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OMB No 1545-0052

2015

Inspection

Department of the Treasury

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 www.irs.gov/form990pf. Internal Revenue Service , and ending 09-30-2016 For calendar year 2015, or tax year beginning 10-01-2015 A Employer identification number Name of foundation THOMAS W BRIGGS FOUNDATION INC 62-6039986 BTelephone number (see instructions) Number and street (or P O $\,$ box number if mail is not delivered to street address) 119 SOUTH MAIN NO 500 Room/suite (901) 680-0276 C If exemption application is pending, check here City or town, state or province, country, and ZIP or foreign postal code G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Fınal return A mended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change If private foundation status was terminated \checkmark Section 501(c)(3) exempt private foundation **H** Check type of organization under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation JA ccounting method ✓ A ccrual IFair market value of all assets at end Cash If the foundation is in a 60-month termination under section 507(b)(1)(B), check here of year (from Part II, col (c), Other (specify) line 16) ▶\$ 15,178,863 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses Disbursements Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see Adjusted net Net investment for chantable expenses per books ıncome ıncome purposes (d) (cash basis only) 1 Contributions, gifts, grants, etc , received (attach 133,513 2 Check ► ☐ If the foundation is **not** required to attach 25,528 Interest on savings and temporary cash investments 3 183,052 183,052 4 Dividends and interest from securities Gross rents Net rental income or (loss)_ b 921.633 Net gain or (loss) from sale of assets not on line 10 6a b Gross sales price for all assets on line 6a 1,460,465 903,835 7 Capital gain net income (from Part IV, line 2) . Net short-term capital gain . 8 9 Income modifications . 10a Gross sales less returns and allowances b Less Cost of goods sold . . . Gross profit or (loss) (attach schedule) . c 11 Other income (attach schedule) <u>چ</u> 33,623 33,623 1.297.349 1.146.038 12 Total.Add lines 1 through 11 57,150 19.053 38.097 13 Compensation of officers, directors, trustees, etc Other employee salaries and wages 14 Pension plans, employee benefits. 15 Operating and Administrative Expenses 16a Legal fees (attach schedule). . . 9 24,676 8.225 16.451 Accounting fees (attach schedule). b 5,303 5,303 Other professional fees (attach schedule) (چە 0 c 7.196 7.196 Λ 17 **46** 25,284 1,254 2,507 18 Taxes (attach schedule) (see instructions) * Depreciation (attach schedule) and depletion 657 n 14,088 4.696 9.392 20 Occupancy Travel, conferences, and meetings. 21 22 Printing and publications . . (چە 173.268 143.550 20.090 23 Other expenses (attach schedule). Total operating and administrative expenses. 24 307.622 189.277 86.537 Add lines 13 through 23 . . 697.353 694.882 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 1.004.975 189.277 781.419 27 Subtract line 26 from line 12 292,374 а Excess of revenue over expenses and disbursements Net investment income (If negative, enter -0-) 956.761 b Adjusted net income(if negative, enter -0-)

| Đa | rt II | Balance Sheets Attached schedules and amounts in the description column | Beginning of year | End o | f year |
|-------------|--------|---|--|---------------------|-----------------------|
| | | should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash—non-interest-bearing | 450 700 | 222.452 | 200 460 |
| | 2 | Savings and temporary cash investments | 162,798 | 323,469 | 323,469 |
| | 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 ▶ | | | |
| Ś | 8 | Inventories for sale or use | | | |
| Assets | 9 | Prepaid expenses and deferred charges $\dots \dots \dots \dots \dots$ | 1,453 | 1,453 | 1,453 |
| As | 10a | Investments —U S $$ and state government obligations (attach schedule) $$ | | | |
| | b | Investments—corporate stock (attach schedule) | | | |
| | С | Investments—corporate bonds (attach schedule) | | | |
| | 11 | Investments—land, buildings, and equipment basis ▶ | | | |
| | | Less accumulated depreciation (attach schedule) ▶ | | | |
| | 12 | Investments—mortgage loans | | | |
| | 13 | Investments—other (attach schedule) | 14,884,496 | 9 14,848,964 | 14,848,964 |
| | 14 | Land, buildings, and equipment basis ▶ | | | |
| | | Less accumulated depreciation (attach schedule) ▶ 1,540 | 4,107 | 3,450 | 3,450 |
| | 15 | Other assets (describe ►) | 9 0 | 1,527 | 1,527 |
| | 16 | Total assets (to be completed by all filers—see the | | | |
| | | instructions Also, see page 1, item I) | 15,052,854 | 15,178,863 | 15,178,863 |
| | 17 | Accounts payable and accrued expenses | 5,887 | 1,000 | |
| | 18 | Grants payable | 396,629 | 399,100 | |
| 6S | 19 | Deferred revenue | | | 1 |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | 1 |
| ap | 21 | Mortgages and other notes payable (attach schedule) | | | |
| _ | 22 | Other liabilities (describe ►) | | | |
| | 23 | Total liabilities(add lines 17 through 22) | 402,516 | 400,100 | |
| | | Foundations that follow SFAS 117, check here ▶ | | | • |
| 6S | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| Ĕ | 24 | Unrestricted | 14,650,338 | 14,778,763 | |
| Balance | 25 | Temporarily restricted | | | 1 |
| | 26 | Permanently restricted | | | 1 |
| Fund | | Foundations that do not follow SFAS 117, check here | | | 1 |
| or F | | and complete lines 27 through 31. | | | |
| | 27 | Capital stock, trust principal, or current funds | | | |
| Assets | 28 | Paid-in or capital surplus, or land, bldg, and equipment fund | | | 1 |
| As | 29 | Retained earnings, accumulated income, endowment, or other funds | | | - |
| Net | 30 | Total net assets or fund balances(see instructions) | 14,650,338 | 14,778,763 | - |
| Z | 31 | Total liabilities and net assets/fund balances(see instructions) | 15,052,854 | ` | 4 |
| D = | | | 13,032,031 | 13,170,003 | |
| | rt III | , , | (a) line 30 (| | |
| 1 | | Total net assets or fund balances at beginning of year—Part II, column | i (a), line 30 (must a | · | 14650 220 |
| _ | | with end-of-year figure reported on prior year's return) | | 1 | 14,650,338 |
| 2 | | Enter amount from Part I, line 27a | | | 292,374 |
| 3 | | Other increases not included in line 2 (itemize) ► | | 3 | 14042712 |
| 4 | | Add lines 1, 2, and 3 | | . — | 14,942,712 |
| 5 | | Decreases not included in line 2 (itemize) | D-1-17 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | | 163,949 |
| 6 | | Total net assets or fund balances at end of year (line 4 minus line 5)—l | Part II, column (b), l | ine 30 . 6 | 14,778,763 |

the Part VI instructions

Part IV Capital Gains and Losses for Tax on Investment Income

| | | e kınd(s) of property sold (e g , re ouse, or common stock, 200 shs | • | How acquired P—Purchase | יט ן | ate acquired Dino, day, yr) (d) (mo | ate sold , day, yr) |
|--------------------|---|---|----------------------------|-------------------------|-------|--|-------------------------|
| 1 a | PIMCO SHORT TERM F | FUND | | (2) B Banacion | | 2015 | 5-12-10 |
| b | PIMCO SHORT TERM F | FUND | | | | 2015 | 5-04-06 |
| С С | THRU K-1 INVESTMEN | ITS | | | | | |
| d | THRU K-1 INVESTMEN | ITS | | | | | |
| е | | | | | | | |
| | | Depreciation allowe | d Cos | t or other basis | ╁ | Gain or (loss | :) |
| (e | e) Gross sales price | (f) (or allowable) | | expense of sale | | (h) (e) plus (f) minu | |
| а | 175 | ,000 | | 176,49 | 7 | | -1,497 |
| b | 350 | ,000 | | 356,57 | 8 | | -6,578 |
| с | | | | 5,75 | 7 | | -5,757 |
| d | 935 | ,465 | | 17,79 | 8 | | 917,667 |
| e | | | | | | | |
| Со | mplete only for assets sho | owing gain in column (h) and owne | d by the foundatio | n on 12/31/69 | 1 | Gains (Col (h) gair | n minus |
| (i) | FMV as of 12/31/69 | A djusted basis | | cess of col (ı) | | ol (k), but not less th | nan -0-) or |
| | | (j) as of 12/31/69 | (k) ove | rcol (j), ıfany | (1) | Losses (from col | |
| a | | | | | | | -1,497 |
| ь | | | | | | | -6,578 |
| с | | | | | | | -5,757 |
| d | | | | | | | 917,667 |
| е | | | | | | | |
| 3 | If gain, also enter in Pai | gain or (loss) as defined in section tr., line 8, column (c) (see instru | ctions) If (loss), e |) | 3 | | 903,835 |
| Part | V Qualification Un | der Section 4940(e) for R | educed Tax or | Net Investme | nt In | come | |
| If section Was the | on 4940(d)(2) applies, lea e foundation liable for the s | vate foundations subject to the se ve this part blank ection 4942 tax on the distributa qualify under section 4940(e) Do | able amount of any | year in the base p | | _ | √ No |
| 1 En | ter the appropriate amoun | t in each column for each year, se | ee instructions bef | ore making any ent | ries | | |
| | (a) e period years Calendar or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncha | | (| (d) Distribution ratio col (b) divided by col (d | =)) |
| | 2014 | 862,932 | | 15,847,754 | | 0 | 054451 |
| | 2013 | 824,013 | | 15,863,086 | | 0 | 051945 |
| | 2012 | 767,966 | | 14,744,255 | | 0 | 052086 |
| | 2011 | 759,386 | | 14,007,187 | | | 054214 |
| | 2010 | 739,722 | | 14,556,130 | | | 050819 |
| 2 | , | d) | | <u> </u> | 2 | | 0 263515 |
| 3 | the number of years the | tio for the 5-year base period—div foundation has been in existence | e if less than 5 yea | rs | 3 | | 0 052703 |
| 4 | | oncharitable-use assets for 2015 | • | <u></u> | 4 | 14 | 1,496,667 |
| 5 | | | | <u> </u> | 5 | | 764,018 |
| 6 | | nent income (1% of Part I, line 2 | | _ | 6 | | 9,568 |
| 7 | | | | | 7 | | 773,586 |
| 8 | Enter qualifying distribu | tions from Part XII, line 4 | | | 8 | | 781.419 |

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

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)?

. Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names

If "Yes," complete Part XIV

and addresses

No

No

9

10

| Par | t VII-A 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 ►WWW THOMASWBRIGGSFOUNDATION COM | | | |
| 14 | The books are in care of ►MARGARET CRADDOCK Telephone no ►(901) |) 680- | 0276 | |
| | Located at ►119 SOUTH MAIN NO 500 MEMPHIS TN ZIP+4 ►38103 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu 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 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 ▶ | | | |
| | | | | |
| Pal | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required | 1 | l | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year did the foundation (either directly or indirectly) | | Yes | No |
| Ia | | | | |
| | (1) Engage in the sale or exchange, or leasing or property with a disqualified person? Yes Vo (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | i | ! | İ |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | i | İ | İ |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No | i | ! | İ |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | İ | <u>.</u> | İ |
| | for the benefit or use of a disqualified person)? Yes 🗸 No | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | İ | İ | İ |
| | 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) Yes 🔽 No | | | ļ |
| b | 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 | | No |
| | Organizations relying on a current notice regarding disaster assistance check here | I | l | l |
| с | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, | 1 | | I |
| | that were not corrected before the first day of the tax year beginning in 2015? | 1c | | No |
| 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? | | | |
| b | 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) | | | |
| _ | (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 | | |
| c | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| | ▶ 20, 20, 20 | | | |
| 3а | 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 | | | |
| | If the foundation had excess business holdings in 2015) | 3b | | |
| 4 a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | No |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | | | |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? | 4b | | No |

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2

3

5

1

2a

3

4

5

6

7

1

2

5

Part XII

Part XI

14,538,618

14,717,428

14,496,667

220,761

724,833

724,833

11,489

713,344

713.344

713,344

781,419

781,419

9,568

771,851

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2 3

4

5

1

2c

3

4

5

6

7

1a

1b

2

3а

3b

4

5

9,568

1,921

| 7 | Minimum | Investment Return | |
|---|------------|--------------------------|--|
| • | MILLINITUM | Tilvezillelir Kernill | |

Part X

1c (attach detailed explanation).

Subtract line 2 from line 1d.

Distributable Amount

Add lines 2a and 2b.

Reduction claimed for blockage or other factors reported on lines 1a and

check here ► and do not complete this part.)

Tax on investment income for 2015 from Part VI, line 5.

Income tax for 2015 (This does not include the tax from Part VI). . .

Recoveries of amounts treated as qualifying distributions.

Deduction from distributable amount (see instructions).

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Distributable amount before adjustments Subtract line 2c from line 1.

| (| (All domestic | foundations | must cor | nplete t | this part. | Foreign | foundations,se | e instructions | 5.) |
|------|------------------|----------------|--------------|-----------|-------------|------------|--------------------|----------------|-----|
| r ma | rket value of as | ssets not used | d (or held f | or use) d | lirectly in | carrying c | ut charitable, etc | ÷ , | |

- Fair purposes

- a Average monthly fair market value of securities. 1a

Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4

Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . .

Expenses, contributions, qifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see

- 1b

- Fair market value of all other assets (see instructions). . . 1c
- 178,810
- 1d 14,717,428

1e

2a

2b

(see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations

| | m 990-PF (2015) | | | | Page 9 |
|----|--|-------------|---------------------|------|---------------------------|
| P | art XIII Undistributed Income (see ins | structions) | | | |
| | | (a) | (b) | (c) | (d) |
| | | Corpus | Years prior to 2014 | 2014 | 2015 |
| | Distributable amount for 2015 from Part XI, line 7 | | | | 713,344 |
| | Undistributed income, if any, as of the end of 2015 | • | | | |
| а | Enter amount for 2014 only | | | | 0 |
| b | Total for prior years 20 , 20 , 20 | _ | 0 | | |
| 3 | Excess distributions carryover, if any, to 2015 | | | | |
| а | From 2010 | | | | |
| b | | _ | | | |
| C | From 2012 | — | | | |
| d | From 2013 | | | | |
| | From 2014 96,0 | | | | |
| f | Total of lines 3a through e | 307,119 | | | |
| 4 | Qualifying distributions for 2015 from Part | | | | |
| | XII, line 4 > \$ 781,419 | | | | |
| а | Applied to 2014, but not more than line 2a | | | | 0 |
| b | Applied to undistributed income of prior years | | 0 | | |
| | (Election required—see instructions) | 0 | | | |
| C | Treated as distributions out of corpus (Election | | | | |
| ام | required—see instructions) | | | | 713,344 |
| | Applied to 2015 distributable amount | 68,075 | | | 713,544 |
| | Remaining amount distributed out of corpus | 00,073 | | | |
| 5 | Excess distributions carryover applied to 2015 | 0 | | | |
| | (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | |
| • | Enter the net total of each column as | | | | |
| O | indicated below: | | | | |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 375,194 | | | |
| | Prior years' undistributed income Subtract | | | | |
| _ | line 4b from line 2b | | 0 | | |
| 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) | | 0 | | |
| | tax has been previously assessed | | - | | |
| a | Subtract line 6c from line 6b Taxable amount —see instructions | | o | | |
| ۵ | Undistributed income for 2014 Subtract line | | | | |
| · | 4a from line 2a Taxable amount—see | | | | |
| | instructions | | | | 0 |
| f | Undistributed income for 2016 Subtract | | | | |
| | lines 4d and 5 from line 1. This amount must | | | | |
| _ | be distributed in 2015 | | | | |
| 7 | A mounts treated as distributions out of corpus to satisfy requirements imposed by | | | | |
| | section 170(b)(1)(F) or 4942(q)(3) (Election may | | | | |
| | be required - see instructions) | 0 | | | |
| 8 | Excess distributions carryover from 2010 not | | | | |
| | applied on line 5 or line 7 (see instructions) | 28,411 | | | |
| 9 | Excess distributions carryover to 2016. | 246 702 | T | | |
| | Subtract lines 7 and 8 from line 6a | 346,783 | | | |
| | Analysis of line 9 | | | | |
| | Excess from 2011 96,0 | | | | |
| | Excess from 2012 | _ | | | |
| | Excess from 2013 41,3 | | | | |
| d | Excess from 2014 96,0 | | | | |
| e | Excess from 2015 | /5 | | | |
| | | | | | Form 990-PF (2015) |

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

MEMPHIS 501C3 ARTS, CIVIC, EDUCATION, SOCIAL SERVICE AND YOUTH EFFORTS

AUGUST 1 AND FEBRUARY 1

factors

Form 990-PF (2015)

Part XV Supplementary Information(continued)

| Treatment and movidures prome or housewess a Part Administration for the part of the part | 3 Grants and Contributions Paid During the Year or Approved for Future Payment | | | | | | | | |
|---|--|---|------------|---------------------|--------------------------------------|--|--|--|--|
| Name and address (home or business) A pled during the year See Additional Data Table Total. Disproved for future payment See Additional Data Table Total. Disproved for future payment See Additional Data Table | | If recipient is an individual, show any relationship to | Foundation | Purpose of grant or | A mount | | | | |
| Total | Name and address (home or business) | or substantial contributor | | Contribution | | | | | |
| b Approved for future payment See Additional Data Table Total ▶ 3b 405,833 | a Paid during the year | or substantial contributor | recipient | | | | | | |
| b Approved for future payment See Additional Data Table Total ▶ 3b 405,833 | Total | | | ▶ 32 | 604 993 | | | | |
| See Additional Data Table Total | iotai | <u> </u> | | ► 3a | 694,882 | | | | |
| Form 990-DF (2015) | See Additional Data Table | | | ▶ 3b | 405,833 Form 990-PF (2015) | | | | |

| Enter gros | s amounts unless otherwise indicated | Unrelated bu | isiness income | Excluded by section | 512, 513, or 514 | (e) Related or exempt |
|---|--|--|-----------------------|-----------------------|--------------------------|--|
| 1 Progran | n service revenue | (a) Business code | (b) A mount | (c) Exclusion code | (d) A mount | function income (See instructions) |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| е | | | | | | |
| f | and contracts from government agencies | | | | | |
| _ | ership dues and assessments | | | | | |
| | st on savings and temporary cash ments | | | 14 | 25,528 | |
| | nds and interest from securities | | | 14 | 183,052 | |
| | ntal income or (loss) from real estate | | | | | |
| | -financed property lebt-financed property | | | | | |
| 6 Netre | ntal income or (loss) from personal | | | | | |
| 7 Other | investment income | | | 18 | 33,623 | |
| | r (loss) from sales of assets other than ory | | | 18 | 921,633 | |
| | come or (loss) from special events profit or (loss) from sales of inventory | | | | | |
| | revenue a | | | | | |
| ь | | | | | | |
| | | | | | | |
| | | | | | | |
| 19 Cubtat | al Add columns (b), (d), and (e) | | 0 | | 1,163,836 | |
| 13 Total./ | dd line 12, columns (b), (d), and (e) | | | 1 | 3 | 1,163,836 |
| 13 Total. (See v | odd line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify | calculations) | | | | 1,163,836 |
| 13 Total. (See v | dd line 12, columns (b), (d), and (e) | calculations) o the Accomplich income is re | plishment of E | Exempt Purposo | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposo | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposo | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposo | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposo | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposon | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposon | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposon | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposon | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposon | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposon | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposon | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposon | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposon | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposon | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposo | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposo | es ontributed importa | ntly to |
| 13 Total.4 (See v Part XV Line No. | worksheet in line 13 instructions to verify to Relationship of Activities to Explain below how each activity for whithe accomplishment of the foundation's | calculations) o the Accomplich income is re | plishment of E | Exempt Purposo | es ontributed importa | ntly to |

| Form 990-P | (2015) | | | | | | | | | | Pag | ge 13 |
|--------------------------|--|--------------------------|-----------------|--------------------------|------------------------------------|---------------------------------------|---------------------|--|--------------------------|----------------|----------|--------------|
| Part XVI | | | | | | actions | and F | Relationships | With | | | |
| section 5 | 01(c) of the Code (othe | | | | | | | | | | Yes | No |
| _ | | adation to | 2 popo | haritable | ovemnt organiz | ation of | | | | | | |
| | | | | | | | | | | 12(1) | | No |
| • • | | | | | | | | | • | | | |
| | | | | | | | | | • • | 10(2) | | 140 |
| | | ritable eve | emnt o | raanizatio | n | | | | | 16(1) | | No |
| | | | | | | | | | | | | |
| | | | | | | | | | • | H | | |
| | | | | | | | • • | | | | | |
| | | | | | | | | | • | | | |
| • • | Transfers from the reporting foundation to a nonchantable exempt organization of (1) Cash. 1a(2) No (2) Other assets. 1a(2) No Other transactions (1) Sales of assets from a nonchantable exempt organization. 1b(3) No Other transactions (1) Sales of assets from a nonchantable exempt organization. 1b(3) No Other transactions (2) Purchases of assets from a nonchantable exempt organization. 1b(3) No (3) Rectal of Identities, equipment, or other assets. 1b(3) No (4) Rembursement arrangements. 1b(4) No (5) Loans or loan guarantees. 1b(4) No (6) Loans or loan guarantees. 1b(4) No If the answer to any of the above is "Yes," complete the following schedule: Other completes the following schedule: Other completes the following schedule Column (D) should always show the first market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Answer invoked (C) Name of renchantable exempt organization (d) Description of Irransfers, transactions, and sharing arrangements. (b) Answer invoked (C) Name of renchantable exempt organization of the goods, other assets, or services received (b) Answer invoked (C) Name of renchantable exempt organization of the goods, other assets, or services received (a) Name of organization (b) Type of organization (d) Description of Irransfers, transactions, and sharing arrangements. (a) Name of organization (b) Type of organization (d) Description of reliationship (b) Type of organization (d) Description of reliationship (a) Name of organization (d) Type of organization (d) Description of reliationship (a) Name of organization (d) Type of organization (d) Description of reliationship (b) Type of organization of prepare (other than taxpayer) is based on all information of which prepare has any knowledge (a) Name of organization of prepare (other than taxpayer) is based on all information of which prepare has any knowledge (b) Type preparer's Signature (d) Date (d) Coloration of preparer (other than taxpayer) is base | | | | | | | | | | | |
| | | | | _ | | | | | | | | |
| _ | | _ | | | | | | | ho fair ma | | luo | NO |
| of the go | ods, other assets, or se ansaction or sharing arr | rvices give angement, | en by t show | the reporti in column | ng foundation I (d) the value o | f the found f the goods | ation re , other | eceived less than assets, or servic | fair marke es receive | et value ed | 2 | nts |
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| des crībe √ No | d in section 501(c) of the complete the following | ne Code (o schedule | | nan sectio | n 501(c)(3)) or | in section | | · | | · | es | |
| | (a) Name of organization | 1 | | (t |) Type of organiza | tion | | (c) Descrip | tion of relation | onship | | |
| | | | | | | | | | | | | |
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| the | best of my knowledge a rmation of which prepar | ind belief, | ıt ıs trı | ue, correc | t, and complete | | | | n taxpayeı ——— | r) is ba: | sed on | all |
| Here 👠 | **** | | | | 2016-12-14 | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | **** | | | | rer show | vn |
| | Signature of officer or t | rustee | | | Date | _ / _ | ıtle | | below | | | |
| | | name | Prepa | arer's Sıgn | nature | 1 | 2-14 | | | 01297 | 217 | |
| Paid Preparer Use | | DDMAN LI | _P | | | l | | Firm's EIN ▶ 56 | <u> </u> 5-074798 | 1 | | |
| Only | Firm's address ► 999 S SHADY GROVI 38120 | E RD STE | 400 M | EMPHIS, | TN | | | Phone no (901 |)761-300 | 00 | | |

Form 990PF Part VIII Line ${\bf 1}$ - List all officers, directors, trustees, foundation managers and their compensation

| (a) Name and address | Title, and average hours per week (b) devoted to position | (c) Compensation(If not paid, enter -0-) | Contributions to employee benefit plans and deferred (d) compensation | Expense account, (e) other allowances |
|--|---|--|---|---------------------------------------|
| KATHLEEN D BLAIR | DIRECTOR | 400 | 0 | 0 |
| 119 SOUTH MAIN STREET SUITE 500 MEMPHIS,TN 38103 | 1 00 | | | |
| ALLISON CATES | DIRECTOR | 400 | 0 | 0 |
| 119 SOUTH MAIN STREET SUITE 500 MEMPHIS,TN 38103 | 1 00 | | | |
| MARGARET CRADDOCK | EXECUTIVE | 53,750 | 0 | 0 |
| 119 SOUTH MAIN STREET SUITE 500 MEMPHIS,TN 38103 | DIRECTOR 1 00 | , | | |
| V LYNN EVANS | DIRECTOR | 200 | 0 | 0 |
| 119 SOUTH MAIN STREET SUITE 500 MEMPHIS,TN 38103 | 1 00 | | | |
| GWEN P OWEN | REVIEW | 400 | 0 | 0 |
| 119 SOUTH MAIN STREET SUITE 500 MEMPHIS,TN 38103 | COMMITTTEE CHAIR/DIRECTOR 1 00 | | | |
| LAWRENCE JENSON | VICE | 400 | 0 | 0 |
| 119 SOUTH MAIN STREET SUITE 500 MEMPHIS,TN 38103 | CHAIR/DIRECTOR 1 00 | | | |
| DR KENNETH S ROBINSON | DIRECTOR | 200 | 0 | 0 |
| 119 SOUTH MAIN STREET SUITE 500 MEMPHIS,TN 38103 | 1 00 | | | |
| SPENCE WILSON | DIRECTOR | 200 | 0 | 0 |
| 119 SOUTH MAIN STREET SUITE 500 MEMPHIS,TN 38103 | 1 00 | | | |
| HUNTER WITHERINGTON | TREASURER/DIRECTOR | 400 | 0 | 0 |
| 119 SOUTH MAIN STREET SUITE 500 MEMPHIS,TN 38103 | 1 00 | | | |
| JAMES D WITHERINGTON JR | CHAIRMAN/DIRECTOR | 400 | 0 | 0 |
| 119 SOUTH MAIN STREET SUITE 500 MEMPHIS,TN 38103 | 1 00 | | | |
| MEG CROSBY | DIRECTOR | 200 | 0 | 0 |
| 119 SOUTH MAIN STREET SUITE 500 MEMPHIS,TN 38103 | 1 00 | | | |
| DEMITRI PATIKAS | DIRECTOR | 200 | 0 | 0 |
| 119 SOUTH MAIN STREET SUITE 500 MEMPHIS,TN 38103 | 1 00 | | | |

| orm 990PF Part XV Line 3 - Gr | ants and Contributions | Paid During | the Year or Approved for | Future Payment |
|--|--|--------------------------------------|----------------------------------|----------------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of recipient | Purpose of grant or contribution | A mount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| A STEP AHEAD FOUNDATION 301 CLEMENT HALL 3704 WALKER MEMPHIS,TN 38174 | NONE | PUBLIC | PROGRAM SUPPORT | 10,000 |
| ADVANCE 769 VANCE AVENUE MEMPHIS,TN 38126 | NONE | PUBLIC | PROGRAM SUPPORT | 10,500 |
| BINGHAMPTON CHRISTIAN ACADEMY 175 TILLMAN STREET MEMPHIS,TN 38111 | NONE | PUBLIC | PROGRAM SUPPORT | 10,000 |
| COMMUNITY FOUNDATION OF GREATER MEMPHIS 1900 UNION AVE MEMPHIS,TN 38104 | NONE | PUBLIC | PROGRAM SUPPORT | 6,667 |
| CHURCH HEALTH CENTER 1196 PEABODY AVE MEMPHIS,TN 38104 | NONE | PUBLIC | PROGRAM SUPPORT | 60,000 |
| MEMPHIS TEACHER RESIDENCY 2181 UNION AVENUE MEMPHIS,TN 38104 | NONE | PUBLIC | PROGRAM SUPPORT | 25,000 |
| DIXON GALLERY & GARDENS 4339 PARK AVE MEMPHIS,TN 38117 | NONE | PUBLIC | PROGRAM SUPPORT | 16,500 |
| EMMANUEL CENTER 604 ST PAUL AVE MEMPHIS,TN 38126 | NONE | PUBLIC | PROGRAM SUPPORT | 5,000 |
| EXCHANGE CLUB FAMIY CENTER 2180 UNION AVE MEMPHIS,TN 38104 | NONE | PUBLIC | PROGRAM SUPPORT | 25,000 |
| FACING HISTORY 115 HULING AVE MEMPHIS,TN 38103 | NONE | PUBLIC | PROGRAM SUPPORT | 5,000 |
| HATTILOO 656 MARSHALL AVENUE MEMPHIS,TN 38103 | NONE | PUBLIC | PROGRAM SUPPORT | 10,000 |
| LEVITT SHELL 1928 POPLAR AVE MEMPHIS,TN 38104 | NONE | PUBLIC | PROGRAM SUPPORT | 50,000 |
| LITE 3618 WALKER AVEENUE MEMPHIS,TN 38111 | NONE | PUBLIC | PROGRAM SUPPORT | 5,000 |
| MEMPHIS ATHLETIC MINISTRIES 2146 BALL ROAD MEMPHIS,TN 38114 | NONE | PUBLIC | PROGRAM SUPPORT | 15,000 |
| MEMPHIS BOTANIC GARDEN 750 CHERRY ROAD MEMPHIS,TN 38117 | NONE | PUBLIC | PROGRAM SUPPORT | 15,000 |
| Total | | | ▶ 3a | 694,882 |

| Form 990PF Part XV Line 3 - Gr | | | 1 | 1 |
|---|--|--------------------------------------|-------------------------------------|---------|
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | A mount |
| a Paid during the year | | | | |
| MEMPHIS LEADERSHIP FND 1548 POPLAR AVENUE MEMPHIS,TN 38104 | NONE | PUBLIC | PROGRAM SUPPORT | 20,000 |
| MEMPHIS SYMPHONY 585 SOUTH MENDENHALL RD MEMPHIS,TN 38117 | NONE | PUBLIC | PROGRAM SUPPORT | 10,000 |
| MEMPHIS ZOO 2000 PRENTISS PLACE MEMPHIS,TN 38112 | NONE | PUBLIC | PROGRAM SUPPORT | 25,000 |
| MIDSOUTH FOOD BANK 239 S DUDLEY ST MEMPHIS,TN 38104 | NONE | PUBLIC | PROGRAM SUPPORT | 10,000 |
| MIFA PO BOX 3130 MEMPHIS,TN 381730130 | NONE | PUBLIC | PROGRAM SUPPORT | 10,000 |
| MOST 1000 RIDGEWAY LOOP ROAD SUITE 205 MEMPHIS,TN 38120 | NONE | PUBLIC | PROGRAM SUPPORT | 10,000 |
| MPS BROOKS MUSEUM 1934 POPLAR AVE MEMPHIS,TN 38104 | NONE | PUBLIC | PROGRAM SUPPORT | 50,000 |
| NAT ORNAMETAL MUSEUM 374 METAL MUSEUM DRIVE MEMPHIS,TN 38106 | NONE | PUBLIC | PROGRAM SUPPORT | 7,500 |
| NEIGHBORHOOD CHRISTIAN CENTER 223 SCOTT STREET MEMPHIS,TN 38112 | NONE | PUBLIC | PROGRAM SUPPORT | 31,000 |
| NEW BALLET 2157 YORK AVE MEMPHIS,TN 38104 | NONE | PUBLIC | PROGRAM SUPPORT | 30,000 |
| NEW LEADERS 2701 UNION AVENUE EXTENDED SUITE 300 MEMPHIS,TN 38112 | NONE | PUBLIC | PROGRAM SUPPORT | 5,000 |
| NEW MEMPHIS INSTITUTE 6745 WOLF RIVER GREENWAY MEMPHIS,TN 38120 | NONE | PUBLIC | PROGRAM SUPPORT | 7,215 |
| OPERA MEMPHIS 6745 WOLF RIVER GREENWAY MEMPHIS,TN 38120 | NONE | PUBLIC | PROGRAM SUPPORT | 25,000 |
| OVERTON PARK CONSERVANCY 1914 POPLAR AVENUE MEMPHIS,TN 38104 | NONE | PUBLIC | PROGRAM SUPPORT | 25,000 |
| PEER POWER 850 RIDGE LAKE BOULEVARD SUITE 1 MEMPHIS,TN 38120 | NONE | PUBLIC | PROGRAM SUPPORT | 5,000 |
| Total | | | ▶ 3a | 694,882 |

| Recipient | If recipient is an individual, show any relationship to | 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 | | | | |
| PLAYBACK MPS 1000 SOUTH COOPER MEMPHIS,TN 38104 | NONE | PUBLIC | PROGRAM SUPPORT | 5,000 |
| PLAYHOUSE ON THE SQUARE 66 S COOPER ST MEMPHIS,TN 38104 | NONE | PUBLIC | PROGRAM SUPPORT | 10,000 |
| SC BOOKS FROM BIRTH 2924 WALNUT GROVE RD 4 MEMPHIS,TN 38111 | NONE | PUBLIC | PROGRAM SUPPORT | 10,500 |
| THE WORKS 1471 GENESIS CIRCLE MEMPHIS,TN 38106 | NONE | PUBLIC | PROGRAM SUPPORT | 25,000 |
| THEATER MEMPHIS 630 PERKINS EXT MEMPHIS,TN 38117 | NONE | PUBLIC | PROGRAM SUPPORT | 7,500 |
| TENNESSEE SHAKESPEARE CO 3092 VILLAGE SHOPS DRIVE GERMANTOWN,TN 38138 | NONE | PUBLIC | PROGRAM SUPPORT | 10,000 |
| U OF MEM FND 635 NORMAL STREET ALUMNI CENTER NO 108 MEMPHIS,TN 38152 | NONE | PUBLIC | PROGRAM SUPPORT | 15,000 |
| UNITED HOUSING 2750 COLONY PARK DRIVE MEMPHIS,TN 38118 | NONE | PUBLIC | PROGRAM SUPPORT | 5,000 |
| URBAN ART COMMISSION 3485 POPLAR AVE SUITE 225 MEMPHIS,TN 38111 | NONE | PUBLIC | PROGRAM SUPPORT | 10,000 |
| VISIBLE MUSIC COLLEGE 200 MADISON AVENUE MEMPHIS,TN 38103 | NONE | PUBLIC | PROGRAM SUPPORT | 10,000 |
| WKNO 7151 CHERRY FARMS ROAD CORDOVA,TN 38016 | NONE | PUBLIC | PROGRAM SUPPORT | 10,000 |
| WOLF RIVER CONSERVANCY PO BOX 11031 MEMPHIS,TN 381110031 | NONE | PUBLIC | PROGRAM SUPPORT | 37,500 |
| Total | | | ▶ 3a | 694,882 |

| TY 2015 Accounting Fees Schedule | |
|----------------------------------|--|
| | |

DLN: 93491354000026

16,451

| Name: | THOMAS W BRIGGS FOUNDATION INC |
|-------|--------------------------------|
| EIN: | 62-6039986 |

24,676

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

AUDIT - LEGAL AND ACCOUNTING

| Category A | mount Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|------------|-----------------------------|------------------------|---|
|------------|-----------------------------|------------------------|---|

8,225

| Note: To capture the full content of this document, please select landscape mode (11" $	imes$ 8.5") when printing. | | | | | |
|--|--|--|--|--|--|
| TY 2015 Depreciation Schedule | | | | | |
| Name: THOMAS W BRIGGS FOUNDATION INC | | | | | |

DLN: 93491354000026

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

| EIN: 62-6039986 | | | | | | | | | |
|--|------------|-------|-----|--------------------|-----------------------------|---|--------------------------|------------------------|---------------------------------------|
| Description of Date Cost or Other Prior Years Property Acquired Basis Depreciation | | | | Computation Method | Rate / Life (# of years) | Current Year's Depreciation Expense | Net Investment Income | Adjusted Net Income | Cost of Goods Sold Not Included |
| FURNITURE & FIXTURES | 2011-03-10 | 4,990 | 883 | 200DB | 5 00000000000 | 657 | 0 | | |

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DLN: 93491354000026

Name: THOMAS W BRIGGS FOUNDATION INC **EIN:** 62-6039986

| ldentifier | Return Reference | Explanation | | | |
|--|---|---|--|--|--|
| COMPENSATION OF OFFICERS AND DIRECTORS | FORM 990PF, PAGE 5, PART VII- B, QUESTION 1A (4) | THE FOUNDATION PAID CERTAIN OFFICERS AND DIRECTORS FOR SERVICES RENDERED IN MANAGING THE INVESTMENTS OF THE FOUNDATION, MAINTAINING BOOKS AND RECORDS AND CARRYING OUT THE EXEMPT FUNCTIONS OF THE FOUNDATION SALARIES, DIRECTORS' FEES AND ADVISORY BOARD FEES WERE PAID AS SHOWN ON ATTACHED SCHEDULE. THE AMOUNTS PAID WERE NOT EXCESSIVE THEREFORE, THE PAYMENTS ARE NOT AN ACT OF SELF DEALING | | | |

| Identifier | Return Reference | Explanation |
|---------------|---------------------|--|
| FORM 990PF, | | THE REQUEST MUST BE IN WRITING THE MATERIAL SUBMITTED MUST INCLUDE A COPY OF THE |
| PAGE 10, PART | | ORGANIZATION'S TAX EXEMPTION LETTER, A LIST OF BOARD OF DIRECTORS, SOURCES OF FUNDING, THE |
| XV, LINE 2B | | HISTORY AND GOALS OF THE ORGANIZATION, FINANCIAL STATEMENTS, CURRENT OPERATING BUDGET |
| | | AND THE SPECIFIC PURPOSE FOR WHICH THE GRANT WILL BE USED |

| TY | 2015 | Investments | - Other | Schedule |
|----|------|--------------------|---------|----------|

Category / Item

MUTUAL FUNDS

NORTHERN TRUST

PALLADIAN PARTNERS IV, LLC

PALLADIAN PARTNERS V, LLC

PALLADIAN PARTNERS VIII-A

PIMCO SHORT TERM FUND

GT REAL ASSETS II

PALLADIAN PARTNERS VII, LLC

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Name: THOMAS W BRIGGS FOUNDATION INC

Listed at Cost or

DLN: 93491354000026

End of Vear Fair

681,931

486,448

215,727

475,010

199,371

43,857

485,232

66,834

Rook Value

681,931

486,448

215,727

475,010

199,371

43,857

485,232

66,834

EIN: 62-6039986

| Category/ Item | FMV | BOOK Value | Market Value |
|---------------------------------|-----|------------|--------------|
| EAGLE MLP STRATEGY | FMV | 594,325 | 594,325 |
| GT EMERGING MARKETS | FMV | 1,125,805 | 1,125,805 |
| GT INTERNATIONAL PARTNERS FUND | FMV | 2,241,453 | 2,241,453 |
| GT OFFSHORE FUND LTD. | FMV | 4,893,852 | 4,893,852 |
| GT REAL ASSETS LP | FMV | 281,111 | 281,111 |
| GT REAL PROPERTY IV | FMV | 251,029 | 251,029 |
| GT US FUND | FMV | 1,667,051 | 1,667,051 |
| HIGHLAND CAPITAL MGMT | FMV | 731,586 | 731,586 |
| MET WEST TOTAL RETURN BOND FUND | FMV | 408,342 | 408,342 |
| | | | |

FMV

FMV

FMV

FMV

FMV

FMV

FMV FMV

| efile GRAPHIC print - DO NOT PROCES | S As Filed Data - | DLN: 93491354000026 |
|-------------------------------------|-------------------|---------------------|
| TY 2015 Land, Etc. Schedule | | |
| Name | : THOMAS W BRIG | GS FOUNDATION INC |
| EIN | l: 62-6039986 | |

| EIN: 62-6039986 | | | | | | |
|------------------------|-----------------------|--------------------------|------------|----------------------------------|--|--|
| Category / Item | Cost / Other Basis | Accumulated Depreciation | Book Value | End of Year Fair Market Value | | |
| FURNITURE & FIXTURES | 4,990 | 1,540 | 3,450 | | | |

DLN: 93491354000026

Market Value

1,527

Name: THOMAS W BRIGGS FOUNDATION INC.

Book Value

Value

1,527

| EIN: 62-6039986 |) | | T |
|------------------------|---------------------|--------------------|--------------------|
| Description | Beginning of Year - | End of Year - Book | End of Year - Fair |

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REFUNDABLE TAXES

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: 93491354000026 |
|--------------------------------------|-----------------|----------------|---------------------|
| TY 2015 Other Decreases Scho | edule | | |
| Name: | THOMAS W BRIGGS | FOUNDATION INC | |
| EIN: | 62-6039986 | | |
| | | | |

Amount

163,949

Description

UNREALIZED LOSS ON INVESTMENTS

TY 2015 Other Expenses Schedule

Name: THOMAS W BRIGGS FOUNDATION INC

EIN: 62-6039986

| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|------------------------------------|--------------------------------|--------------------------|---------------------|--|
| OFFICE EXPENSE | 1,142 | 381 | | 761 |
| INSURANCE | 2,562 | 854 | | 1,708 |
| AWARDS DINNER | 16,717 | 0 | | 16,717 |
| MISCELLANEOUS | 1,356 | 452 | | 904 |
| OTHER DEDUCTIONS THRU K-1'S | 4,029 | 4,029 | | 0 |
| INVESTMENT EXPENSES THRU K-1'S | 140,404 | 140,404 | | 0 |
| RENTAL LOSS | 7,058 | 0 | | 0 |
| INVESTMENT EXPENSES RELATED TO UBI | 0 | -2,570 | | 0 |

DLN: 93491354000026

33,623

33,623

Name: THOMAS W BRIGGS FOUNDATION INC

ETN: 62-6030086

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PASS-THRU ENTITIES

| EIII. 02 003 | 3300 | | |
|-------------------------|-------------|----------------|---------------------|
| Description | Revenue And | Net Investment | Adjusted Net Income |

33,623

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INVESTMENT ADVISORY FEES

Name: THOMAS W BRIGGS FOUNDATION INC

-- -----

5,303

| EIN: 62-6039986 | | | | | |
|------------------------|--------|--------------------------|-----------------------|--|--|
| Category | Amount | Net Investment Income | Adjusted No Income | | |

5,303

Disbursements for

DLN: 93491354000026

Net

Charitable

Purposes

| TY 2015 Taxes Scheduk | e | |
|-----------------------|-------|--------------------------------|
| | Name: | THOMAS W BRIGGS FOUNDATION INC |

1,254

| EIN: | 62-6039 | 986 | |
|----------|---------|----------------|--------------|
| Category | Amount | Net Investment | Adjusted Net |

| LIN 02 0033300 | | | | | | | |
|-----------------------|--------|--------------------------|-------------------|--|--|--|--|
| Category | Amount | Net Investment Income | Adjusted Incon | | | | |

PAYROLL TAXES

PASS-THROUGH ENTITIES FEDERAL EXCISE TAX

UNRELATED BUSINESS TAX

STATE & FOREIGN TAXES PAID PER K-1S OF

Disbursements for Charitable

Purposes

2,507

DLN: 93491354000026

| sted I |
|--------|

3,761

17,372

1,071

3,080

| efile GRAPHIC print - | DO NOT PROCESS | As Filed Data - | | | DLN: 93491354000026 |
|--|--|---|---|--|---|
| Schedule B | | Schedu | le of Contributors | | OMB No 1545-0047 |
| (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service | ► Information abo | out Schedule B (Fo | rm 990, 990-EZ, or 990-PF) and its i | nstructions is at | 2015 |
| - | Important of the organization IOMAS W BRIGGS FOUNDATION INC Ganization type (check one) | | | | |
| Schedule B Form 390, 390-EZ, or 390, 390-EZ, or 390, 390-EZ, or 390, 390-EZ, or 390, 390-EZ, or 390, 390-EZ, or 390, 390-EZ, or 390, 390-EZ, or 390, 390-EZ, or 390, 390-EZ, or 390-FF) Information about Schedule B (Form 390, 390-EZ, or 390-FF) Information about Schedule B (Form 390, 390-EZ, or 390-FF) Information about Schedule B (Form 390, 390-EZ, or 390-FF) Information about Schedule B (Form 390, 390-EZ, or 390-FF) Information about Schedule B (Form 390, 390-EZ, or 390-FF) Information about Schedule B (Form 390, 390-EZ, or 390-FF) Information about Schedule B (Form 390, 390-EZ, or 390-FF) Information about Schedule B (Form 390, 390-EZ, or 390-FF) Information about Schedule B (Form 390, 390-EZ, or 390-FF) Information about Schedule B (Form 390) Information type (check one) Information typ | | | | | |
| Organization type (ch | eck one) | | | | |
| Filers of: | Section: | | | | |
| Form 990 or 990-EZ | 501(c)(_)(| enter number) orga | anization | | |
| | T 4947(a)(1) | nonexempt charita | ble trust not treated as a private fo | undation | |
| | ☐ 527 politica | l organization | | | |
| Form 990-PF | √ 501(c)(3) € | exempt private foun | dation | | |
| | T 4947(a)(1) | nonexempt charita | ble trust treated as a private founda | ation | |
| | ─ 501(c)(3) t | axable private foun | dation | | |
| √ For an organız | = | | | - | |
| under sections to received from an Part VIII, line 1h, | 509(a)(1) and 170(b)(1 ny one contributor, dur or (ii) Form 990-EZ, lind |)(A)(vı), that check ing the year, total c e 1 Complete Parts | sed Schedule A (Form 990 or 990-E ontributions of the greater of (1) \$5 I and II | Z), Part II, line 13, 16a ,000 or (2) 2% of the | ı, or 16b, and that amount on (ı) Form 990, |
| during the year, | total contributions of m | ore than \$1,000 <i>ex</i> | <i>clusively</i> for religious, charitable, s | | |
| during the year, this box is checl purpose Do not | contributions exclusive ked, enter here the total complete any of the pa | ely for religious, cha il contributions that arts unless the Ger | arıtable, etc , purposes, but no such | n contributions totaled an <i>exclusively</i> religion on because it receive | I more than \$1,000 If us, charitable, etc , ed <i>nonexclusively</i> |
| 990-EZ, or 990-PF), but | ıt must answer "No" o | on Part IV, line 2, of | and/or the Special Rules does not f its Form 990, or check the box on li ses not meet the filing requirements | ine H of its | |

Name of organization
THOMAS W BRIGGS FOUNDATION INC

Employer identification number 62-6039986

| Part I | Contributors (see instructions) Use duplicate copies of Part I if additional sp | ace is needed | |
|------------|---|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | | | Person 🗸 |
| | THOMAS W BRIGGS RESIDUARY TRUST PO BOX 357 | 0.422.542 | Payroll |
| | MEMPHIS, TN 38150 | \$ 133,513 | Noncash — |
| | MEMPHIS, INSCISU | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person |
| | | | Payroll |
| | | $+\frac{1}{2}$ | Noncash — |
| | | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person |
| | | | Payroll |
| | | - | Noncash — |
| | | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person |
| | | | Payroll |
| | | _ | Noncash — |
| | | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person |
| | | | Payroll |
| | | _ | Noncash |
| | | | (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | | Person |
| | | | Payroll |
| | | \$ | Noncash |
| | | | (Complete Part II for noncash contributions) |

Employer identification number

| | | 62-6039986 | |
|-----------------------|--|--|----------------------|
| Part II | Noncas h Property (see instructions) Use duplicate copies of Part II if additional space is needed | | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | s | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | s | |
| (a) No.from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)