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Department of the Treasury

Internal Revenue Service

#### DLN: 93491193006176

Inspection

OMB No 1545-0052

Open to Public

### **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.

▶ Information about Form 990-PF and its instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

, and ending 05-31-2016 For calendar year 2015, or tax year beginning 06-01-2015 A Employer identification number Name of foundation EDGAR & NONA MCKINNEY CHARITABLE TR C/O SUNTRUST BANK 59-7001925 BTelephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) 200 S ORANGE AVE SOAB-10 (407) 237-4485 **C** If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code ORLANDO, FL 32801 G Check all that apply Initial return Initial return of a former public charity **D 1.** Foreign organizations, check here Final return Amended return  $\textbf{2.} \ \ \text{Foreign organizations meeting the } 85\%$ Name change Address change test, check here and attach computation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation **J**Accounting method IFair market value of all assets at end If the foundation is in a 60-month termination Cother (specify) under section 507(b)(1)(B), check here of year (from Part II, col. (c), (Part I, column (d) must be on cash basis.) line 16) ►\$ 1,396,717 Part I **Analysis of Revenue and Expenses** Disbursements Revenue and Net investment Adjusted net for charitable (The total of amounts in columns (b), (c), and (d) may not expenses per necessarily equal the amounts in column (a) (see (b) (c) purposes ıncome ıncome books (d) (cash basis only) instructions)) Contributions, gifts, grants, etc , received (attach 1 2 Check F 🔽 if the foundation is **not** required to attach . . . . . . . . . . . . . . . 3 Interest on savings and temporary cash investments 27,401 27.401 Dividends and interest from securities Gross rents . . . . . . . . . . . . 5a Net rental income or (loss) b Net gain or (loss) from sale of assets not on line 10 -16,270 6a Revenue b Gross sales price for all assets on line 6a 546,193 Capital gain net income (from Part IV, line 2) . . . Net short-term capital gain . . . 8 Income modifications . . . 10a Gross sales less returns and allowances Less Cost of goods sold . . . . b Gross profit or (loss) (attach schedule) . . . . . c 11 Other income (attach schedule) . . . . Total.Add lines 1 through 11 11,131 27,401 11,441 2,860 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits . . Expenses Legal fees (attach schedule). . . . . 16a 夗 2,506 501 Accounting fees (attach schedule). . . . b Other professional fees (attach schedule) . 忉 4,000 4,000 C Operating and Administrative **17** 1 655 65! 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . 20 Occupancy . . . . . . . 21 Travel, conferences, and meetings. 22 Printing and publications . . 囫 4.701 23 Other expenses (attach schedule). 24 Total operating and administrative expenses. Add lines 13 through 23 . . . . 26.163 14.101 7.361 88,286 25 Contributions, gifts, grants paid . . . . . . 88,286 26 Total expenses and disbursements. Add lines 24 and 114,449 14,101 95,647 25 27 Subtract line 26 from line 12 -103,318 Excess of revenue over expenses and disbursements a 13,300 Net investment income (if negative, enter -0-) Adjusted net income(if negative, enter -0-)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		f year
		should be for end-or-year amounts only (see instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	04.000	25 264	25.261
	2	Savings and temporary cash investments	94,988	35,261	35,261
	3	Accounts receivable			
		Less allowance for doubtful accounts -			
	4	Pledges receivable			
		Less allowance for doubtful accounts -			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts -			
22	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			_
As	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			1,157,073
	С	Investments—corporate bonds (attach schedule)	192,032	211,067	204,383
	11	Investments—land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) 🟲			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) ▶			
	15	O ther assets (describe 🟲)			
	16	<b>Total assets</b> (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	1,505,375	1,402,057	1,396,717
	17	Accounts payable and accrued expenses			
	18	Grants payable			
bilities	19	Deferred revenue			
틓	20	Loans from officers, directors, trustees, and other disqualified persons			
Liat	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)		0	
ر اکن		Foundations that follow SFAS 117, check here 🕨 🦵			
ð		and complete lines 24 through 26 and lines 30 and 31.			
<u>a</u>	24	Unrestricted			
Ba	25	Temporarily restricted			
Fund Balance	26	Permanently restricted			
Ē		Foundations that do not follow SFAS 117, check here 🕨 🔽			
5		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	1,505,375	1,402,057	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
Š	30	Total net assets or fund balances(see instructions)	1,505,375	1,402,057	
_	31	<b>Total liabilities and net assets/fund balances</b> (see instructions)	1,505,375	1,402,057	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must ag	ree	
		with end-of-year figure reported on prior year's return) $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		1	1,505,375
2		Enter amount from Part I, line 27a	2	-103,318	
3		Other increases not included in line 2 (itemize)		3	
4		Add lines 1, 2, and 3		4	1,402,057
5		Decreases not included in line 2 (itemize) ▶		_ 5	
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), lır	ne 30 <b>. 6</b>	1,402,057

		ne kınd(s) of property sold (e g , re ouse, or common stock, 200 shs	How acquired P—Purchase (b) D—Donation	ן ט	ate acquired no , day, yr )	Date sold (d) (mo , day, yr )	
1 a	SUNTRUST BANK ACC	COUNT 5602436		Р			
	SUNTRUST BANK ACC	COUNT 5602436		Р			
d							
<u>е</u>		D			1		(1 )
(€	e) Gross sales price	Deprectation allowe <b>(f)</b> (or allowable)		or other basıs expense of sale			n or (loss) (f) minus (g)
	111	,869	(9) p. a.s.	126,84	8	(11) (0) p.u.o	-14,979
		7,757		435,61			-34,858
	100	,,, 3.		133,01	+		31,000
<u>c</u>							
d							
e							
Co	emplete only for assets sh	owing gain in column (h) and owne			4		(h) gain minus
(i)	FM V as of 12/31/69	<del>-</del>	Adjusted basis Exces				ot less than -0-) <b>or</b> (from col (h))
		<b>(j)</b> as of 12/31/69	(K) OVE	col (j), if any	(1)	203303	-14,979
a					+		
<u> </u>					+		-34,858
c							
d							
e							
3		gain or (loss) { gain or (loss) as defined in sectio int I, line 8, column (c) (see instru		in Part I, line 7	3		-16,270
Part	V Qualification Ur	nder Section 4940(e) for R	educed Tax on	Net Investme	nt In	come	
	tional use by domestic pri on 4940(d)(2) applies, lea	vate foundations subject to the se ave this part blank	ection 4940(a) tax	on net investment	ıncom	e )	
		section 4942 tax on the distributa qualify under section 4940(e) Do			erıod?		┌ Yes ┌ No
<b>1</b> E n	ter the appropriate amour	nt ın each column for each year, s	ee instructions befo	ore making any ent	ries		
	(a) e period years Calendar or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of nonchar	ritable-use assets		<b>(d)</b> Distributio (col (b) divideo	n ratio
	2014	50,693		1,543,134			0 032851
	2013	96,969		1,552,018			0 062479
	2012	88,186		1,483,787			0 059433
	2011	90,560		1,455,469			0 062220
	2010	70,896		1,473,522			0 048113
2	<b>Total</b> of line 1, column (	d)			2		0 265096
3	the number of years the	tio for the 5-year base period—div e foundation has been in existence	e ıf less than 5 yeaı	rs L	3		0 053019
4	Enter the net value of r	oncharitable-use assets for 2015	from Part X, line 5		4		1,408,132
5	Multiply line 4 by line 3	3		[	5		74,658
6	Enter 1% of net invest	ment income (1% of Part I, line 2	7b)		6		133
7	Add lines 5 and 6				7		74,791

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See

the Part VI instructions

95,647

8

Pai	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 49	940(e),	or 4948—see pag	e 18 of	the inst	ructio	ns)			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	٠	Ì							
	Date of ruling or determination letter		Į							
	(attach copy of letter if necessary-see instructions)		ĺ							
b		check	J	1		13:				
	here ▶ 🔽 and enter 1% of Part I, line 27b		'							
C	All other domestic foundations enter 2% of line 27b Exempt foreign organiza Part I, line 12, col (b)	itions e	enter 4% of							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foun enter $-0-$ )	dation	s only Others	2						
3	Add lines 1 and 2			3				133		
4	Subtitle A (income) tax (domestic section $4947(a)(1)$ trusts and taxable four enter -0-)	ndation	s only Others	4						
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, en	nter -0		5				133		
6	Credits/Payments									
а	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	2,758							
b	Exempt foreign organizations—tax withheld at source	6b								
С	Tax paid with application for extension of time to file (Form 8868)	6с								
d	Backup withholding erroneously withheld	6d								
7	Total credits and payments Add lines 6a through 6d			7			7	2,758		
8	Enter any <b>penalty</b> for underpayment of estimated tax Check here $\  \  \  \  \  \  \  \  \  \  \  \  \ $	220 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	t overp	oaid 🟲	10				2,625		
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	133	Refunded 🕨	11				2,492		
Par	t VII-A Statements Regarding Activities									
1a	During the tax year, did the foundation attempt to influence any national, state	, or loc	al legislation or d	ıd			Yes	No		
	it participate or intervene in any political campaign?					1a		No		
b	Did it spend more than \$100 during the year (either directly or indirectly) for p									
	for definition)?				•	1b		No		
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities	and co	pies of any materi	als						
	published or distributed by the foundation in connection with the activities.									
	Did the foundation file Form 1120-POL for this year?	• •			•	1c		No		
d	Enter the amount (if any) of tax on political expenditures (section 4955) impos		· ·							
	(1) On the foundation  \$ (2) On foundation managers									
е	Enter the reimbursement (if any) paid by the foundation during the year for poli	ticale	xpenditure tax im	posed						
_	on foundation managers 🕨 \$		IDC2							
2	Has the foundation engaged in any activities that have not previously been rep	ortea	to the IKS?			2				
_	If "Yes," attach a detailed description of the activities.									
3	Has the foundation made any changes, not previously reported to the IRS, in it	_	-		5	3		No		
4-	of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a confo</i> Did the foundation have unrelated business gross income of \$1,000 or more di					4a	$\vdash$	No No		
4a b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	_				4b		140		
5	Was there a liquidation, termination, dissolution, or substantial contraction dui					<b>-</b>		No		
•	If "Yes," attach the statement required by General Instruction T.	ing the	syear	•				NO		
6	Are the requirements of section 508(e) (relating to sections 4941 through 494	45) sat	tisfied either							
•	By language in the governing instrument, or	13,34	cisiica ciciici							
	By state legislation that effectively amends the governing instrument so the	at no m	nandatory directio	ns						
	that conflict with the state law remain in the governing instrument?					6	Yes			
7	Did the foundation have at least \$5,000 in assets at any time during the year?									
	and Part XV.				•	7	Yes			
8a	Enter the states to which the foundation reports or with which it is registered (s	see ins	tructions)							
	▶FL									
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	0-PF1	to the Attorney							
	General (or designate) of each state as required by General Instruction G? If '	"No," at	tach explanation .			8b	Yes			
9	Is the foundation claiming status as a private operating foundation within the n	neanın	g of section 4942	(3)(3)						
	or $4942(j)(5)$ for calendar year 2015 or the taxable year beginning in 2015 (see	ee ınst	ructions for Part	XIV)?						
	If "Yes," complete Part XIV					9		No		
10	Did any persons become substantial contributors during the tax year? If "Yes,"	" attach	a schedule listing	their na	ames					
	and addresses.					10		No		

Par	Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►GUIDESTAR ORG	,		
14	The books are in care of ►SUNTRUST BANK  Telephone no ►(407)	1237	-4485	
	Located at ▶200 S ORANGE AVE SOAB-10 ORLANDO FL ZIP +4 ▶32801	,		
4-				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —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 over		Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial			
	Accounts (FBAR) If "Yes", enter the name of the foreign country ▶			
Par	t 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
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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)? $ extstyle  ex$			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf 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 ) <b>Yes</b> 🔽 <b>No</b>			
b	If any answer is "Yes" to $1a(1)$ – $(6)$ , did <b>any</b> 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		
	Organizations relying on a current notice regarding disaster assistance check here			
С	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		
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))			
а	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?			
	If "Yes," list the years > 20, 20, 20			
Ь	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
_	▶ 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	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 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	o.L		
4-	If the foundation had excess business holdings in 2015.)	3b	1	<b>B</b> 1 -
4a L	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
Ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	41		١.,
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	1	No

Pai	t VIII-B Staten	nents Rega	rdir	ng Activities for	Wh	ich Form 4720	Мау	Be Required	(Cont	inue	d)	
5a	During the year did	the foundation	рау	or incurany amoun	t to							
	(1) Carry on propag	janda, or other	wise	attempt to influence	e leg	ıslatıon (section 494	45(e	)) <sup>?</sup>	Yes 🗸	No		
	(2) Influence the ou	itcome of any	spec	ific public election (	see	section 4955), or to	carr	у				
								<u> </u>	Yes 🔽	No		
				travel, study, or oth					Yes 🔽			
						etc , organization de	scrib		,			
									Yes V	No.		
				religious, charitable			•	,	,	110		
						ıldren or anımals?.		_	Yes 🔽	- No		
h	If any answer is "Ye							•	•	140		
									5b	$\top$		
						lisaster assistance (			_	_	שכ	
		_				sistance check here			=			
С	If the answer is "Ye							_	–	<del>-</del>		
						ant?	•		Yes	No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).												
6a	Did the foundation,									_		
	a personal benefit contract?											
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?											6b	No
If "Yes" to 6b, file Form 8870.												
7a	At any time during t	the tax year, w	as th	ne foundation a party	/ to a	prohibited tax shel	ter tr	ansaction?	Yes 🔽	No		
b	If yes, did the found	lation receive	any	proceeds or have an	y net	t income attributable	e to t	he transaction? .			7b	
	Informa	ation About	: Of	icers, Directors	, Tr	ustees, Founda	tior	n Managers, F	lighly	Paid	Employ	ees,
Pal	t VIII and Cor	ntractors										
1	List all officers, dire	ctors, trustees	s, fol	ındation managers a	nd t	heir compensation (	see ii					
			Title, and average		(c)	(c) Compensation(If		(d) Contributions to			xpense a	ccount
	(a) Name and ad	dress		hours per week		not paid, enter		employee benefit plans			other allow	
			(b)	devoted to position				deferred compen	1 ' '			
SUNT	RUST BANK		TRU	STEE		14,301		0				0
	S ORANGE AVE SO	AB-10	3 00	)								
	ANDO,FL 32801											
2	Compensation of five	e highest-paid	emp	loyees (other than t	those	e included on line 1—	-see	-		ter "l	NONE."	
	(a)			Title, and aver	age			Contributio employee b		_	Expense a	ccount
Nar	ne and address of ea		aıd			(c) Compensatio	n	plans and de			•	•
	more than \$5	0,000		( <b>b</b> ) devoted to posi	tion			(d) compensa		` ,		
NON	E											
T-4-	I number of other one	nlavage naid a		FO 000					_			

Part VIII Information About Officers, Directors, Trust and Contractors (continued)	tees, Foundation Managers, Hi	ghly Paid Employees,
3 Five highest-paid independent contractors for professional services	(see instructions). If none, enter "NON	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		<b>•</b>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include re organizations and other beneficiaries served, conferences convened, research papers pro		er of Expenses
1		
2		
3		
4		
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	A mount
<b>1</b> N/A		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		▶

#### Part X Minimum Investment Return

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	1,390,842
b	A verage of monthly cash balances	1b	38,734
c	Fair market value of all other assets (see instructions)	1c	0
d	<b>Total</b> (add lines 1a, b, and c)	1d	1,429,576
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	A cquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,429,576
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	21,444
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,408,132
6	Minimum investment return. Enter 5% of line 5	6	70,407
Pai	t XI  Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer check here ► □ and do not complete this part.)	taın fo	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	70,407
2a	Tax on investment income for 2015 from Part VI, line 5   2a   133		
b	Income tax for 2015 (This does not include the tax from Part VI ) 2b		
С	Add lines 2a and 2b	2c	133
3	Distributable amount before adjustments Subtract line 2c from line 1	3	70,274
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	70,274
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	70,274
Par	t 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	95,647
ь	Program-related investments—total from Part IX-B	1b	
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	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	95,647
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		<u> </u>
	income Enter 1% of Part I, line 27b (see instructions)	5	133
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	95,514
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the f	

Р	art XIII Undistributed Income (see	ınstruct	ions)			
			(a)	(b)	(c)	(d)
			Corpus	Years prior to 2014	2014	2015
	Distributable amount for 2015 from Part XI, line					70,274
2	Undistributed income, if any, as of the end of 20					
а	,					
b	Total for prior years 20, 20, 20					
3	Excess distributions carryover, if any, to 2015					
a	From 2010					
b	From 2011	12.074				
		12,974 20,996				
		20,996				
	From 2014		33,970			
	<b>Total</b> of lines 3a through e	•	33,370			
4	Qualifying distributions for 2015 from Part XII, line 4 🕨 \$ 95,647					
-	Applied to 2014, but not more than line 2a					
	Applied to undistributed income of prior years					
	(Election required—see instructions)					
С	Treated as distributions out of corpus (Election required—see instructions)					
d	Applied to 2015 distributable amount					70,274
е	Remaining amount distributed out of corpus		25,373			
5	Excess distributions carryover applied to 2015	,				
	(If an amount appears in column (d), the same amount must be shown in column (a).)					
6	Enter the net total of each column as					
-	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	5	59,343			
b	Prior years' undistributed income Subtract					
	line 4b from line 2b		-			
C	Enter the amount of prior years' undistributed					
	income for which a notice of deficiency has been issued, or on which the section 4942(a)					
	tax has been previously assessed					
d	Subtract line 6c from line 6b Taxable amount					
	—see instructions					
е	Undistributed income for 2014 Subtract line					
	4a from line 2a Taxable amount—see instructions					
f	Undistributed income for 2016 Subtract	•				
•	lines 4d and 5 from line 1 This amount must					
	be distributed in 2015	🔣				0
7	Amounts treated as distributions out of					
	corpus to satisfy requirements imposed by					
	section $170(b)(1)(F)$ or $4942(g)(3)$ (Election make required - see instructions)					
8	Excess distributions carryover from 2010 not	•				
Ū	applied on line 5 or line 7 (see instructions).					
9	Excess distributions carryover to 2016.					
	Subtract lines 7 and 8 from line 6a	<u>                                   </u>	59,343			
	Analysis of line 9					
	Excess from 2011	12.074				
		12,974				
	Excess nom 2019	20,996				
d		25,373				
e	Excess from 2015					

Ρ	a	a	e	1	(

1a	If the foundation has received a ruling or determ foundation, and the ruling is effective for 2015,					
b	Check box to indicate whether the organization	is a private operat	ing foundation des	scribed in section	Г 4942(j)(3) or	
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	Income from Part I or the minimum Investment return from Part X for each year listed	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) local
<b>b</b> 8	35% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					
d	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 investment return shown in Part X, line 6 for each year listed					
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(III)					
	(3) Largest amount of support					
	from an exempt organization					
Da	(4) Gross investment income  rt XV Supplementary Information (C	omplete this	 	o organization	had \$5 000 or	r moro in
Fa	assets at any time during the			e organization	1 11au \$3,000 01	i iliore ili
1	Information Regarding Foundation Managers:		_			
а	List any managers of the foundation who have co					ation
	before the close of any tax year (but only if they	have contributed	more than \$5,000	)) (See section 50	)/(d)(2))	
	NONE					
	List any managers of the foundation who own 10	% or more of the s	stock of a corporat	tion (or an equally	large portion of the	2
	ownership of a partnership or other entity) of wh	ich the foundation	has a 10% or gre	ater interest	- ,	
	NONE					
2	Information Regarding Contribution, Grant, Gift	, Loan, Scholarshi	p, etc., Programs:			
	Check here 🔭 If the foundation only makes co	ntributions to pres	selected charitable	e organizations and	d does not accept	
	unsolicited requests for funds If the foundation	makes gifts, grant	ts, etc (see ınstru	ictions) to individu	als or organization	s under
	other conditions, complete items 2a, b, c, and d					
a	The name, address, and telephone number or e- MELANIE CIANCIOTTO SUNTRUST BANK 200 S ORANGE AVE SOAB-10 ORLANDO,FL 32801 (407) 237-4485	mail address of th	ne person to whom	applications shou	ld be addressed	
b	The form in which applications should be submit GUIDELINES AND APPLICATIONS ATTACHE		on and materials t	hey should include		
		ט				
	Any submission deadlines  NO DEADLINE FOR GRANT APPLICATIONS	SCHOLARSHIP A	APPLICATION DE	ADLINE IS MARC	CH 31	
d	Any restrictions or limitations on awards, such factors	as by geographica	al areas, charitable	e fields, kinds of in	stitutions, or other	

NO RESTRICTIONS TO KINDS OF INSTITUTIONS AS LONG AS INSTITUTION QUALIFIES AS TAX EXEMPT ORGANIZATION SCHOLARSHIP APPLICANTS ARE LIMITED TO LAKE COUNTY FLORIDA HIGH SCHOOL STUDENTS ONLY

Form **990-PF** (2015)

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 88,286 **b** Approved for future payment

Form 990-PF (2015)  Part XVI-A Analysis of Income-Produc	ing Activitie	:S			Page <b>1</b> 2	
Enter gross amounts unless otherwise indicated	Unrelated bu	usiness income	Excluded by section	<b>(e)</b> Related or exemp		
1 Program service revenue	(a) Business code	<b>(b)</b> A mount	(c) Exclusion code	(d) A mount	function income (See instructions )	
a b						
c						
e						
fg Fees and contracts from government agencies						
2 Membership dues and assessments						
Dividends and interest from securities 5 Net rental income or (loss) from real estate			14	27,401		
a Debt-financed property b Not debt-financed property						
Net rental income or (loss) from personal property						
Other investment income			10	16 270		
Net income or (loss) from special events Gross profit or (loss) from sales of inventory			18	-16,270		
Other revenue a						
b						
d						
2 Subtotal Add columns (b), (d), and (e)				11,131		
3 Total.Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify	calculations )			13	11,131	
Explain below how each activity for whith the accomplishment of the foundation's instructions )	ıch ıncome ıs re	ported ın column (	(e) of Part XVI-A c	ontributed importa		
mscraecions y						

Par	t XVI		Information Re Noncharitable					sactio	ns and I	Relationships	With			
		organ	ization directly or ii c) of the Code (othe	ndırectly (	engage	ın any of t	the following w						Yes	No
	ganıza	•				( )( )	,		,	J .				
a Tı	- ansfer	rs fror	n the reporting four	ndation to	a nonc	harıtable e	exempt organiz	zatıon of						
(1	L) Cas	sh										1a(1)		No
(2	2) Oth	neras	sets									1a(2)		No
-	, ther tr													
			assets to a noncha	rıtable ex	empt or	rganizatioi	n					1b(1)		No
			s of assets from a									1b(2)		No
			facilities, equipme											No
			ement arrangemer									1b(4)		No
			loan guarantees.									1b(5)		No
			ce of services or m									1b(5)		No
												1c		No
	_		ilities, equipment, i to any of the above	_										140
	any tr	ansad	other assets, or section or sharing arro	angement	, show	ın column		of the go	ods, other		es receive	ed		nts
de	scribe	ed in s ' com	cion directly or indi section 501(c) of the plete the following s a) Name of organization	ne Code (d schedule		an sectioi		r ın sectı			• • • • • • • • • • • • • • • • • • •		:s  ✓	No
									-					
Sigr Her	the inf	e best format ***		ind belief, er has an	ıt ıs tru	ıe, correct	2016-06-30	e Declar	*****		n taxpaye May t return	r) is bas he IRS di he prepa	sed on	all
		⊃ign —	ature of officer or t				Date		Title		(see ı	nstr )?	Yes I	lo
			nt/Type preparer's LFRED C HALIDA		Prepa	rer's Sıgn	ature	Date 201	5-06-28	Check if self- employed ▶	PTIN	012588	312	
Use	pare	r HA	m's name ► LIDAY BAIR & HU m's address ►	Х РА	•			•		Firm's EIN ▶ 59-1874580				
Only	/	Firm's address • 400 WEBSTER STREET LEESBURG, FL 34748 Phone no (352)787-344									15			

# Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

			the real of Approved for i	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
FLORIDA STATE UNIVERSITY A1500 UNIVERSITY CENTER TALLAHASSEE,FL 32306	NONE	509(A)(1)	SCHOLARSHIP FBO P NANTHAKIJJAR	1,500
FLORIDA STATE UNIVERSITY A1500 UNIVERSITY CENTER TALLAHASSEE,FL 32306	NONE	509(A)(1)	SCHOLARSHIP FBO S GREEN	3,000
FLORIDA STATE UNIVERSITY A1500 UNIVERSITY CENTER TALLAHASSEE,FL 32306	NONE	509(A)(1)	SCHOLARSHIP PER A SUNSERI	2,250
UNIVERSTIY OF ALABAMA THE UNIVERSITY OF ALABAMA TUSCALOOSA,AL 35487	NONE	509(A)(1)	SCHOLARSHIP FBO M TORMAN	1,000
UNIVERSITY OF FLORIDA UNIVERSITY OF FLORIDA GAINESVILLE,FL 32611	NONE	509(A)(1)	SCHOLARSHIP FBO S GOUDREAU	4,500
UNIVERSITY OF CENTRAL FL 4000 CENTRAL FLORIDA BLVD ORLANDO,FL 32816	NONE	509(A)(1)	SCHOLARSHIP FBO B JOHNS	3,000
UNIVERSITY OF FLORIDA UNIVERSITY OF FLORIDA GAINESVILLE,FL 32611	NONE	509(A)(1)	SCHOLARSHIP PER B PHILLIPS	1,500
UNIVERSITY OF FLORIDA UNIVERSITY OF FLORIDA GAINESVILLE,FL 32611	NONE	509(A)(1)	SCHOLARSHIP FBO A TSIRNIKAS	1,500
UNIVERSITY OF VIRGINIA 1721 UNIVERSITY AVE CHARLOTTESVILLE,VA 22903	NONE	509(A)(1)	SCHOLARSHIP FBO G SLIGH	2,000
FLORIDA ATLANTIC UNIVERSITY 777 GLADES ROAD BOCA RATON,FL 33431	NONE	509(A)(1)	SCHOLARSHIP FBO B VAUGHAN	1,500
FLORIDA GULF COAST UNIVERSITY 10501 FGCU BLVD SOUTH FORT MYERS,FL 339656565	NONE	509(A)(1)	SCHOLARSHIP FBO H WARD	2,500
UNIVERSITY OF FLORIDA UNIVERSITY OF FLORIDA GAINESVILLE,FL 32611	NONE	509(A)(1)	SCHOLARSHIP FBO A SUMMERLIN	2,500
UNIVERSITY OF SOUTH FLORIDA 4202 E FOWLER AVE SVC 11 TAMPA,FL 33620	NONE	509(A)(1)	SCHOLARSHIP FBO J COUTURE	500
LAKE SUMTER STATE COLLEGE 9501 US-441 LEESBURG,FL 34788	NONE	509(A)(1)	SCHOLARSHIP PER M VOIGHT	1,500
LAKE SUMTER STATE COLLEGE 9501 US-441 LEESBURG,FL 34788	NONE	509(A)(1)	SCHOLARSHIP PER B VAUGHAN	750
Total				88,286

# Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
UNIVERSITY OF FLORIDA UNIVERSITY OF FLORIDA GAINESVILLE,FL 32611	NONE	509(A)(1)	SCHOLARSHIP FBO A BLAZEK	2,250
LAKE SUMTER STATE COLLEGE 9501 US-441 LEESBURG,FL 34788	NONE	509(A)(1)	SCHOLARSHIP PER C JENKINS	1,500
UNIVERSITY OF FLORIDA UNIVERSITY OF FLORIDA GAINESVILLE,FL 32611	NONE	509(A)(1)	SCHOLARSHIP FBO R PATEL	1,500
VALENCIA COMMUNITY COLLEGE 190 S ORANGE AVE ORLANDO,FL 32801	NONE	509(A)(1)	SCHOLARSHIP K GARNER	750
THE ARC SUNRISE OF CENTRAL FLORIDA 35201 RADIO RD LEESBURG,FL 34788	NONE	501(C)(3)	MEDICAL ASSISTANCE FOR DISABLED	5,000
SCARC INC 213 W MCCOLLUM AVE BUSHNELL,FL 33513	NONE	501(C)(3)	ADULT BASIC EDUCATION	7,786
CHRISTIAN CARE CENTER 115 N 13TH ST LEESBURG,FL 34748	NONE	501(C)(3)	BENEVOLENCE CENTER & CARE CENTER	10,000
CHRISTIAN HOME & BIBLE SCHOOL 2235 W OLD US HWY 441 MT DORA,FL 32757	NONE	501(C)(3)	EDUCATIONAL PURPOSES	10,000
LIBERTY COUNSEL INC PO BOX 540774 ORLANDO,FL 32854	NONE	501(C)(3)	RELIGIOUS EDUCATION	20,000
Total			▶ 3a	88,286

## **TY 2015 Accounting Fees Schedule**

Name: EDGAR & NONA MCKINNEY CHARITABLE TR

C/O SUNTRUST BANK

Cate	egory	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREPAR	ATION FEE	2,506	2,005		501

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491193006176

# **TY 2015 Investments Corporate Bonds Schedule**

Name: EDGAR & NONA MCKINNEY CHARITABLE TR

C/O SUNTRUST BANK

Name of Bond	End of Year Book Value	End of Year Fair Market Value
SUNTRUST ACCOUNT 5602436	211,067	204,383

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491193006176

# **TY 2015 Investments Corporate Stock Schedule**

Name: EDGAR & NONA MCKINNEY CHARITABLE TR

C/O SUNTRUST BANK

Name of Stock	End of Year Book Value	End of Year Fair Market Value
SUNTRUST ACCOUNT 5602436	1,155,729	1,157,073

# **TY 2015 Other Expenses Schedule**

Name: EDGAR & NONA MCKINNEY CHARITABLE TR

C/O SUNTRUST BANK

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
FEDERAL ESTIMATED TAX PAYMENT	2,758			
FEDERAL INCOME TAX PAYMENT 5/	1,943			

### **TY 2015 Other Professional Fees Schedule**

Name: EDGAR & NONA MCKINNEY CHARITABLE TR

C/O SUNTRUST BANK

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
GRANT COMMITTEE FEES	4,000			4,000

### **TY 2015 Taxes Schedule**

Name: EDGAR & NONA MCKINNEY CHARITABLE TR

C/O SUNTRUST BANK

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX PAID	529	529		
OTHER TAXES	126	126		

### GRANT APPLICATION GUIDELINES FOR

### THE EDGAR P. AND NONA B. McKINNEY CHARITABLE TRUST

These guidelines are provided to assist those charitable organizations which are considering making application for grants from the EDGAR P. AND NONA B. McKINNEY CHARITABLE TRUST. There are many worthy charitable causes, but those which fall within the following described guidelines are the causes which the EDGAR P. AND NONA B. McKINNEY CHARITABLE TRUST are most inclined to support. The gift committee charged with responsibility for selecting recipients of gifts from the EDGAR P. AND NONA B. McKINNEY CHARITABLE TRUST will follow these guidelines.

The gift committee shall consider all qualified applications received from organizations that are exempt from taxation under the Internal Revenue Code of the United States of America.

The qualified organizations are those which are charitable, religious and educational in nature. No part of any gift shall be used to influence legislation or to carry on propaganda, the sole object and purpose of the Trust being to further the cause of charity, education and religion.

Decisions regarding grants will be based on the following described considerations:

- A. Need.
- B. In making grants from the EDGAR P. AND NONA B. McKINNEY CHARITABLE TRUST, the grant committee shall first consider worthwhile research projects to be performed by competent scholars in the fields of mathematics, geography (including climatology and meteorology), geology (including deep sea studies and tectonic plates) and astronomy at the University of Wisconsin Madison so long as such projects meet the purpose of this trust and qualify as permitted projects under the then existing tax law for the use of the funds of this trust.
- C. Second tier priority in awarding grants shall be to other qualified educational institutions for such projects as meet the purpose of this trust, and qualify as permitted projects under the then existing tax law for the use of the funds of this trust.
- D. Gifts may be made only for use within the United States or its possessions.
- E. The willingness of the organization to raise matching funds in order to qualify for the EDGAR P. AND NONA B. McKINNEY CHARITABLE TRUST gift.
- F. All gift requests are to be received no later than April 1<sup>st</sup> of each year. The Charitable Trust will consider grant requests at its annual meetings. All such requests shall be in writing by the proposed gift recipient. The gift request shall request a grant in a specific dollar amount. The purpose and use of the gift shall also be specifically stated. A list of the officers and directors of the proposed gift recipient shall be attached. Financial statements for the proposed recipient shall be attached to the gift request. Finally, a copy of the proposed recipient's IRS letter showing the proposed recipient's tax exempt status must be attached to the grant request.

Grant Application Guidelines for the Edgar P. and Nona B. McKinney Charitable Trust Page 2

Though the guidelines set forth hereinabove shall be adhered to by the gift committee of the Charitable Trust in virtually every choice of recipients of funds, the gift committee reserves the right to select deserving donatees that fall outside the definition of the guidelines but that demonstrate an unusual need in harmony with the concerns of the EDGAR P. AND NONA B. McKINNEY CHARITABLE TRUST.

#### APPLICATION REQUIREMENTS

Institutions/organizations wishing to apply for funds should supply the Foundation with a fully developed proposal.

The proposal should include the following and be forwarded to the address above:

- ◆ Completed Grant Proposal Application
- Principal objective and brief history of the organization/institution
- List of the current Board of Directors
- Proof of tax-exempt status
- Detailed outline of project, including its expected outcome
- Financial information for prior 3 years (financial statements; audited or unaudited)
- Proposed budget for current year
- Source(s) of other funding (if applicable)

Or submit online at: http://foundationcenter.org/grantmaker/mckinney/

#### FOLLOW-UP PROCESS

Proposals will be reviewed upon receipt. Additional information may be requested. Once all required information is received, the proposal will be presented at the next regularly scheduled meeting of the Grant Committee.

Once a decision is made by the Committee, the Foundation will communicate the decision to the applicant in writing.

For further information, please call SunTrust Bank Foundations and Endowments Specialty Practice Group at 1(800) 432-4760, extension 4485.

### Edgar P. & Nona B. McKinney Charitable Trust

SunTrust Bank

Foundations and Endowments Specialty Practice
Attn: Melanie A. Cianciotto
PO Box 620005
M/C: FL-Orlando-2100
Orlando, Florida 32862

### **GRANT PROPOSAL APPLICATION**

NAME OF ORGANIZATION.  NAME, TITLE AND ADDRESS OF CONTACT  (PERSON)  (TITLE)  (STREET ADDRESS)  (CITY/STATE/ZIP)  (PHONE NUMBER)  AMOUNT OF GRANT REQUEST. \$  PURPOSE OF GRANT REQUEST
(PERSON)  (TITLE)  (STREET ADDRESS)  (CITY/STATE/ZIP)  (PHONE NUMBER)  AMOUNT OF GRANT REQUEST. \$  PURPOSE OF GRANT REQUEST
(STREET ADDRESS) (CITY/STATE/ZIP) (PHONE NUMBER) AMOUNT OF GRANT REQUEST. \$ PURPOSE OF GRANT REQUEST
(CITY/STATE/ZIP)  (PHONE NUMBER)  AMOUNT OF GRANT REQUEST. \$  PURPOSE OF GRANT REQUEST
(CITY/STATE/ZIP)  (PHONE NUMBER)  AMOUNT OF GRANT REQUEST. \$  PURPOSE OF GRANT REQUEST
(PHONE NUMBER)  AMOUNT OF GRANT REQUEST. \$  PURPOSE OF GRANT REQUEST
AMOUNT OF GRANT REQUEST. \$
PURPOSE OF GRANT REQUEST
PRIOR GRANTS RECEIVED FROM THE EDGAR P. & NONA B. McKINNEY CHARITABLE TRUST:  PURPOSE OF GRANT:
DATE AMOUNT: \$
PURPOSE OF GRANT.
DATE: AMOUNT. \$