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

OMB No 1545-0052

2016

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

For ca	alendar year 2016 or tax year beginning	, 2016	, and ending	,	
	EY ROCK ENDTIME FOUNDATION			A Employer Identification nu 20-8949343	
	5 RIO CORDILLERA RNE, TX 78006			B Telephone number (see ins	
				C If exemption application is	s pending, check here 🕨 🗌
G Ch	neck all that apply Initial return	Initial return of a form	ner public charity	D 1 Foreign organizations, che	eck here.
	Address change	Name change		2 Foreign organizations med here and attach computations	
H Ch	neck type of organization X Section 50 Section 4947(a)(1) nonexempt charitable to	I(c)(3) exempt private f		E If private foundation statu	
	r market value of all assets at end of year J Acc	ounting method X C		under section 507(b)(1)(A	
\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	<u>.</u>	Other (specify) column (d) must be or	n cash basis)	If the foundation is in a 6 under section 507(b)(1)(8	
Part	Analysis of Revenue and Expenses (The total of amounts in	(a) Revenue and	(b) Net investmen		(d) Disbursements
ang (columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	expenses per books	income	income	for charitable purposes (cash basis only)
10	, , , , , , , , , , , , , , , , , , , ,	202,571.			
	2 Check ► if the foundation is not required to attach Sch. B				
13.77	3 Interest on savings and temporary cash investments 4 Dividends and interest from securities	12. 138,051.	138,05		
	5 a Gross rents	138,031.	130,03.	1. 130,031.	
· R	b Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10	-101,763.			
K E > E N	b Gross sales price for all assets on line 6a 1, 931, 643.	101,705.			
Ē	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain		(0.	
Ü	9 Income modifications				
_	10 a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	C Gross profit or (loss) (attach schedule). 11 Other income (attach schedule)				
	The other meeting (attack) scheduley				
	12 Total. Add lines 1 through 11	238,871.	138,06	3. 138,063.	
	13 Compensation of officers, directors, trustees, etc.14 Other employee salaries and wages	100,000.			
	15 Pension plans, employee benefits				
A D	16a Legal fees (attach schedule) b Accounting fees (attach sch) See St 1	1 100			
M !	c Other professional fees (attach sch) See St 2	1,100. 1,250.		REC	EIVED
O I P S	17 Interest	1,100.		<u>න</u>	S
O I S E R A A T T	18 Taxes (attach schedule)(see instrs) See Stm 3 19 Depreciation (attach	11,332.	2,41	7. S JUL	3 1 2017
- 1 i	schedule) and depletion				
N V G E	20 Occupancy 21 Travel, conferences, and meetings	2,570.		OGD	EN, UI
A E N X D P	22 Printing and publications	2,370.			
N X D P E N	23 Other expenses (attach schedule) See Statement 4	472.			
S E S	24 Total operating and administrative		0.411	7	
S	expenses Add lines 13 through 23 25 Contributions, gifts, grants paid Part XV	116,724. 555,100.	2,41	1.	555,100.
	26 Total expenses and disbursements Add lines 24 and 25		0 /11	7	
	27 Subtract line 26 from line 12	671,824.	2,41	7. 0.	555,100.
	a Excess of revenue over expenses and disbursements	-432,953.			
	b Net investment income (if negative, enter -0-)	101, 300.	135,64		
DAA	C Adjusted net income (if negative, enter -0-)	A A.*		138,063.	F 000 PF (001 5)
DAA	For Paperwork Reduction Act Notice, see ins	tructions.	TEEA0504L 12/	16/16	Form 990-PF (2016)

Par	+ 11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	of year
		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing	27,075.	72,568.	
	2	Savings and temporary cash investments			
	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 sch)			
A		Less allowance for doubtful accounts ▶			
š	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges			
Ś	10 a	Investments – US and state government obligations (attach schedule)		-	
	t	Investments — corporate stock (attach schedule)			
	C	: 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)	5,104,420.	4,621,497.	
	14	Land, buildings, and equipment basis ►			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe See Statement 5)	30.	30.	
	16	Total assets (to be completed by all filers – see the instructions. Also, see page 1, item I)	5,131,525.	4,694,095.	0.
L	17	Accounts payable and accrued expenses	4,476.	1,001,000.	<u> </u>
A	18	Grants payable	-, -, -, -,		
B	19	Deferred revenue			
-	20	Loans from officers, directors, trustees, & other disqualified persons			
Ī	21	Mortgages and other notes payable (attach schedule)			
T	22	Other liabilities (describe ►)	1.		
Ē S	22	Total liabilities (add lines 17 through 22)	4 477		
_ >	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here ► X	4,477.	0.	
		and complete lines 24 through 26 and lines 30 and 31.			
N F E U T N		Unrestricted	5,127,048.	4,694,095.	
ŦŇ	25	Temporarily restricted			
ΔD	26	Permanently restricted			
ASSETS		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ELTA	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
o E	29	Retained earnings, accumulated income, endowment, or other funds			
RS	30 31	Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances	5,127,048.	4,694,095.	
		(see instructions)	5,131,525.	4,694,095.	
Par	HI /	Analysis of Changes in Net Assets or Fund Balance	es	1	
	end-d	net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return)	mn (a), line 30 (must ag	ree with 1	5,127,048.
2		amount from Part I, line 27a		2	-432,953.
3		increases not included in line 2 (itemize).	. 	3	
4		ines 1, 2, and 3.	-	4	4,694,095.
		ses not included in line 2 (itemize)		5	
	Total	net assets or fund balances at end of year (line 4 minus line 5)	- Part II, column (b), II	ne 30 6	4,694,095.
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Pai	(a) List and describe	LOSSES for I ax on Investmer the kind(s) of property sold (e g , r ouse, or common stock, 200 shares	eal estate	(b) How acq	uired	(C) Date acquired (mo, day, yr)	(d) Date sold (mo , day, yr)
				D — Donat	ion		
	VARIOUS COVERED ST	MERRILL LYNCH INVESTME MERRILL LYNCH INVESTME		P P	-	Various Various	<u>Various</u> Various
	Wash Sale	MEIGGILL LINCH INVESTE	ENIS	L		various	various
	Capital gain divide	ends		,			
	<u> </u>						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba	le		(h) Gain or (e) plus (f) m	(loss) ınus (g)
<u>a</u>				9,400.			7,032.
t	0,2,112.		71	4,006.			-141,564.
			·				·
	Complete only for assets show	ring gain in column (h) and owned b	y the foundation on 12/31	/69		(I) Gains (Col	(h)
	(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			n minus col (k), be -0-) or Losses (fr	ut not less
a					-		7,032.
							-141,564.
							642.
							32 <u>,</u> 769.
e							
	Capital gain net income or (ne	_	enter in Part I, line 7 er -0- in Part I, line 7		2		-101,121.
3	Net short-term capital gain or	(loss) as defined in sections 1222(5)) and (6)				
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) (see instructions) If	(loss), enter -0-	-	3		0
Par		Section 4940(e) for Reduce	d Tay on Net Investm	ent Inco	-		0.
(For		oundations subject to the section 4940				N/A	
	ction 4940(d)(2) applies, leave t			·		,	
		ction 4942 tax on the distributable a	• •	ase period	7	Yes	No
	·	lify under section 4940(e) Do not c		1			
		each column for each year, see the ins		entries		(4)	
	(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use as:	sets	(c	(d) Distribution ol (b) divided	
	2015		·				
	2014						
	2013						
	2012			-			
	2011						
2	Total of line 1, column (d).				2		
3		ne 5-year base period — divide the to n has been in existence if less than		he	3		
	•		•				
4	Enter the net value of nonchar	itable-use assets for 2016 from Pari	X, line 5	-	4		
5	Multiply line 4 by line 3			-	5		
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)			6		
7	Add lines 5 and 6			_	7		_
8	Enter qualifying distributions fr	om Part XII, line 4			8		
	If line 8 is equal to or greater that Part VI instructions	n line 7, check the box in Part VI, line	1b, and complete that part i	using a 1% t	ax rat	e See the	

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	s)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here			
	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,		2,7	713.
	check here ► and enter 1% of Part I, line 27b			
С	: 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-).			0.
3	Add lines 1 and 2		2.7	713.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		2.7	713.
6	Credits/Payments.			
а	2016 estimated tax pmts and 2015 overpayment credited to 2016			1
	Exempt foreign organizations — tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld 6 d			
	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached.			81.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed See Statement 6 9		2 7	794.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2017 estimated tax			
	t VII-A Statements Regarding Activities			
			Yes	No
ıa	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?	1 a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1 b		х
	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			
С	Did the foundation file Form 1120-POL for this year?	1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
_	(1) On the foundation \$\ 0. (2) On foundation managers \$\ 0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers • \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
_	If 'Yes,' attach a detailed description of the activities	_		
_		.	ŀ	
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	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b	N	/A
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
•	If 'Yes,' attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	1		
•	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? 	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV	7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	N/A			
b	of 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 <i>General Instruction G</i> ? <i>If 'No,' attach explanation</i>	8 b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(1)(3) or 4942(1)(5).			
J	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	9		Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10		Х
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1 6	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	Yes	No X
12	2 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		Х
13	3 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A		-	
14	Telephone no ► (98	5) 249	<u>-834</u>	<u> </u>
15	Located at ► 3056 RIO CORDILLERA BOERNE TX ZIP + 4 ► 78006 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	<u>N</u> /7	<u></u>	
13	and enter the amount of tax-exempt interest received or accrued during the year	+1/ +	•	∐ N/A
16			Yes	No
10	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?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Pa	art 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
'	a During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X N	'		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X N	,		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X N)		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes XN	>		
	(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)? Yes XN	•		
	(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) Yes X 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)?	1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here			
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?	1 c		X
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 ► 20 , 20 , 20 , 20			
	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		<u> </u>	<u></u>
	all years listed, answer 'No' and attach statement — see instructions.).	2 b	N	/A
	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 , 20			
2				
J	Pa Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X N	o		
	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)	3 b	N	/A
4	la Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		Х
	h Did the foundation make any anatomatic and an anatomatic and a second			
	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			
n -	the tax year beginning in 2016?	4 b	<u> </u>	X
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Form 990-PF (2016) HONEY ROCK ENDTIME Part VII-B Statements Regarding Activiti		1 4720 May Be Reg	20-894	49343	Page 6
5 a During the year did the foundation pay or incu		1 47 20 may Bo Hoq	an ou (commucu)		
(1) Carry on propaganda, or otherwise attempt	=	n (section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section	1 4955), or to carry		No	
(3) Provide a grant to an individual for travel,		purposes?	\vdash	No	
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions	a charitable, etc , organi 3)	zation described	Yes X	No	
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the exceptions disaster assistance	ptions	5 b	N/A
Organizations relying on a current notice rega	rding disaster assistand	ce check here	▶ [
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?		N/A Yes	No	
If 'Yes,' attach the statement required by Regi		• •			
6 a Did the foundation, during the year, receive ar on a personal benefit contract?b Did the foundation, during the year, pay premi			Yes X	No 6b	X
If 'Yes' to 6b, file Form 8870	diris, directly of indirec	tiy, on a personal bene	iii contract.	- 60	^_
7a At any time during the tax year, was the found	dation a party to a proh	ibited tax shelter transa	action? Yes X	No	
b If 'Yes,' did the foundation receive any procee				I/A 7b	
Part VIII Information About Officers, D				•/	 5.
and Contractors	, , , , , , , , , , , , , , , , , , , ,	•	, , .	,	- 7
1 List all officers, directors, trustees, foundation	n managers and their o	compensation (see inst	ructions).		
(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) Expens other al	e account, llowances
SAMUEL M. CAMP	President	0.	0.		0.
139 BODET LANE COVINGTON, LA 70433	0				
JUDITH M. CAMP	Vice Preside	0.	0.		0.
139 BODET LANE	0				
COVINGTON, LA 70433					
ASHLEY ESPINAL	Director	100,000.	0.		0.
139 BODET LANE	40.00				
COVINGTON, LA 70433					
2 Compensation of five highest-paid employees (of	her than those included (on line 1 — see instructio	ns) If none, enter 'NONE	•	
		on mic 1 see mistraction	(d)Contributions to		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expens other a	e account, llowances
None					
			-		
		-			
				-	
Total number of other employees paid over \$50,000)				0
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	Information About Officers, Directors, Trustees, Fou and Contractors (continued)		
3	Five highest-paid independent contractors for professional services (see		
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
<u>No</u> r	le		
Tota	number of others receiving over \$50,000 for professional services	.	0
Rar	Summary of Direct Charitable Activities		
<u>1</u>	e foundation's four largest direct charitable activities during the tax year. Include relevant statistications and other beneficiaries served, conferences convened, research papers produced, etc.		
2			
3			
4			
Par	tilX:B: Summary of Program-Related Investments (see instr	uctions)	<u> </u>
	ribe the two largest program-related investments made by the foundation during t		Amount
1			
_	N/A		
2			
All a	other program-related investments. See instructions		
3			
-			
Tota	l. Add lines 1 through 3		0.

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Form 990-PF (2016) HONEY ROCK ENDTIME FOUNDATION

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see instructions.)	oreign ioc	inuations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes a Average monthly fair market value of securities.	1 a	
b Average of monthly cash balances	1 b	
C Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	0.
e Reduction claimed for blockage or other factors reported on lines 1a and	14	
1c (attach detailed explanation).		
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0.
6 Minimum investment return. Enter 5% of line 5	6	0.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper		
and certain foreign organizations check here \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		dations
1 Minimum investment return from Part X, line 6	1 1	
2a Tax on investment income for 2016 from Part VI, line 5 2a 2, 713	,	
b Income tax for 2016 (This does not include the tax from Part VI)	-	
c Add lines 2a and 2b	2 c	2,713.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	-2,713.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	-2,713.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	0.
Part XII Qualifying Distributions (see Instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	555,100.
b Program-related investments — total from Part IX-B	1 b	333,100.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3 a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	555,100.
5 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)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	555,100.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the f qualifies for the section 4940(e) reduction of tax in those years	oundation	
BAA	F	orm 990-PF (2016)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2016				0.
a Enter amount for 2015 only		-	0.	
b Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2016				
a From 2011 41,837.				
b From 2012 57, 100.				
c From 2013 72, 100.				
d From 2014 235, 667. e From 2015 449 388				
e From 2015 449, 388. f Total of lines 3a through e	056 002			
4 Qualifying distributions for 2016 from Part	856,092.			
XII, line 4 ► \$ 555,100.				
a Applied to 2015, 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 required – see instructions)	0.			
d Applied to 2016 distributable amount				0.
e Remaining amount distributed out of corpus	555,100.			···
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the	0.			0.
same amount must be shown in column (a))				
6 - 1 1 1 1 1 1 1 1 1 1				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,411,192.			
b 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)				
tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount – see instructions				
Ì		0.		
e Undistributed income for 2015 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 2017				0.
7 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)	0.			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)	41 027			
· · · · · · · · · · · · · · · · · · ·	41,837.			<u> </u>
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	1,369,355.			
10 Analysis of line 9	_,000,000.			
a Excess from 2012 57, 100.	ļ			
b Excess from 2013 72,100.				
c Excess from 2014 235, 667.	ļ			
d Excess from 2015 449, 388.				
e Excess from 2016 555, 100.				

Form 990-PF (2016) HONEY ROCK ENDTI				20-8949343	Page 10
Privaté Operating Foundat					N/A
1 a If the foundation has received a ruling or dete is effective for 2016, enter the date of the	ruling	,		_	
b Check box to indicate whether the foundat		erating foundation		4942(J)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
investment return from Part X for each year listed	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly					···
for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets (2) Value of assets qualifying under			;		
section 4942(j)(3)(B)(i) b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).					
(2) Support from general public and 5 or more exempt organizations as provided					
in section 4942(j)(3)(B)(iii) (3) Largest amount of support from					
an exempt organization					
(4) Gross investment income				107.000	
Supplementary Information assets at any time during th			e foundation had	a \$5,000 or more	ın
Information Regarding Foundation Managers a List any managers of the foundation who have close of any tax year (but only if they have None	jers:	han 2% of the total o	contributions received e section 507(d)(2))	by the foundation before	ore the
b List any managers of the foundation who own	10% or more of the	stock of a corporation	on (or an equally larg	e portion of the owner	ship of
a partnership or other entity) of which the None	foundation has a	10% or greater inter	rest	e portion of the owner	31 lip 01
2 Information Regarding Contribution, Grant, C Check here X if the foundation only ma requests for funds If the foundation makes gr complete items 2a, b, c, and d	kes contributions to fts, grants, etc (see	preselected charitable instructions) to indiv	viduals or organizatio	ns under other conditi	icited ons,
a The name, address, and telephone number or	e-mail address of	the person to whom a	applications should be	e addressed	
b The form in which applications should be s	submitted and info	rmation and materi	als they should incli	ude	. ,
c Any submission deadlines					
d Any restrictions or limitations on awards, s	such as by geogra	phical areas, charita	able fields, kinds of	institutions, or other	factors
BAA	——————————	EEA0310L 12/16/16	**	F	form 990-PF (2016)

3	Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	t	
	Recipient	if recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	oona, baaan	
	Paid during the year				
See	Statement 7				
					;
			'		
				İ	
		}			
			\ 		
					Ì
					<u> </u>
	Total			► 3a	555,100.
b	Approved for future payment				
			}		
			[
			Ì		
			[
			1		
		1			1
		}	}		
	Tabel		L	<u> </u>	
	Total			► 3t	'

nter gross :	amounts unless otherwise indicated	Unrelated	ousiness income	Excluded by	section 512, 513, or 514	(e)
•		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exemp function income (See instructions)
1 Progra a	m service revenue			code		· · · · · · · · · · · · · · · · · · ·
b				+		
С						
d						
e						
g Fees a	nd contracts from government agencies					
	ership dues and assessments					
	on savings and temporary cash investments					1
	nds and interest from securities					138,05
	ntal income or (loss) from real estate					
	nanced property					
	bt-financed property					
	al income or (loss) from personal property nvestment income		 			
•	(loss) from sales of assets other than inventory	 				101 76
-	come or (loss) from special events.					-101,76
	profit or (loss) from sales of inventory			-+		
	revenue	 				
a				++-		
b				+		
		+		1		
С						
q c		1		} }	}	
· . — — —						
d	al Add columns (b), (d), and (e)					36,30
d e 2 Subtota 3 Total.	Add line 12, columns (b), (d), and (e)				13	
d e 2 Subtota 3 Total. ee worksh	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculate				.	
d e 2 Subtota 3 Total. ee worksh	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
d e 2 Subtota 3 Total. ee worksh	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculate	e Accomplis		 .	es	36,30
d e 2 Subtota 3 Total. ee worksh	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. See worksh	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,30
e 2 Subtota 3 Total. ee worksh art XVI-I	Add line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculat Relationship of Activities to the	e Accomplis		 .	es	36,300 36,300 y to the istructions)

Form 990-P	F (2016) HONEY F	ROCK ENDIT	ME FOUNI	DATTON				20	-8949343	Pa	qe 13
Part XVII	Information Rec	arding Tran			ns and	Relations	hips				<u> </u>
	Exempt Organiz	ations								Yes	No
1 Did the	e organization directly bed in section 501(c) o	or indirectly en	gage in any	of the following w	uth any o	ther organiz	ation			163	110
relatin	g to political organizat	ions?	ier trian seci	ion 501(c)(3) orga	anizations	s) or in section	011 527	,			İ
a Transf	ers from the reporting	foundation to a	noncharital	ole exempt organı	zation of						
(1) Ca	ash								1 a (1)		X
(2) Ot	her assets								1 a (2)		X
b Other	transactions										
• •	ales of assets to a non								1 b (1)		<u>X</u>
, ,	irchases of assets fror		•	rganızatıon					1 b (2)		_X_
• •	ental of facilities, equip	•	assets						1 b (3)		<u>X</u>
• • •	eimbursement arrange ans or loan quarantee								1 b (4) 1 b (5)	_	<u>X</u>
	erformance of services		or fundrais	ina solicitations					1 b (6)		<u>X</u>
` '	g of facilities, equipme	•		3	vees				1 c	_	X
	- ' ' '	•			-				<u> </u>		
d If the a	answer to any of the a ods, other assets, or ser	bove is 'Yes,' c vices given by th	omplete the ne reporting fo	following schedul oundation If the for	e Colum undation r	n (b) should eceived less t	always than fai	s show the r market	ie fair market val value in .	ue of	
(a) Line no	ansaction or sharing ai (b) Amount involved	, — <u> </u>		xempt organization					ons, and sharing arrai	ngement	
N/A	(b) Fillioune involved	(c) Hame of		xompt organization	+ (0,) Description of		, danoaca	ono, and onaring arrai	igenient	
				· · · · · · · · · · · · · · · · · · ·						_	
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		 			+	······································					
descri	foundation directly or incibed in section 501(c) of	of the Code (oth					ns		Yes	X	No
	,' complete the followi		(b) To	pe of organizatio	n	T	(c) D	ecription	n of relationship		
N/A	a) Name of organizati		(0)	ype of organizatio			(0)	CSCIPTIO	Torrelationship		
11/ Л				· · · · · · · · · · · · · · · · · · ·							
	· · · · · · · · · · · · · · · · · · ·					-					
	·		-					-			
corre	r penalties of perjury, I declar ct, and complete Declaration	e that I have examin of preparer (other th	ed this return, in an taxpayer) is l	cluding accompanying spased on all information	schedules ar of which pr	nd statements, ar eparer has any k	nd to the knowledge	best of my	knowledge and belief,	it is true	,
Sign Here	nature of officer or truster	Espire	MA	Date		Director			May the this return preparer (see inst	n with th shown b	ne below
	Print/Type preparer's nar	ne	(Apropala	signature	Ω	Date	 	Check	X of PTIN		
Paid	Steven J Joh	nson, CPA	4711	1 BEX XIVIU	LCHA	6/15	117	self emplo		3276	
Preparer			JOHNSON,	EA /	<u> </u>		Fire	<u> </u>	27-1822243		

Use Only

BAA

Firm's address 1127 N CAUSEWAY BLVD SPE B
MANDEVILLE, LA 70471-3208

Рһопе ло 985-674-3232

Form **990-PF** (2016)

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www irs gov/form990.

OMB No 1545-0047

2016

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of the organization		Employer identification number
HONEY ROCK ENDTIME FOUNDATION		20-8949343
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	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a priv	ate foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Genera	Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10) orga	anization can check boxes for both the General Rule and a S	Special Rule See instructions
General Rule		
X For an organization filing Form 990, 990-Ez property) from any one contributor Complete	7, or 990-PF that received, during the year, contributions total te Parts I and II See instructions for determining a contribu-	aling \$5,000 or more (in money or itor's total contributions
Special Rules		
\square under sections 509(a)(1) and 170(b)(1)(A)(vi).	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supp that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, ne year, total contributions of the greater of (1) \$5,000 or (2, 0-EZ, line 1 Complete Parts I and II	16a, or 16b, and that
For an organization described in section 50 during the year, total contributions of more purposes, or for the prevention of cruelty to	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lip children or animals. Complete Parts I, II, and III	from any one contributor, terary, or educational
during the year, contributions exclusively for \$1,000 If this box is checked, enter here the charitable, etc., purpose Don't complete an	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received or religious, charitable, etc., purposes, but no such contributions total contributions that were received during the year for any of the parts unless the General Rule applies to this organole, etc., contributions totaling \$5,000 or more during the year.	ons totaled more than an <i>exclusively</i> religious, iization beca <u>u</u> se
990-PF), but it must answer 'No' on Part IV, Iir	the General Rule and/or the Special Rules doesn't file Schec le 2, of its Form 990, or check the box on line H of its Form filing requirements of Schedule B (Form 990, 990-EZ, or 99	990-EZ or on its Form 990-PF.

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF

,,			
Schedule Name of org	B (Form 990, 990-EZ, or 990-PF) (2016)	Page Employe	1 of 1 of Part I
HONEY	ROCK ENDTIME FOUNDATION	20-8	949343
Partl	Contributors (see instructions) Use duplicate copies of Part I if additional s	pace is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SAM & JUDITH CAMP		Person X Payroll
	139 BODET_LANE	\$ <u>201,148.</u>	Noncash X
	COVINGTON, LA 70433		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash
	 		(Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)

(Complete Part II for noncash contributions)

(a) Number Name, address, and ZIP + 4 Contributions

Person Payroll Noncash Complete Part II for noncash contributions

(Complete Part II for noncash contributions)

1 to

1 of Part II

Name of organization
HONEY ROCK ENDTIME FOUNDATION

Employer identification number

20-8949343

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	3000 SHARES OF CSCO	-	
		\$81,101.	5/31/16
(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
		\$	
(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
		\$ 	
ВАА	Sch	 	7 or 990-PE\ (2016

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Page of Part III Name of organization Employer identification number HONEY ROCK ENDTIME FOUNDATION 20-8949343 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 (d) Description of how gift is held (a) No. from Part I (b) Purpose of gift (c) Use of gift N/A (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (b) Purpose of gift (c) Use of gift (a) No. from (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

2016	Page 1				
	HONEY ROCK ENDTIME FOUNDATION				
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income	(d) Charitable Purposes			
	Total $\frac{\$}{\$}$ 1,100. $\frac{\$}{\$}$ 0. $\frac{\$}{\$}$	\$ 0.			
Statement 2 Form 990-PF, Part I, Line 16c Other Professional Fees PAYROLL PROCESSING FEES	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 1,250. Total \$ 1,250. \$ 0.	(d) Charitable Purposes \$ 0.			
Statement 3 Form 990-PF, Part I, Line 18 Taxes					
FOREIGN TAXES PAID PAYROLL TAXES PAID	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 2,417. \$ 2,417. 8,915. \$ 2,417. \$ 0.	(d) Charitable Purposes \$ 0.			
Statement 4 Form 990-PF, Part I, Line 23 Other Expenses					
BANK FEES OFFICE SUPPLIES & EXPENSE POSTAGE SECRETARY OF STATE	(a) (b) Net (c) Expenses per Books Investment Income Adjusted Net Income \$ 15. 333. 109. 15. Total \$ 472. \$ 0.	(d) Charitable Purposes			

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	Federal Sta	tements		F	Page 2
	HONEY ROCK ENDTIME FOUNDATION				-894934
Statement 5 Form 990-PF, Part II, Line 15 Other Assets					
DUE FROM DIRECTOR		Tota	Book Value \$ 30. \$ 30.	Fair Mar Value	0.
Statement 6 Form 990-PF, Part VI, Penalty and Balance Due Tax Due Late Payment Penalty Late Interest	Interest		Total		,794. 41. 23. ,858.
Statement 7					
Form 990-PF, Part XV, Line 3a Recipient Paid During the Year Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amo	ount
Recipient Paid During the Year		ation			
Name and Address GRACE ADVENTURERS 701 RUE MARSEILLE	Relationship	ation <u>Status</u>	Grant TO AID THE MISSION OF THE	\$	35,000
Name and Address GRACE ADVENTURERS 701 RUE MARSEILLE MANDEVILLE LA 70471 UPWARD COMMUNITY SERVICES 1148 N COLUMBIA STREET	Relationship none	ation <u>Status</u> ACTIVE	Grant TO AID THE MISSION OF THE ORGANIZATION TO AID THE MISSION OF THE	\$	35,000
Name and Address GRACE ADVENTURERS 701 RUE MARSEILLE MANDEVILLE LA 70471 UPWARD COMMUNITY SERVICES 1148 N COLUMBIA STREET COVINGTON LA 70433 SAN ANTONIO AREA FOUNDATION-PROJECT RED 303 PEARL PKAY, SUITE 114	Relationship none	ation Status ACTIVE ACTIVE	Grant TO AID THE MISSION OF THE ORGANIZATION TO AID THE MISSION OF THE ORGANIZATION TO AID THE MISSION OF THE MISSION OF THE ORGANIZATION IN ITS EFFORTS IN	\$ 1	35,000 10,000
Name and Address GRACE ADVENTURERS 701 RUE MARSEILLE MANDEVILLE LA 70471 UPWARD COMMUNITY SERVICES 1148 N COLUMBIA STREET COVINGTON LA 70433 SAN ANTONIO AREA FOUNDATION-PROJECT RED 303 PEARL PKAY, SUITE 114 SAN ANTONIO TX 78215 INTERFAITH PRISON MINISTRIES PO BOX 51574	Relationship none none none	ACTIVE ACTIVE ACTIVE	Grant TO AID THE MISSION OF THE ORGANIZATION TO AID THE MISSION OF THE ORGANIZATION TO AID THE MISSION OF THE ORGANIZATION IN ITS EFFORTS IN PROJECT RED TO AID THE MISSION OF THE	\$ 1 N	00,000

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Statement 7 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
FINISHING THE WORK 116 EMERALD CREEK E BLVD ABITA SPRINGS LA 70420	none	ACTIVE	TO AID THE MISSION OF THE ORGANIZATION	\$ 10,000.
LIFE RESOURCES 233 OAK LANE MANDEVILLE LA 70448	none	ACTIVE	TO AID THE MISSION OF THE ORGANIZATION	15,000.
LIFE SAVERS OF ZAMBIA 11810 BRIARTON WELLS SAN ANTONIO TX 78254	none	ACTIVE	TO AID THE MISSION OF THE ORGANIZATION	13,000.
LOUISIANA METHODIST CHILDRENS HOME 904 DEVILLE LANE RUSTON LA 71270	none	ACTIVE	TO AID THE MISSION OF THE ORGANIZATION	5,000.
MANNA MINISTRIES PO BOX 20932 WACO TX 76702	none	ACTIVE	TO AID THE MISSION OF THE ORGANIZATION	5,000.
LOUISIANA BAPTIST CHILDERNS HOME PO BOX 4196 MONROE LA 71211	none	ACTIVE	TO AID THE MISSION OF THE ORGANIZATION	5,000.
LOUISIANA FAMILY FORUM 655 ST FERDINAND STREET BATON ROUGE LA 70802	none	ACTIVE	TO AID THE MISSION OF THE ORGANIZATION	10,000.
TEAM 5:18 PO BOX 2438 COVINGTON LA 70433	none	ACTIVE	TO AID THE MISSION OF THE ORGANIZATION	6,000
TIKVAT AM YISREAL 240 NICE LANE APT 107 NEWPORT BEACH CA 92663	none	ACTIVE	TO AID THE MISSION OF THE ORGANIZATION	6,000
BELLAIRE BAPTIST CHURCH 4330 PANTHER DRIVE BOSSIER CITY LA 71112	none		TO AID THE MISSION OF THE ORGANIZATION	3,500
CHILD LEGACY INTERNATIONAL PO BOX 805 BOERNE TX 78006	none		TO AID THE MISSION OF THE ORGANIZATION	134,600
DISCIPLESHIP NETWORK OF AMERICA 100 DOWNERS GROVE SIGNAL MOUNTAIN TN 37377	none		TO AID THE MISSION OF THE ORGANIZATION	6,000

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Statement 7 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation <u>Status</u>	Purpose of Grant	Amount
NEW ORLEANS BAPTIST THEOLOGY SEMINARY 3939 GENTILLY BLVD NEW ORLEANS LA 70126	none		TO AID THE MISSION OF THE ORGANIZATION	\$ 10,000.
MI ESPERANZA PO BOX 73 MADISONVILLE LA 70447	none		TO AID THE MISSION OF THE ORGANIZATION	5,000.
GOSPELINK PO BOX 4299 LYNCHBURG VA 24502	none	PC	TO AID THE MISSION OF THE ORGANIZATION	50,000.

Total \$ 555,100.