenc	far year 2015 or tax year beginning $12/21/15$ , :	and ending 12					
			S D ORR SCHOLARSHIP FOUNDATION	ON		A Empl	oyer identification number		
			OTD 08/14/10		01	-0956628			
			I street (or P.O. box number if mail is not delivered to street address)	T	Room/sulte	B Yelephone number (see Instructions)			
			OX 568	}	Hoomsone		<b>"</b> ,		
			, state or province, country, and ZIP or foreign postal code				2-489-9302		
			ESBORO GA 30459			) C lřexe -	mplion application is pending	, check here > U	
	GC	heck a		m of a former public	charity	D 1. F	oreign organizations, check h	:re ▶ [_]	
			Final return Amended				oreign organizations meeting (		
			Address change Name cha			. 8	5% leet, check here and altac	ocomputation .	
	H C	heck (	type of organization: 🛣 Section 501(c)(3) exempt private	foundation		€ If prov	ale foundation status was ten	minsted under	
	ئے	Section	1 4947(a)(1) nonexempt charitable trust Other taxab	le private foundation	<u> </u>	eectio	on 507(b)(1)(A), check here	▶ ∐	
	I Fa	ir mar	ket value of all assets at J Accounting method:	X Cash A	ccrual	F If the	foundation is in a 60-month to	rmination	
	en	d of y	ear (from Part II, col. (c), Other (specify)			unde	r section 507(b)(1)(8), check i	were ▶ 📙	
		e 16)		be on cash basis)		1			
			Analysis of Revenue and Expenses (The total of amounts in columns (b). (c), and (d) mey not necessarily equal	(a) Revenue and expenses per	(b) Net in		(c) Adjusted net	(d) Disbursementa for charitable purposes	
			the amounts in column (a) (see instructions) )	books		· · · · · · · · · · · · · · · · · · ·		(cesh besis only)	
φ,		1	Contributions, gifts, grants, etc., received (attach schedule)		**************************************		200 000 0000 0000000000000000000000000		
<b>5016</b>		2	Check ►  if the foundation is not required to attach Sch. B	32,200	**************************************		100 4.01 (110x0x0x0x0x0x0x0x0x0x0x0x0x0x0x0x0x0x0		
~		3	Interest on savings and temporary cash investments	L					
~		4	Dividends and interest from securities	<u> </u>	_				
SCANNED DEC 2 1		5a	Gross rents	000 000	45 15 15 15 15 15 15 15 15 15 15 15 15 15	<del></del>	****		
	5	Ь	Net rental income or (loss)						
	evenue	6a	Nel gain or (loss) from sale of assets not on line 10	30100 000 000 000 000 000 000 000 000 00					
8	Š	þ	Gross sales price for all assets on line 6a					00 00 00 00 00 00 00 00 00 00 00 00 00	
岩	ď	7	Capital gain net income (from Part IV, line 2)			0 **********		200 P 4 200 C 200	
Z		8	Net short-term capital gain				0		
S	)	9	Income modifications			**************************************			
Ü	•	10a	Gross sales less returns and allowances	(y c) at your growth of the mon		(CO 60000 C*60.0)(CC PX7XP0.0XCCCO 600 PX0XPCCO 6000*60	00 - 00 - 00 - 00 - 00 - 00 - 00 - 00		
		b	Less: Cost of goods sold	7	<b>N</b>		******		
		11	Gross profit or (loss) (attach schedule) Other income (attach schedule)	<del>\ \\\</del>	/	***********			
		12	Total. Add lines 1 through 11	F	0	0	0		
		13	Compensation of officers, directors, trustees, etc				<del>-</del>	**************************************	
	8	14	Other employee salaries and wages	<del></del> -	<del></del>	<del></del> -	<del></del>	<del></del>	
	28	15	Pension plans, employee benefits		<del></del>		<del>                                     </del>	<del></del>	
	Expenses	16a	Legal fees (attach schedule)			<del></del>		<del></del>	
	_	ь	Accounting fees (attach schedule)						
	<b>8</b>	c	Other professional fees (attach schedule)		<del> </del>		<del></del>		
	äŧ	17	Interest		<u> </u>				
	Sti	18	Taxes (attach schedule) (see instructions)		<del></del>				
	Ξ	19	Depreciation (attach schedule) and depletion		<u> </u>				
	늄	20	Occupancy					***************************************	
	₹	21	Travel, conferences, and meetings						
	Ē	22	Printing and publications						
	9	23	Other expenses (att. sch.)						
	Ë	24	Total operating and administrative expenses.	-					
	Operating and Administrative		Add lines 13 through 23		0	0	0	0	
	Σ	25	Contributions, grifts, grants paid		0	**************************************		0	
	O	26	Total expenses and disbursements. Add lines 24 and 25		0	0	0	0	
		27	Subtract line 26 from line 12:						
		а	Excess of revenue over expenses and disbursements		0				
		ь	Net investment income (if negative, enter -0-)		00 00 00 00 00 00	0			
		_c	Adjusted net Income (if negative, enter -0-)	22.0 (2) (2) (2) (2) (2) (2) (2) (2) (2) (2)			_0		

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2015)

Fo	m 990	PF (2015) JAMES D ORR SCHOLARSHIP FOUNDATION			Page 2
***	in I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	Beginning of year	End o	fyear
	****	2 And be to chestiful along to any (or a national and	(a) Book Value	(b) Book Value	(c) Før Market Valve
- 1	1,	Cash - non-interest-bearing			<del></del>
- 1	2 ·	Savings and temporary cash investments	(1,01,0,00°C (0°C)	( )NOO( )NO (ON (ON (ON (ON (ON (ON (ON (ON (ON (	* 0.00*\ 0.00 00000000000000000000000000
- [	3	Accounts receivable Less allowance for doubtful accounts			0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
		Less: allowance for doubtful accounts	2 (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	; <b></b>	***************************************
ļ	4	Pledges receivable		() point are in section being a prof. (c)	V order transportations are some
		Less: allowance for doubtful accounts			
- 1	5	Grants receivable			
- 1	6	Receivables due from officers, directors, trustees, and other		•	
		disqualified persons (attach schedule) (see			
1		instructions)	MONORO & S.		VACCES COMMUNICATION ASSOCIATION OF
-	7	Other notes and loans receivable (att. schedule)			
-		Less: allowance for doubtful accounts			
쬤	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
₹	10a	Investments – U.S. and state government obligations (attach schedule)			
	Ь	Investments – corporate stock (attach schedule)			<del></del>
- 1	C	Investments – corporate bonds (attach schedule)	200 C C C C C C C C C C C C C C C C C C	ani ne nomedanide in energia na mando	
- 1	11	Investments - land, buildings, and equipment basis		M St. (- accounts) / 1 Mercy National Control of the Control of th	MANAGE STATESTANDERS (STATESTANDERS
- 1		Less accumulated depraciation (attach sch.)		<u></u>	
	12	Investments - mortgage loans	·		<del></del>
-	13	Investments – other (attach schedule)	S 0/20 C2 (C) (A) (A) (A) (A) (A) (A) (A) (A) (A) (A		
- 1	14	Land, buildings, and equipment basis			
		Leas accumulated depreciation (attach sch.)		<del></del>	<del></del>
	15	Other assets (describe )			
	16	Total assets (to be completed by all filers - see the			
4		instructions. Also, see page 1, item I)	0	0	0
- 1	17	Accounts payable and accrued expenses		<del></del>	
<u>"</u>	18	Grants payable		<del> </del>	
	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ē.	21	Mortgages and other notes payable (attach schedule)		·	
٦	22	Other liabilities (describe )			
4	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
nces		and complete lines 24 through 26 and lines 30 and 31.			
Ĕ	24	Unrestricted			#*************************************
혎	25	Temporarily restricted			
Net Assets or Fund Bala	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here			
뷥		and complete lines 27 through 31.			
8	27	Capital stock, trust principal, or current funds			
ag a	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
3	29	Retained earnings, accumulated income, endowment, or other funds			
To let	30	Total net assets or fund balances (see instructions)	0	0	
Z	31	Total liabilities and net assets/fund balances (see			
_1		instructions) ,	0	0	
	Cont.				<del></del>
1		net assets or fund balances at beginning of year - Part II. column (a), line 30 (mu	st agree with	}	
		of-year figure reported on prior year's return)		1	
_ 2	Ente	r amount from Part I, line 27a		<u>2</u>	
3	Othe	r increases not included in line 2 (itemize)	. ,	3	<u></u>
		lines 1, 2, and 3		. 4	
5	Decr	eases not included in line 2 (itemize)		5	<del></del>
_6	Tota	net assets or fund balances at and of year (line 4 minus line 5) - Part II, column (	<u>b), line 30</u>	. 6	

Form 990 PF (2015) JAMES D C	ORR SCHOLARSHIP FOR Losses for Tax on investment		81-0956628	3	Page 3
(a) List and describe t	he kard(s) of property sold (e.g., real estate, use, or common alock, 200 ehe MLC Co )		(b) How acquired P - Purchase D - Donation	(c) Dale sequired (mo , day, yr )	(d) Dale sold (mo , day, yr.)
1a N/A			2 - 23.2.3	<del>                                     </del>	<del> </del>
b					
С		***			
_d				<u> </u>	
е		<del> </del>	<u> </u>	<del> </del>	<u> </u>
(e) Grosa sales price	(f) Depreciation allowed (or allowable)		other basis nae of sale	1	n or (loss) f) minus (g)
а					
b					
c		·	<del></del>	ļ	
d				ļ	
e		40.04.0		ļ	
Complete only for assets showing ga					(h) gain minus
(I) F M V as of 12/31/69	(j) Adjusted basis es of 12/31/69		s of col (i) (i), if any		t less than -0-) or rom col. (h))
<u>a</u>			<del></del>	<del> </del>	
<u>b</u>	····			<del> </del>	
<u>c</u>	<del></del>			<del> </del>	
<u>d</u>		<del> </del>		<del> </del>	<del></del>
_e	Li nei ale antari	D-41 5 7 7	<del></del>	<del>                                     </del>	
2 Capital gain net income or (net capit	al loss)  If gain, also enter in  If (loss), enter -0- in			2	
3 Net short-term capital gain or (loss)					
If gain, also enter in Part I, line 8, co					
Part I, line 8	<u>,, </u>	<u>.</u>		3	
Page V Qualification Under	er Section 4940(e) for Reduc	ed Tax on Net	<u>Investment inc</u>	ome	
(For optional use by domestic private for	indations subject to the section 4940	l(a) tax on net invest	lment income.)		
If section 4940(d)(2) applies, leave this p	oart blank.				N/A
Was the foundation liable for the section			base period?		☐ Yes ☐ No
If "Yes," the foundation does not qualify	<u>``</u> `	<del></del>		<del></del>	
1 Enter the appropriate amount in each	h column for each year, see the instr	uctions before maki	ng any entries.	<del></del>	
Base belied years	(b) Adjusted qualifying distributions	Matuahy	(c) e of nonchaniable-use ess		(d) Iribution ratio
Calander year (or tex year beginning in)	Adjacas qualitying distributions	1167 78104	e ot touchantable dee ess	(col (b)	divided by cot. (c))
2014		<del></del>			
2013		<del></del>			
2012 2011	<del></del>	·			<del></del> _
2010	<del>-  </del>	<del></del> -	<del></del>	<del></del>	
2010				<del></del>	
2 Total of line 1, column (d)				2	
3 Average distribution ratio for the 5-ye	.    . ear base penod – divide the total on l			·· ··  - <del>-</del>	
_	been in existence if less than 5 years		•	3	
names, or pario are realization nee				·· ·   -	
4 Enter the net value of noncharitable	use assets for 2015 from Part X, line	e 5		4	
	,		/		
5 Multiply line 4 by line 3				5	
, , ,					
6 Enter 1% of net investment income	(1% of Part I, line 27b)	.,,,,,,,,,	i= -		
7 Add lines 5 and 6				. 7	
8 Enter qualifying distributions from P	art XII, line 4			8	
	ne 7, check the box in Part VI, line 1t	), and complete that	part using a 1% tax	rate. See the	
Part VI instructions.		<del></del>	<del></del>		- 990 DE

	990-FF (2015) JAMES D ORR SCHOLARSHIP FOUNDATION 81-0956628			_	Pa	age 4
<b>***</b> 5	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)	2000 NOOR   B	alono ore morale	in a m		*****
12	Exempt operating foundations described in section 4940(d)(2), check here  and enter *N/A* on line 1					ACQUIPMENT OF THE PROPERTY OF
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)					120100100000 120100100000000
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1	GERTON SENTENDARA	*******	zozotokon	~~
	here and enter 1% of Part I, line 27b					00000000 00000000000000000000000000000
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of					******
	Part I, line 12, col. (b).	. [				_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0
3	Add lines 1 and 2	3				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				<u> </u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	mv mvnanim v	×	*****	0
6	Credits/Payments.					
a	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 6a					
Ь	Exempt foreign organizations – tax withheld at source					
C	Tax paid with application for extension of time to file (Form 8868)  6c					
d	Backup withholding erroneously withheld					
7	Total credits and payments. Add lines 6a through 6d	7		~~~~~		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be. Credited to 2016 estimated tax  Refunded	11				
	Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Š		Yes	No
	participate or intervene in any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see		1	]	1	
	Instructions for the definition)?		L	<u>1b</u>		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					
	published or distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?		L	10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		8			
	(1) On the foundation. > \$ (2) On foundation managers. > \$	_	H			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			02.1020		200
	on foundation managers. > \$				*****	2939.2631) 93892330764 93892330764
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		L	2		X
	if "Yes," attach a detailed description of the activities					- H-40700400 - 10700 - 10700 - 10700 - 10700
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		į, į			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		L	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			48	[	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	1	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		L	5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.		21.82		****	
	By language in the governing instrument, or					200010000 0-00000000 0-00000000000000000
	By state legislation that effectively amends the governing instrument so that no mandatory directions that					000000 TOTAL 0100000 HOSE 010000 HOSE 00000 HOSE 00000 HOSE 00000 HOSE 0000
	conflict with the state law remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Pa	rt XV		7		X
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶  GA					
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation		ľ	8b	X	io-iceii
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	-	. [			
•	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"			**********	(356.955	CONTRACTOR OF THE PERSON
	complete Part XIV		}	9	I	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		·· ··		$\dashv$	_==
	names and addresses			10	I	x
	The state of the s		Fo	m 99	D-PF	

****	990-PF (2015) JAMES D ORR SCHOLARSHIP FOUNDATION 81-0956628		F	age 5
	Statements Regarding Activities (continued)	_		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	l	Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	ļ.,,	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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
	Website address N/A			
14	The books are in care of ► MOLLY SISSON  PO BOX 568  Telephone no ►			
	Located at ▶ STATESBORO GA ZIP+4 ▶ 3045	0.5	68	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in liau of Form 1041 – Check here			
	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	163	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of	2 000000		
	the foreign country			
	Statements Regarding Activities for Which Form 4720 May Be Required	Lange 100	Res Sees 7	<b>1222200</b>
***		1000 mg	V	Ma
4	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	38.99	Yes	No
1a	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?  Yes X No			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
		200		
				#00 00000 #00 00000
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	00000000000000000000000000000000000000	00°00000 00000000000000000000000000000	2000 (0000) 2000 (0000)
	the benefit or use of a disqualified person)?  (6) Asset to any asset to a representation of the control of the	30.000000 30.00000000000000000000000000	009300.40	
	(6) Agree to pay money or property to a government official? (Exception, Check "No" if the	20120000000000000000000000000000000000		
	foundation agreed to make a grant to or to employ the official for a period after			
L	termination of government service, if terminating within 90 days.)  Yes X No			
þ	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)?	600000	<b>********</b>	<b>****</b>
	and the second of the second o	1b	***	**************************************
_	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 1s, other than excepted acts, that	(),;;;(;),(;)	er Seite	<b>****</b>
	were not corrected before the first day of the tax year beginning in 2015?  N/A	1c		*******
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	***********		
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).	********		
ą	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?  Yes  No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
D	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
		****		
_		2b	*******	********
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	***************************************	22202	
	▶ 20 , 20 , 20 , 20	00000000		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
L	at any time during the year?  Wes X No			
þ	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the	2000000		
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	********		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	200000000		
	foundation had excess business holdings in 2015.)  N/A	3b		172
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	206 SUV-5	X
ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	0.000000	r:	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	I	X

Form 990-PF (2015)

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n may be m	equired (conti	nued)	
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to the transact	yans Highly		
	igers, riiginy	i did Linploye	,
n (see Instruct	ione)		
		(d) Contributions to	
) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expense account, other allowances
USTER			
1.00	0	0	0
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			L
ne 1 – see inst	tructions). If non	e, enter	
) Title, and average		(d) Contributions to	
hours per week	(c) Compensation		(e) Expense account, other allowances
devaled to position		compensation	
	exceptions de instructions)?  e tax  emiums  al benefit contro  transaction?  to the transact  lation Mana  n (see Instruct  lation bours per week  levoled to position  USTEE  L. 00	rivide, and average hours per week (c) Compensation (17tite, and average hours per week (c) Compensation (c) Compensation (Title, and average hours per week (c) Compensation (c) Compensati	riy on,

Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."	
. (a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
tal number of others receiving over \$50.000 for professional services	<b>&gt;</b>
Summary of Direct Charitable Activities	1
List the foundation's four largest direct charitable activities during the tex year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
2	
· · · · · · · · · · · · · · · · · · ·	
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 N/A	
2	
All other program-related investments. See Instructions.	
· · · · · · · · · · · · · · · · · · ·	
otal. Add lines 1 through 3	Form 990-PF

Form	990-PF (2015) JAMES D ORR SCHOLARSHIP FOUNDATION 81-0956628		Page <b>8</b>
	Minimum Investment Return (All domestic foundations must complete this part. Foreign	in tonn	dations,
<del></del>	, see instructions.)	10.000	
1,	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	4-	0
a	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	8483338	
ė	i I		
_	To (attach detailed explicit experiment)	2	0
2	Acquisition indebtedness applicable to line 1 assets	3	0
3	Subtract line 2 from line 1d  Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	-	
4			0
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	
<u> </u>	Minimum investment return. Enter 5% of line 5  Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	founda	tions
il es	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	iQui iQe	iii))ii\$
	and certain foreign organizations check here ▶ and do not complete this part.)	1	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2015 from Part VI, line 5		
Ь	Income tax for 2015. (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	·
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	1 1	_
	line 1	7	0
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	0
ь	Program-related investments – total from Part IX-B	16	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part 1, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
_	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	lation	· · · · · · · · · · · · · · · · · · ·
	qualifies for the section 4940(e) reduction of tax in those years		
			Form <b>990-PF</b> (2015)

<u>F</u> orm	990-PF (2015) JAMES D ORR SCHOLARSHI	P FOUNDATIO	N 81-09566	28	Page 9
₩.	<b>Undistributed Income</b> (see instructions	)			
		(a)	(b)	(c)	(d)
1,	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
_	line 7			2000 100 200 200 200 200 200 200 200 200	0
2	Undistributed income, if any, as of the end of 2015				
	Enter amount for 2014 only			640) ( 2000 ( Read ( 10) ( 2000 ( 10) ( 10) ( 10)	
, b	Total for prior years: 20, 20, 20		(x0x0() () (),(x0x0x0()()()()()()		
3	Excess distributions carryover, if any, to 2015. From 2010				A (1.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0
a					SA CONTRACTOR CONTRACT
-	From 2011				
ا ام	From 2013				
<u>.</u>	From 2014				
	Total of lines 3e through e	_XXXXXX disc discharge in come de le			
4	Qualifying distributions for 2015 from Part XII,	Name of the contract of the co		**************************************	
_	line 4: ▶ \$		CHANGE OF CONTRACTOR OF THE CO		
а	Applied to 2014, but not more than line 2a	SALO CO COLORANO ENTE DE LOS CALONOS DE LOS CALONOS DE LA	one source de la company de la		
	Applied to undistributed income of prior years	***************************************			
	(Election required see instructions)	***************************************			
C	Treated as distributions out of corpus (Election				
	required – see instructions)				
d	Applied to 2015 distributable amount				
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2015				**
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))	( 10 ( 0 ( 0 ( 0 ( 0 ( 0 ( 0 ( 0 ( 0 ( 0			
6	Enter the net total of each column as	100 000 0 0000000 00000000000000000000	00000000000000000000000000000000000000	0.000.00000000000000000000000000000000	
	indicated below:	00000 00000000000000000000000000000000			
	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
þ	Prior years' undistributed income. Subtract				
	line 4b from line 2b				Constitution of the consti
¢	Enter the amount of prior years' undistributed		3		>>====================================
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)			TO COLO (16 (86)) COCCEDENT MECHANISM TO COCCEDENT (16 MACHANISM) COCCEDENT TO COCCEDENT (16 M	
	tax has been previously assessed	9:19, 9 y to control to exemple 1 to	<u> </u>	000,0000 (0000000,000000000000000000000	
•	Subtract line 6c from line 6b. Taxable	STREET TO STREET			
_	amount - see instructions Undistributed income for 2014 Subtract line	PRODUCTURE TO STATE OF THE STAT			
e	4a from line 2a. Taxable amount see				
	instructions				20 00 00 00 00 00 00 00 00 00 00 00 00 0
f	Undistributed income for 2015. Subtract lines				du nomeno arronno argo (a juano
•	4d and 5 from line 1. This amount must be				
	distributed in 2016				0
7	Amounts treated as distributions out of corpus	TOTAL OF THE SECOND SEC	**************************************	Decrees and the control of the contr	
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2010 not				
	applied on line 5 or line 7 (see instructions)		\$1.000 00 00000000000 000000000000000000	0000 00 67 65 500 00 00 00 00 00 00 00 00 00 00 00 0	
8	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9.				97 77 CBC 97 CBC
a-	Excess from 2011		7 (2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	5 (a) (b) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a	
ь	Excess from 2012		200 CO		
c	Excess from 2013				
d	Excess from 2014				on the common reconstruction and the second control of the second
_ e	Excess from 2015				

Form 990-PF (2015)

Any submission deadlines

N/A

factors: N/A

The form in which applications should be submitted and information and materials they should include: ....

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

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81-0956628

Form 9903PF (2015) JAMES D ORR SCHOLARSHIP FOUNDATION Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or show any relationship to Amount any foundation manager or substantial contributor contribution recipient Name and address (home or business) a Paid dunng the year N/A ▶ 3a Total Approved for future payment N/A Total ▶ 3b

nter gross am	ter gross amounts unless otherwise indicated.		ed business income	Exclude	d by section 512, 513, or 514	-
	rvice revenue:	(e) Business code	(b) Amount	(c) Exclusion code	(d) Amoun(	(e) Related or exempt function income (See instructions )
a						
		<del></del>				
					<del></del>	
_				+		
f		<del> </del>		+		
	nd contracts from government agencies			<del></del>	<u> </u>	
'	dues and assessments			-	· · · · · · · · · · · · · · · · · · ·	
	savings and temporary cash investments			┼		
	and interest from securities	500 200 X A00 X A	**************************************		ANN AND AND AND AND AND AND AND AND AND	~~~~~~~
	ncome or (loss) from real estate. nanced property					
	nt-financed property			1		
Net rental is	ncome or (loss) from personal property					
		<del></del>		+		<del> </del>
	s) from sales of assets other than inventory	<del></del>		+		
Net income	or (loss) from special events		<u></u>	<del> </del>		
-	t or (loss) from sales of inventory			+		
Other rever	nue: a			-		
ь				_		
c		•				
θ						
Subtotal A	dd columns (b), (d), and (e)	1000 0 0 100000 00000 0.0000 0.0 0.0 0.0 00 0.0000 0.0 0 0.0 0.	(		0	
Total. Add	line 12, columns (b), (d), and (e)				13	
ee workshee	t in line 13 instructions to verify calculations.)				· · · · · · -	
RATE XVEE	600 Palatianakin of Anthritian to the A		and of Francisco C			
	Relationship of Activities to the Activities	compliann	ient of Exempt F	urpose	98	
Line No.	Explain below how each activity for which income	is reported in o	column (e) of Part XV	I-A contril	outed importantly to the	
▼		is reported in o	column (e) of Part XV	I-A contril	outed importantly to the	
	Explain below how each activity for which income	is reported in o	column (e) of Part XV	I-A contril	outed importantly to the	
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▼	Explain below how each activity for which income	is reported in o	column (e) of Part XV	I-A contril	outed importantly to the	
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		5) JAMES D C Information Rega						h Noncharitab		2age 13
		Exempt Organiza	ations	<del></del>			<del></del>		1888 V-	
	in section 50 organization		er than sectio	n 501(c)(3) organı	zations) or in sectio				Ye	s No
а	Transfers fro (1) Cash	om the reporting found	lation to a no	ncharitable exemp	t organization of:				1a(1)	X
_	(2) Other as				.,,,,,	, ,			1a(2)	X
D	Other transa (1) Sales of	fassets to a noncharite	able exempt	organization					1b(1)	X
		es of assets from a no of facilities, equipment,							1b(2) 1b(3)	X
		rsement arrangements							1b(4)	X
		r loan guarantees							15(5) 15(6)	X
C		ance of services or mo acilities, equipment, m							1c	X
d		r to any of the above i								
		goods, other assets, or transaction or sharing								
	(a) Line no	(b) Amount involved	(c) N#ms	of nonchantable exemp	ol organization	(d) Description	of transfers, tra	nsections, and sharing a	rrangements	
N/	A	 								
						******		· · · · · · · · · · · · · · · · · · ·		
							<del></del>	·····	<del></del>	
			<u> </u>			···		<del></del>		
									•	
					[					
			<del> </del>				<del></del>			
	Is the found	 lation directly or indire	ctly affiliated	with, or related to.	one or more tax-ex	empt organizations	3			
	described in	n section 501(c) of the mplete the following sc	Code (other						Yes	X No
		a) Name of organization		(b) Type of c	organization		(c) Descript	non of relationship		
	N/A								<del> </del>	
					-					
	Under pe	naities of perjury, I declare to and complete Declaration of	hat I have exami	ned this return, including	ig accompanying schedu	les and statements, and chippenster has any kno	to the best of r	ny knowledge and belie	f, it is true.	
Sig Hei	n	Byrovus	Trust	Compan		20/16		May the IRS dis with the preper (see instruction	er shown below	1
	91~	INTERIOR OF OFFICE OF THE STATE	NOON	<u> </u>	Date	10	TRUS	TEE		
	<del>- '                                    </del>	Abe bisbalar, a usus	-		Preparer's signature	-		Dete	C	eck X F
Paid	·	-	-			人口	<i>J</i> 11.	PL CEA 11/1	se	If-employed
	parer EDW1	N G. HILL	S, HIC	KMAN, HIL	EDWIN G. H	<del></del>	7 4. 13		07444	80
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