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Form **990-PF**Department of the Treasury  
Internal Revenue Service**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 separate instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052

**2016**

Open to Public Inspection

For calendar year 2016 or tax year beginning

, 2016, and ending

, 20

Name of foundation

C SPIRE WIRELESS FOUNDATION

Number and street (or P O box number if mail is not delivered to street address)

Room/suite

1018 HIGHLAND COLONY PKWY

360

City or town, state or province, country, and ZIP or foreign postal code

RIDGELAND, MS 39157-2068

G Check all that apply

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name change

H Check type of organization

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundation

I Fair market value of all assets at

J Accounting method ☒ Cash ☐ Accrual

end of year (from Part II, col (c), line

☐ Other (specify)

16) ▶ \$ 153,276

(Part I, column (d) must be on cash basis)

A Employer identification number

20-3426826

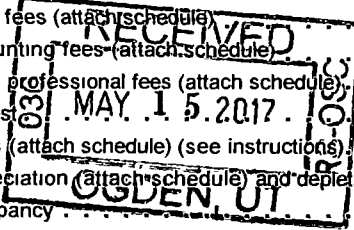
B Telephone number (see instructions)

601-974-7645

C If exemption application is pending, check here. ☐D 1 Foreign organizations, check here. ☐2 Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here. ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here. ☐**Part I Analysis of Revenue and Expenses** (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>				
1 Contributions, gifts, grants, etc., received (attach schedule)	629,500			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B.				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities				
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10				
b Gross sales price for all assets on line 6a				
7 Capital gain net income (from Part IV, line 2)		0		
8 Net short-term capital gain			0	
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	629,500	0	0	
<b>Operating and Administrative Expenses</b>				
Compensation of officers, directors, trustees, etc.	21,218			21,218
Other employee salaries and wages				
Pension plans, employee benefits	1,623			1,623
a Legal fees (attach schedule)				
b Accounting fees (attach schedule)				
c Other professional fees (attach schedule)				
Interest				
Taxes (attach schedule) (see instructions)				
Depreciation (attach schedule) and depletion				
Occupancy				
Travel, conferences, and meetings				
Printing and publications				
Other expenses (attach schedule)	28,591			28,591
Total operating and administrative expenses.	51,432	0	0	51,432
Add lines 13 through 23.	473,167			473,167
25 Contributions, gifts, grants paid	524,599	0	0	524,599
26 Total expenses and disbursements. Add lines 24 and 25				
27 Subtract line 26 from line 12.				
a Excess of revenue over expenses and disbursements	104,901			
b Net investment income (if negative, enter -0-)		0		
c Adjusted net income (if negative, enter -0-)			0	

SCANNED MAY 24 2017



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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash - non-interest-bearing . . . . .		48,375	153,276	153,276
	2	Savings and temporary cash investments . . . . .				
	3	Accounts receivable ▶ . . . . .				
		Less: allowance for doubtful accounts ▶ . . . . .			0	
	4	Pledges receivable ▶ . . . . .				
		Less: allowance for doubtful accounts ▶ . . . . .			0	
	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 ▶ . . . . .			0	
	8	Inventories for sale or use . . . . .				
	9	Prepaid expenses and deferred charges . . . . .				
	10a	Investments - U S and state government obligations (attach schedule) . . . . .				
	b	Investments - corporate stock (attach schedule) . . . . .				
	c	Investments - corporate bonds (attach schedule) . . . . .				
	Liabilities	11	Investments - land, buildings, and equipment basis . . . . .			
		Less: accumulated depreciation (attach schedule) ▶ . . . . .			0	
12		Investments - mortgage loans . . . . .				
13		Investments - other (attach schedule) . . . . .				
14		Land, buildings, and equipment basis . . . . .				
		Less: accumulated depreciation (attach schedule) ▶ . . . . .			0	
15		Other assets (describe ▶ . . . . .)				
16		<b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) . . . . .		48,375	153,276	153,276
17		Accounts payable and accrued expenses . . . . .				
18		Grants payable . . . . .				
19	Deferred revenue . . . . .					
20	Loans from officers, directors, trustees, and other disqualified persons . . . . .					
21	Mortgages and other notes payable (attach schedule) . . . . .					
22	Other liabilities (describe ▶ . . . . .)					
23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .		0	0		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted . . . . .				
	25	Temporarily restricted . . . . .				
	26	Permanently restricted . . . . .				
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds . . . . .				
	28	Paid-in or capital surplus, or land, bldg, and equipment fund . . . . .				
	29	Retained earnings, accumulated income, endowment, or other funds . . . . .		48,375	153,276	
	30	<b>Total net assets or fund balances</b> (see instructions) . . . . .		48,375	153,276	
	31	<b>Total liabilities and net assets/fund balances</b> (see instructions) . . . . .		48,375	153,276	

**Part 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 agree with end-of-year figure reported on prior year's return) . . . . .	1	48,375
2	Enter amount from Part I, line 27a . . . . .	2	104,901
3	Other increases not included in line 2 (itemize) ▶ . . . . .	3	
4	Add lines 1, 2, and 3 . . . . .	4	153,276
5	Decreases not included in line 2 (itemize) ▶ . . . . .	5	
6	<b>Total net assets or fund balances at end of year</b> (line 4 minus line 5) - Part II, column (b), line 30 . . . . .	6	153,276

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)				(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1 a</b>						
<b>b</b>						
<b>c</b>						
<b>d</b>						
<b>e</b>						

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b>			0
<b>b</b>			0
<b>c</b>			0
<b>d</b>			0
<b>e</b>			0

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0- or Losses (from col. (h))
<b>a</b>		0	0
<b>b</b>		0	0
<b>c</b>		0	0
<b>d</b>		0	0
<b>e</b>		0	0

<b>2</b> Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	<b>2</b>	0
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year, see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2015	567,181	69,769	8.1294
2014	669,575	106,402	6.2929
2013	594,907	122,090	4.8727
2012	661,732	112,333	5.8908
2011	534,411	71,424	7.4822

<b>2</b> Total of line 1, column (d)	<b>2</b>	32.6680
<b>3</b> Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years.	<b>3</b>	6.5336
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	<b>4</b>	142,701
<b>5</b> Multiply line 4 by line 3.	<b>5</b>	932,351
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b).	<b>6</b>	0
<b>7</b> Add lines 5 and 6.	<b>7</b>	932,351
<b>8</b> Enter qualifying distributions from Part XII, line 4. 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.	<b>8</b>	524,599

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948- see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 . . . . .		1	
Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .			
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . . . . .		2	
3 Add lines 1 and 2 . . . . .		3	0
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . . . . .		4	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .		5	0
6 Credits/Payments			
a 2016 estimated tax payments and 2015 overpayment credited to 2016 . . . . .	6a		
b Exempt foreign organizations - tax withheld at source . . . . .	6b		
c Tax paid with application for extension of time to file (Form 8868) . . . . .	6c		
d Backup withholding erroneously withheld . . . . .	6d		
7 Total credits and payments. Add lines 6a through 6d . . . . .	7		0
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached . . . . .	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .	9		0
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . . .	10		0
11 Enter the amount of line 10 to be Credited to 2017 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/> . . . . .	11		0

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? . . . . . If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
c Did the foundation file Form 1120-POL for this year? . . . . .		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ 0 (2) On foundation managers <input type="checkbox"/> \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .		X
b If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> MISSISSIPPI		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation . . . . .	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .		X

**Part VII-A Statements Regarding Activities (continued)**

	Yes	No
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). . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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) . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>www.cspire.com/company_info/about/programs/foundation</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14 The books are in care of ► <u>ELIZABETH C. PICKERING</u> Telephone no ► <u>601-974-7645</u> Located at ► <u>1018 HIGHLAND COLONY PKWY, STE 360, RIDGELAND, MS</u> ZIP+4 ► <u>39157-2068</u>		
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 . . . . .	<input type="checkbox"/>	N/A
16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . . See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**Part 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)? . . . . . (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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)? . . . . . Organizations relying on a current notice regarding disaster assistance check here . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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))		
a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? . . . . . If "Yes," list the years ►	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b 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) . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If "Yes," did it have excess business holdings in 2016 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 2016) . . . . .	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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 2016?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

- 5a** During the year did the foundation pay or incur any amount to
- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No
- b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ Yes ☒ No
- Organizations relying on a current notice regarding disaster assistance check here ☐
- c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☒ No
- If "Yes," attach the statement required by Regulations section 53.4945-5(d)
- 6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No
- If "Yes" to 6b, file Form 8870.
- 7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No
- b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No

**5b****6b****7b****Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 3		21,218	0	0

**2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000. ☐

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		

## Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
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		Amount
1	N/A	
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities . . . . .	<b>1a</b>	
<b>b</b>	Average of monthly cash balances . . . . .	<b>1b</b>	144,874
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c) . . . . .	<b>1d</b>	144,874
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets . . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d . . . . .	<b>3</b>	144,874
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	2,173
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 . . . . .	<b>5</b>	142,701
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	<b>6</b>	7,135

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part)

<b>1</b>	Minimum investment return from Part X, line 6 . . . . .	<b>1</b>	7,135
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5 . . . . .	<b>2a</b>	0
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b . . . . .	<b>2c</b>	0
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	<b>3</b>	7,135
<b>4</b>	Recoveries of amounts treated as qualifying distributions . . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	7,135
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	<b>7</b>	7,135

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 . . . . .	<b>1a</b>	524,599
<b>b</b>	Program-related investments - total from Part IX-B . . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required) . . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule) . . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 . . . . .	<b>4</b>	524,599
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) . . . . .	<b>5</b>	
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	<b>6</b>	524,599

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
<b>1</b> Distributable amount for 2016 from Part XI, line 7 . . . . .				7,135
<b>2</b> Undistributed income, if any, as of the end of 2016				
<b>a</b> Enter amount for 2015 only. . . . .				
<b>b</b> Total for prior years 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011 . . . . .	530,840			
<b>b</b> From 2012 . . . . .	656,115			
<b>c</b> From 2013 . . . . .	588,802			
<b>d</b> From 2014 . . . . .	664,255			
<b>e</b> From 2015 . . . . .	563,693			
<b>f</b> Total of lines 3a through e . . . . .	3,003,705			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 524,599				
<b>a</b> Applied to 2015, but not more than line 2a . . .				
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required - see instructions) . . . . .				
<b>d</b> Applied to 2016 distributable amount. . . . .				7,135
<b>e</b> Remaining amount distributed out of corpus. . .	517,454			
<b>5</b> Excess distributions carryover applied to 2016 . (If an amount appears in column (d), the same amount must be shown in column (a).)				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,521,159			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
<b>c</b> 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 . . . . .				
<b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions . . . . .		0		
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount - see instructions . . . . .			0	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017. . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . .				
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . .	530,840			
<b>9</b> Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a . . . . .	2,990,319			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2012 . . .	656,115			
<b>b</b> Excess from 2013 . . .	588,802			
<b>c</b> Excess from 2014 . . .	664,255			
<b>d</b> Excess from 2015 . . .	563,693			
<b>e</b> Excess from 2016 . . .	517,454			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling . . . . .

**b** Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year		Prior 3 years		(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					0
<b>b</b> 85% of line 2a . . . . .	0	0	0	0	0
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					0
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					0
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .	0	0	0	0	0
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test - enter					
<b>(1)</b> Value of all assets. . . . .					0
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i). . . . .					0
<b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .					0
<b>c</b> "Support" alternative test - enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties). . . . .					0
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					0
<b>(3)</b> Largest amount of support from an exempt organization. . . . .					0
<b>(4)</b> Gross investment income . . . . .					0

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

MEREDITH CREEKMORE

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

ELIZABETH C. PICKERING, 1018 HIGHLAND COLONY PKWY, STE 360, RIDGELAND, MS 39157 (601)355-1522

**b** The form in which applications should be submitted and information and materials they should include

REQUESTS ARE MADE BY FORMAL GRANT REQUEST FORM AND APPROVED BY THE BOARD

**c** Any submission deadlines

N/A

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

N/A

**Part XV** **Supplementary Information** *(continued)***3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> SEE STATEMENT 4				473,167
<b>Total</b> . . . . .			▶ <b>3a</b>	473,167
<b>b</b> <i>Approved for future payment</i> N/A				0
<b>Total</b> . . . . .			▶ <b>3b</b>	0

<b>Part XVI-A</b>	<b>Analysis of Income-Producing Activities</b>
-------------------	--

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments . . . . .						
3 Interest on savings and temporary cash investments .						
4 Dividends and interest from securities . . . . .						
5 Net rental income or (loss) from real estate						
a Debt-financed property . . . . .						
b Not debt-financed property . . . . .						
6 Net rental income or (loss) from personal property. .						
7 Other investment income . . . . .						
8 Gain or (loss) from sales of assets other than inventory						
9 Net income or (loss) from special events . . . . .						
10 Gross profit or (loss) from sales of inventory. . .						
11 Other revenue a _____						
b _____						
c _____						
d _____						
e _____						
12 Subtotal Add columns (b), (d), and (e) . . . . .			0		0	0
13 Total. Add line 12, columns (b), (d), and (e) . . . . .						0

(See worksheet in line 13 instructions to verify calculations )

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

- |          |  | Yes          | No |
|----------|--|--------------|----|
| <b>1</b> | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  |              |    |
| <b>a</b> | Transfers from the reporting foundation to a noncharitable exempt organization of  |              |    |
|          | (1) Cash . . . . .   | <b>1a(1)</b> | X  |
|          | (2) Other assets . . . . .   | <b>1a(2)</b> | X  |
| <b>b</b> | Other transactions   |              |    |
|          | (1) Sales of assets to a noncharitable exempt organization . . . . .   | <b>1b(1)</b> | X  |
|          | (2) Purchases of assets from a noncharitable exempt organization . . . . .   | <b>1b(2)</b> | X  |
|          | (3) Rental of facilities, equipment, or other assets . . . . .   | <b>1b(3)</b> | X  |
|          | (4) Reimbursement arrangements . . . . .   | <b>1b(4)</b> | X  |
|          | (5) Loans or loan guarantees . . . . .   | <b>1b(5)</b> | X  |
|          | (6) Performance of services or membership or fundraising solicitations . . . . .   | <b>1b(6)</b> | X  |
| <b>c</b> | Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . .   | <b>1c</b>    | X  |
| <b>d</b> | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. |              |    |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No
- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee Elizabeth C. Byrd Date 5/10/17

EXECUTIVE DIRECTOR

---

Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☐ Yes ☐ No

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶			Firm's EIN ▶	
	Firm's address ▶			Phone no	

**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2016**

Name of the organization

Employer identification number

C SPIRE WIRELESS FOUNDATION

20-3426826

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)( ) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> C SPIRE WIRELESS FOUNDATION	<b>Employer identification number</b> 20-3426826
--	---

**Part I** Contributors (See instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CELLULAR SOUTH, INC. 1018 HIGHLAND COLONY PKWY, STE 330 RIDGELAND, MS 39157-2061	\$ 600,000	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	HU MEENA 1018 HIGHLAND COLONY PKWY, STE 300 RIDGELAND, MS 39157-2068	\$ 5,000	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
3	JAMES CREEKMORE #7 CYPRESS LANE JACKSON, MS 39211-5935	\$ 20,000	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
4		\$	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
5		\$	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)



Name of organization

Employer identification number

C SPIRE WIRELESS FOUNDATION

20-3426826

**Part II** Noncash 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
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

C SPIRE WIRELESS FOUNDATION

20-3426826

**Part III** *Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)* ▶ \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____		_____	
_____		_____	
_____		_____	

C SPIRE WIRELESS FOUNDATION

20-3426826

FORM 990-PF

PART I, LINE 1 - CONTRIBUTIONS, GIFTS,  
GRANTS, ETC. RECEIVED

STATEMENT 1

CONTRIBUTIONS

629,500

STATEMENT 1

FORM 990-PF

PART I, LINE 23 -  
OTHER EXPENSES

STATEMENT 2

<u>DESCRIPTION</u>	(A) <u>EXPENSES</u> <u>PER BOOKS</u>	(B) <u>NET INVEST-</u> <u>MENT INCOME</u>	(C) <u>ADJUSTED</u> <u>NET INCOME</u>	(D) <u>CHARITABLE</u> <u>PURPOSES</u>
BANK CHARGES	173	0		173
CONTRACT LABOR	28,260	0		28,260
WEBSITE	150	0		150
TO FORM 990-PF, PG 1, LN 23	<u>28,583</u>	<u>0</u>	<u>N/A</u>	<u>28,583</u>

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS  
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 3

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVG HRS / WK</u>	<u>COMPENSATION</u>	<u>EMPLOYEE BEN PLAN CONTR</u>	<u>EXPENSE ACCOUNT</u>
ELIZABETH BYRD 1018 HIGHLAND COLONY PKWY, STE 360 RIDGELAND, MS 39157	EXEC DIR 8.00	21,218	0	0
HU MEENA 1018 HIGHLAND COLONY PKWY, STE 300 RIDGELAND, MS 39157	PRESIDENT 0.00	0	0	0
WESLEY GOINGS 1018 HIGHLAND COLONY PKWY, STE 500 RIDGELAND, MS 39157	VICE PRES 0.00	0	0	0
MEREDITH CREEKMORE 1018 HIGHLAND COLONY PKWY, STE 500 RIDGELAND, MS 39157	SECR / TREAS 0.00	0	0	0
JIM RICHMOND 1018 HIGHLAND COLONY PKWY, STE 340 RIDGELAND, MS 39157	DIRECTOR 0.00	0	0	0
TO FORM 990-PF, PG 6, PART VIII		<u>21,218</u>	<u>0</u>	<u>0</u>

## FORM 990-PF

## PART XV - SUPPLEMENTARY INFORMATION

## STATEMENT 4

## 3. GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME	RECIPIENT ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF CONTRIBUTION (EVENT)	AMOUNT
21 United	1090 Augusta Drive Oxford, MS 38655	PC	2016 Buddy Walk	\$ 3,000.00
Alcorn State University	1000 ASU Drive, #810 Alcorn State, MS 39096	PC	Annual Scholarship	\$ 12,000.00
American Heart Association	2159 East Pass Road Gulfport, MS 39525	PC	Gulf Coast Heart Walk	\$ 5,000.00
American Lung Association	438 Katherine Drive, Suite C Flowood, MS 39232	PC	Fight for Air Climb 2016	\$ 2,500.00
Back Back Mission	P. O. Box 288 Biloxi, MS 39533	PC	Building Pathways out of Poverty	\$ 1,000.00
Base Camp Coding Academy	301 North Main St, Suite #3 Water Valley, MS 38965	PC	Coding Academy	\$ 16,667.00
Big Brothers Big Sisters of Mississippi	P. O. Box 16414 Jackson, MS 39236	PC	Bow for Kids Sake 1017	\$ 2,500.00
Boys & Girls Clubs of Central Mississippi	1450 W. Capitol Street Jackson, MS 39207	PC	2016 Blues by Starlight	\$ 2,500.00
BPO International	P. O. Box 958 Clinton, MS 39060	PC	Outreach Ministry	\$ 5,000.00
Delta Grace, Inc.	P. O. Box 218 Sunflower, MS 38778	PC	Work in Poverty Stricken Delta	\$ 1,000.00
Delta State University	Box 3141 Cleveland, MS 38733	PC	Annual Scholarship	\$ 6,000.00
Diabetes Foundation of Mississippi	800 Avery Blvd, Suite 100 Ridgeland, MS 39157	PC	2017 Bacchus Ball	\$ 2,500.00
Eudora Welty Foundation	P. O. Box 55685 Jackson, MS 39685	PC	Mississippi Scholastic Writing Awards	\$ 12,000.00
First Presbyterian Day School	1390 North State Street Jackson, MS 39202	PC	Holiday Potpourri	\$ 5,000.00
Friends of Children's Hospital	3900 Lakeland Drive, Ste 205 Flowood, MS 39232	PC	Enchanted Evening Gala	\$ 5,000.00
Goodwill Excel Center Midsouth, Inc.	1490 Norris Road Memphis, TN 38106	PC	Changing Lives	\$ 2,000.00
Greater Jackson Chamber Partnership	201 S. President Street Jackson, MS 39206	PC	Youth Leadership Jackson	\$ 3,000.00
Harbor House of Jackson, Inc	5354 1-55 Frontage Road East Jackson, MS 39272	PC	Chemical Dependency Treatment	\$ 1,000.00
Hope Hollow Ministries	910A Catlett Road Canton, MS 39046	PC	Summer Camp	\$ 1,000.00
Jackson Heart Foundation	P. O. Box 5021 Jackson, MS 39296	PC	Young at Heart event	\$ 5,000.00
Jackson State University	P. O. Box 17144 Jackson, MS 39217-0144	PC	Annual Scholarship	\$ 15,000.00
Jackson Touchdown Club, Inc.	P. O. Box 16388 Jackson, MS 39238-6388	PC	2015 & 2016 Corporate Title Sponsorship	\$ 25,000.00

FORM 990-PF

## PART XV - SUPPLEMENTARY INFORMATION

STATEMENT 4

## 3. GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME	RECIPIENT ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF CONTRIBUTION (EVENT)	AMOUNT
Jr. Auxiliary of Rankin County	P. O. Box 1484 Brandon, MS 39043	PC	JA's Charity Ball	\$ 3,000.00
March of Dimes	586 Lakeland East Dr, Ste B Flowood, MS 39232	PC	Jackson Signature Chefs Auction	\$ 3,000.00
Miracle League of Central Mississippi	P. O. Box 5301 Brandon, MS 39047	PC	Miracle Field Capital Campaign	\$ 1,000.00
Mississippi Children's Museum	P. O. Box 55409 Jackson, MS 39296-5409	PC	MS Science Festival	\$ 10,000.00
Mississippi Food Network	440 West Beatty Street Jackson, MS 39201	PC	Food Pantry	\$ 1,000.00
Mississippi Kidney Foundation	3000 Old Canton Rd, Suite 110 Jackson, MS 39216	PC	Statewide Screening for Kidney Disease	\$ 2,000.00
Mississippi Metropolitan Ballet	P. O. Box 430 Madison, MS 39130	PC	Scholarships	\$ 500.00
Mississippi Museum of Art	380 South Lamar Street Jackson, MS 39201	PC	Art Garden	\$ 44,000.00
Mississippi State University	P. O. 6149 Mississippi State, MS 39762	PC	Annual Scholarship	\$ 15,000.00
University of MS Foundation - Mississippi Teacher Corp	226 Guyton Hall University, MS 38677	PC	Scholarship Endowment	\$ 5,000.00
Mississippi University for Women	1100 College Street Columbus, MS 39701	PC	Annual Scholarship	\$ 6,000.00
Mississippi Valley State University	1400 US Highway 82 W Itta Bena, MS 38941	PC	Annual Scholarship	\$ 6,000.00
MS Campaign for Teen Pregnancy Prevention	606 South Springlake Circle Terry MS 39170	PC	Phone for Organization	\$ 500.00
Muscular Dystrophy Association	3149 Players Club Pkwy Memphis, TN 38125	PC	Summer Camp 2017	\$ 1,000.00
Mustard Seed	1085 Luckney Road Madison, MS 39110	PC	Ladies Luncheon/Tea and Racin' for the Seed	\$ 5,000.00
Operation Shoestring	1711 Bailey Ave. Jackson, MS 39283	PC	Project Rise After School and Summer Program	\$ 5,000.00
Palmer Home for Children	P. O. Box 746 Columbus, MS 39703	PC	Tailgate for Palmer	\$ 5,000.00
Piney Woods School	5096 Highway 49 S, Box 99 Piney Woods, MS 39148	PC	Coding Education	\$ 10,000.00
Children's of Mississippi - RebelTHON	20 Private Rd 3086 Oxford, MS 38655	PC	RebelTHON	\$ 1,000.00
Republic Schools	309 W. McDowell Road Jackson, MS 39204	PC	Relmagine Prep	\$ 10,000.00
RyanMan Foundation	106 Belle Cove Madison, MS 39110	PC	2016 RyanMan Half Distance Triathlon	\$ 2,500.00
Salvation Army	P. O. Box 31954 Jackson, MS 39286	PC	Kettle Ringing Campaign, Labor of Love 5K/10K	\$ 7,500.00

FORM 990-PF

## PART XV - SUPPLEMENTARY INFORMATION

STATEMENT 4

## 3. GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

<u>RECIPIENT NAME</u>	<u>RECIPIENT ADDRESS</u>	<u>FOUNDATION STATUS OF RECIPIENT</u>	<u>PURPOSE OF CONTRIBUTION (EVENT)</u>	<u>AMOUNT</u>
Southern Christian Services	860 E. River Place, Suite 104 Jackson, MS 39202	PC	Sonny Fountain Golf Tournament	\$ 2,500.00
Special Olympic MS - Capital Region	P. O. Box 2121 Madison, MS 39047	PC	5th annual Capital Region Mudbug Mambo	\$ 1,000.00
SR1	360 Town Center Blvd, Ste 1A Ridgeland, MS 39157	PC	Cool Stem Project	\$ 2,500.00
Sunnybrook Children's Home	222 Sunnybrook Road Ridgeland, MS 39157	PC	2017 Champions for Children	\$ 1,000.00
The Arc Mid-South	3485 Poplar Avenue, Suite 210 Memphis, TN 38111	PC	Creating Independence...Supporting Literacy	\$ 1,000.00
The Foundation for Mississippi History	P. O Box 571 Jackson, MS 39205	PC	Museum of MS History/Civil Rights Museum	\$ 100,000.00
The McCoy House for Sober Living	438 Fernwood Drive Jackson, MS 39206	PC	Phil Coulter in Concert	\$ 5,000.00
University of Mississippi Foundation	P. O. Box 249 University, MS 38677	PC	Annual Scholarship	\$ 15,000.00
University of Mississippi Foundation	P. O. Box 38677 University, MS 38677	PC	Women's Council Legacy Awards	\$ 25,000.00
University of Southern Mississippi	P. O. Box 249 Hattiesburg, MS 39406	PC	Annual Scholarship	\$ 15,000.00
Women's Foundation of Mississippi	Plaza Building, Suite 903 120 North Congress Street Jackson, MS 39201	PC	SMART Party	\$ 25,000.00
Youth Villages	805 S Wheatley Street, Ste 240 Ridgeland, MS 39157	PC	Tribute to Excellence Spring Dinner	\$ 2,500.00

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