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2016

OMB No 1545-0052

Return of Private Foundation

Form 990-PF

Department of the Treasury

Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For	caler	ndar year 2016, or tax year beginning 01-01-20)16 , ar	nd er	nding 12-31-	2016	
		indation DUNDATION			A Employer Id	entification numbe	er
0.					23-7250795		
	ber and	street (or P O box number if mail is not delivered to street address)	Room/suite		B Telephone nu	mber (see instructio	ns)
Γ,	J BOX 1	.207			(251) 952-5810)	
	or town Y, AL	, state or province, country, and ZIP or foreign postal code 36536			C If exemption	application is pendir	ng, check here
	-1,712						" ▶ ∟
G Cł	neck al		former public charity		_	ganizations, check h	▶ ∟
		☐ Final return ☐ Amended return				rganizations meeting k here and attach co	
u		Pe of organization ✓ Section 501(c)(3) exempt private	formulation			undation status was	
		pe of organization			under sectio	n 507(b)(1)(A), che	ck here ► ∟
			☑ Cash ☐ Accru	al	F If the founda	ation is in a 60-mont	h termination $\qquad \qquad \Box$
of	year <i>(f</i>	rom Part II, col (c),	E casii E necia	uı		n 507(b)(1)(B), che	
шп	10)	\$ 34,117,062	be on cash basis)				
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Bayanya and				(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(ь)	Net investment income	(c) Adjusted net income	for charitable purposes
		equal the amounts in column (a) (see instructions))	books				(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)					
	2	Check ► ✓ If the foundation is not required to attach					
		Sch B					
	3	Interest on savings and temporary cash investments	6,642	-	6,642		
	4	Dividends and interest from securities	443,079	-	443,079		
	5a b	Gross rents	13,260	<u> </u>	13,260		
a)	6a	Net gain or (loss) from sale of assets not on line 10	1,230,816				
Ĕ	b						
Revenue		Gross sales price for all assets on line 6a 3,490,012					
ã	7	Capital gain net income (from Part IV, line 2)			1,230,816		
	8	Net short-term capital gain					
	9	Income modifications					
	10a b	Gross sales less returns and allowances Less Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)	<u></u>				
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	1,693,797	<u> </u> 	1,693,797		
	13	Compensation of officers, directors, trustees, etc	29,000		0		29,000
	14	Other employee salaries and wages	227,221		0		227,22
Š	15	Pension plans, employee benefits	6,137	 	0		6,13
nse	16a	Legal fees (attach schedule)	22,957		11,478		11,479
<u>6</u>	ь	Accounting fees (attach schedule)	48,725		14,618		34,10
Operating and Administrative Expenses	С	Other professional fees (attach schedule)	136,937		130,937		6,000
Ĕ	17	Interest					
stra	18	Taxes (attach schedule) (see instructions)	40,741		23,012		17,729
≣	19	Depreciation (attach schedule) and depletion	6,437		0		
E E	20	Occupancy					
7 pu	21	Travel, conferences, and meetings					
ä	22	Printing and publications	A& 1				
ğu:	23	Other expenses (attach schedule)	90,036	<u> </u>	14,674		60,686
erat	24	Total operating and administrative expenses.	600 101		104 740		303.35
ă	25	Add lines 13 through 23	608,191 2,273,711		194,719		392,359 2,273,711
	26		2,2/3,/11				2,2/3,/1.
	20	Total expenses and disbursements. Add lines 24 and 25	2,881,902		194,719		2,666,070
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements	-1,188,105				
	ь	Net investment income (If negative, enter -0-)			1,499,078		
	С	Adjusted net income(if negative, enter -0-)			· · · · · · · · · · · · · · · · · · ·		
For	Paper	work Reduction Act Notice, see instructions.	I		Cat No 11289>	· Fo	<u> </u>

Less accumulated depreciation (attach schedule) ▶ 35,589

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg , and equipment fund

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Analysis of Changes in Net Assets or Fund Balances

Other assets (describe > _

Other liabilities (describe ▶_

Unrestricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Permanently restricted . .

Temporarily restricted

instructions Also, see page 1, item I)

15 16

17

18

19 20

21

22

23

24

25

28 29

31 Part III

Liabilities

Balances

Fund 26

ō

Assets 27

Net 30

2

4,949,693

4,440,014

3,582

3,582

29,732,021

29,732,021

29,735,603

29,735,603

*

4,943,256

28,547,986

3,965,014

4,069

4,069

28,543,917

28,543,917

28,547,986

2

3

4

5

6

29,732,021

-1,188,105

28,543,917

28,543,917

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4,943,256

3,965,014

34,117,062

	(a) the kınd(s) of property sold (e g , re rehouse, or common stock, 200 shs	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)	
1 a TRUST COMPANY OF AM	ERICA		Р		
b CAPITAL GAINS DIVIDE	NDS		Р		
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain c	h) or (loss) on minus (g)
a 3,05	55,967		2,259,196		796,771
b 43	34,045				434,045
С					
d					
<u>е</u>					
	s showing gain in column (h) and ow	ned by the foundation	on 12/21/60		'1\
Complete only for asset	(i)	<u> </u>	(k)		(I) h) gain minus
(i)	Adjusted basis		of col (ı)	col (k), but not	less than -0-) or
F M V as of 12/31/69	as of 12/31/69		(j), if any	Losses (fr	om col (h))
a					796,771
b					434,045
c					
d					
e					
·	gain or (loss) as defined in sections : art I, line 8, column (c) (see instructi	, , , , ,	· }	3	1,230,816
-	Under Section 4940(e) for Re				
If section 4940(d)(2) applies,	private foundations subject to the sec	ction 4940(a) tax on ne	t investment incom	ie)	
Was the foundation liable for th	ne section 4942 tax on the distributal of qualify under section 4940(e). Do		in the base period	,	es 🗹 No
1 Enter the appropriate ar	nount in each column for each year,	see instructions before	making any entrie	s	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rat (col (b) divided by c	
2015	2,199,644		25,861,057		0 085056
2014	2,174,565		29,362,943		0 074058
2013	2,307,674		28,118,018		0 082071
2012	1,779,714		25,835,065		0 068888
2011	1,438,524		26,407,678		0 054474
2 Total of line 1, column (d)		2		0 364547
number of years the four 4 Enter the net value of no	o for the 5-year base period—divide indation has been in existence if less oncharitable-use assets for 2016 from	than 5 years	3		0 072909 23,831,107
5 Multiply line 4 by line 3			5		1,737,502
	ent income (1% of Part I, line 27b)		6		14,991
			7		1,752,493
	elons from Part XII, line 4 , eater than line 7, check the box in Pa				
					rm 000-DE (2016)

tax because it maintained expenditure responsibility for the grant?										
	a name and howeful conducted									
	b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b No									
If "Yes" to 6b, file Form 8870										
7a At any time during the tax year, was	the foundation a party to a p	prohibited tax shelter trai	nsaction? Yes	.						
b If yes, did the foundation receive any			∟ Yes 🛂	No 7b						
Part VIII Information About O and Contractors	fficers, Directors, Trust	tees, Foundation Ma	nagers, Highly Paid En	nployees,						
1 List all officers, directors, trustee	s, foundation managers ar	nd their compensation	-							
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances						
See Additional Data Table										
2 Compensation of five highest-paid	d employees (other than t	hose included on line 1	.—see instructions). If no	ne, enter "NONE."						
(a) Name and address of each employee par more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances						
BRENDA LEE	EXECUTIVE DIRECTOR	120,90	0	0						
PO BOX 1423 FOLEY, AL 36536	40 00									
THOMAS E LEE	GRANT DIRECTOR	106,32	6,137	0						
PO BOX 2259 FOLEY, AL 36536	40 00									
Total number of other employees paid ove	r \$50.000			0						
The state of the s				Form 990-PF (2016)						
				,,						

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Part VIII Information About Officers, Directors, Truste and Contractors (continued)	es, Foundation Managers, Highly Paid	Employees,
3 Five highest-paid independent contractors for professional se	ervices (see instructions). If none, enter "No	ONE".
(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.		0
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Includ	o relevant statistical information such as the number of	_
organizations and other beneficiaries served, conferences convened, research papers i		Expenses
1 OPERATION COSTS OF THE SNOOK TELEPHONE MUSEUM		54,992
2		
3		
4		
Part IX-B Summary of Program-Related Investments (s	see instructions)	
Describe the two largest program-related investments made by the foundation dur	· · · · · · · · · · · · · · · · · · ·	Amount
1		
		_
2		
		_
All other program-related investments See instructions		
3 %		0
Total. Add lines 1 through 3		Form 990-PF (2016)

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

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

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

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

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

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

Part XII

1

2

3

4

5

7

1a

1b

2

3a 3b

4

5

1.176.564

2,666,070

2.666.070

2.651.079

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14.991

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1,176,564

1.176.564

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b Total for prior years

c From 2013. .

From 2011. . . .

b From 2012.

d From 2014.

e From 2015.

XII, line 4 > \$

indicated below:

f Total of lines 3a through e.

d Applied to 2016 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. .

d Excess from 2015. . e Excess from 2016. . .

c Excess from 2014. . . .

b Excess from 2013. .

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount —see instructions e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 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) 8 Excess distributions carryover from 2011 not

4 Qualifying distributions for 2016 from Part

a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

Pa	rt	X	į	į	Ì

m 990-PF (20	016)	
art XIII	Undistributed Income	(see instructions)

Form 990-PF (20	016)
Part XIII	Undi

- 1 Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016
- a Enter amount for 2015 only.

 - Excess distributions carryover, if any, to 2016 133,336
 - 509.007

935,135

509.007

938,961

744.550

935.135

1.489.506

- 938.961
 - 744,550

(a)

Corpus

1.489.506

4,750,495

133,336

4,617,159

- 3,260,989

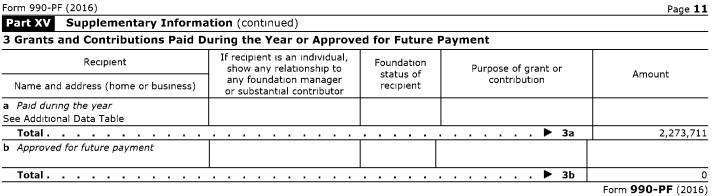
(b)

Years prior to 2015

(c)

2015

	m 990-PF (2016)					Page 10		
	art XIV Private Operating Found	•		- ' ' '				
	If the foundation has received a ruling or de foundation, and the ruling is effective for 20	16, enter the date	of the ruling	▶∟_				
	_	ion is a private ope	n is a private operating foundation described in section L 4942(j)(3) or L					
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	1	(e) Total		
	investment return from Part X for each	(a) 2016	(b) 2015	(c) 2014	(d) 2013			
	year listed		-					
	85% of line 2a		+					
٠	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							
а	"Assets" alternative test—enter							
	(1) Value of all assets							
	(2) Value of assets qualifying under section 4942(1)(3)(B)(I)							
ь	"Endowment" alternative test— enter 2/3		+					
-	of minimum investment return shown in							
_	Part X, line 6 for each year listed "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							
D.	Supplementary Information	(Complete this	part only if the	organization ha	d \$5,000 or mor	e in		
	assets at any time during th		tructions.)					
a	Information Regarding Foundation Man- List any managers of the foundation who hav before the close of any tax year (but only if MARJORIE Y SNOOK	ve contributed more				n		
ь	List any managers of the foundation who ow	n 10% or more of t	he stock of a corpora	ition (or an equally l	arge portion of the			
	ownership of a partnership or other entity)	of which the founda	ition has a 10% or gr	eater interest				
2	Information Regarding Contribution, Gr			_				
	Check here ▶ ☐ If the foundation only mak unsolicited requests for funds If the founda other conditions, complete items 2a, b, c, a	tion makes gifts, gi				nder		
а	The name, address, and telephone number of	or e-mail address o	f the person to whom	n applications should	l be addressed			
	THE SNOOK FOUNDATION							
	PO BOX 1267							
	FOLEY, AL 36536 (251) 952-5810							
	INFO@SNOOKFOUNDATION COM							
b	The form in which applications should be sul APPLICATION FORM CAN BE OBTAINED FRO			•	2-5810			
С	Any submission deadlines NONE							
d	Any restrictions or limitations on awards, su factors	ch as by geographi	cal areas, charitable	fields, kinds of instit	utions, or other			
	TO QUALIFY FOR FUNDING FROM THE SNOO ORIGINAL GULF TELEPHONE SERVICE AREA RIVER/MARLOW/SUMMERDALE, AND SOUTH FALL INTO THIS GEOGRAPHICAL COVERAGE DIRECTLY IMPACT THE RESIDENTS OF THIS	WHICH ENCOMPAS THROUGH FOLEY AREA, CONSIDER	SSES NORTH TO LOX AND GULF SHORES/O ATION MAY BE GIVEN	LEY AND STAPLETO ORANGE BEACH IF. NIF THEY ARE ABLE	N, EAST TO LILLIAN, A GROUP OR ORGAN TO SHOW HOW FUN	WEST TO FISH IZATION DOES NOT IDING WILL		



ter gross	amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	512, 513, or 514	(e) Related or exemp
Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
a						
b						
	and contracts from government agencies					
_	rship dues and assessments					
Intere	st on savings and temporary cash					
	ments					6,6
	ds and interest from securities					443,0
	tal income or (loss) from real estate financed property.					
	ebt-financed property					13,2
	ntal income or (loss) from personal property					13,2
	nvestment income					
	r (loss) from sales of assets other than					
	ory					1,230,8
Net inco	ome or (loss) from special events					
	profit or (loss) from sales of inventory					
	evenue a					
C						4 500 74
C.,L.			0		0	<u> </u>
Subtota Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0		0 B	<u> </u>
Subtota Total. ee worksl	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio Relationship of Activities to th	^{ns}) e Accomplish	ment of Exem	pt Purposes	3	1,693,79
Subtota Total. ee worksl art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation	ns) e Accomplish Income is reporte	ment of Exem	13 pt Purposes f Part XVI-A contribut	ted importantly to	1,693,79
Subtota Total. ee worksh art XVI ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte empt purposes (ment of Exem	13 pt Purposes f Part XVI-A contribut	ted importantly to	1,693,79
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Subtota Total. e worksh art XV ne No.	Ald Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) The columns (c), (d), and (e) The columns (c), (d), and (e) The columns (e), (d), and (e),	ns) e Accomplish Income is reporte empt purposes (RD GRANTS RD GRANTS	ment of Exem	13 pt Purposes f Part XVI-A contribut	ted importantly to	1,693,79
Subtota Total. e worksh art XV ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions) PROVIDES THE FUNDS TO BE USED TO AWA PROVIDES THE FUNDS TO BE USED TO AWA	ns) e Accomplish Income is reporte empt purposes (RD GRANTS RD GRANTS	ment of Exem	13 pt Purposes f Part XVI-A contribut	ted importantly to	1,693,79
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Subtota Total. e worksh art XVI ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions) PROVIDES THE FUNDS TO BE USED TO AWA PROVIDES THE FUNDS TO BE USED TO AWA	ns) e Accomplish Income is reporte empt purposes (RD GRANTS RD GRANTS	ment of Exem	13 pt Purposes f Part XVI-A contribut	ted importantly to	1,693,79
Subtota Total. e worksh art XVI ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions) PROVIDES THE FUNDS TO BE USED TO AWA PROVIDES THE FUNDS TO BE USED TO AWA	ns) e Accomplish Income is reporte empt purposes (RD GRANTS RD GRANTS	ment of Exem	13 pt Purposes f Part XVI-A contribut	ted importantly to	1,693,79
Subtota Total. e worksh art XVI ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions) PROVIDES THE FUNDS TO BE USED TO AWA PROVIDES THE FUNDS TO BE USED TO AWA	ns) e Accomplish Income is reporte empt purposes (RD GRANTS RD GRANTS	ment of Exem	13 pt Purposes f Part XVI-A contribut	ted importantly to	1,693,79
Subtota Total. e worksh art XV ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions) PROVIDES THE FUNDS TO BE USED TO AWA PROVIDES THE FUNDS TO BE USED TO AWA	ns) e Accomplish Income is reporte empt purposes (RD GRANTS RD GRANTS	ment of Exem	13 pt Purposes f Part XVI-A contribut	ted importantly to	1,693,79
Subtota Total. e worksh art XV ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions) PROVIDES THE FUNDS TO BE USED TO AWA PROVIDES THE FUNDS TO BE USED TO AWA	ns) e Accomplish Income is reporte empt purposes (RD GRANTS RD GRANTS	ment of Exem	13 pt Purposes f Part XVI-A contribut	ted importantly to	1,693,79
Subtota Total. e worksh art XVI ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions) PROVIDES THE FUNDS TO BE USED TO AWA PROVIDES THE FUNDS TO BE USED TO AWA	ns) e Accomplish Income is reporte empt purposes (RD GRANTS RD GRANTS	ment of Exem	13 pt Purposes f Part XVI-A contribut	ted importantly to	1,693,79
Subtota Total. e worksh art XV ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions) PROVIDES THE FUNDS TO BE USED TO AWA PROVIDES THE FUNDS TO BE USED TO AWA	ns) e Accomplish Income is reporte empt purposes (RD GRANTS RD GRANTS	ment of Exem	13 pt Purposes f Part XVI-A contribut	ted importantly to	1,693,79
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Subtota Total. e worksh art XV ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions) PROVIDES THE FUNDS TO BE USED TO AWA PROVIDES THE FUNDS TO BE USED TO AWA	ns) e Accomplish Income is reporte empt purposes (RD GRANTS RD GRANTS	ment of Exem	13 pt Purposes f Part XVI-A contribut	ted importantly to	1,693,79
Subtota Total. e worksh art XV ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions) PROVIDES THE FUNDS TO BE USED TO AWA PROVIDES THE FUNDS TO BE USED TO AWA	ns) e Accomplish Income is reporte empt purposes (RD GRANTS RD GRANTS	ment of Exem	13 pt Purposes f Part XVI-A contribut	ted importantly to	1,693,79
Subtota Total. e worksh art XV ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions) PROVIDES THE FUNDS TO BE USED TO AWA PROVIDES THE FUNDS TO BE USED TO AWA	ns) e Accomplish Income is reporte empt purposes (RD GRANTS RD GRANTS	ment of Exem	13 pt Purposes f Part XVI-A contribut	ted importantly to	1,693,79
Subtota Total. ee worksh art XVI ine No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculation. B Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's exinstructions) PROVIDES THE FUNDS TO BE USED TO AWA PROVIDES THE FUNDS TO BE USED TO AWA	ns) e Accomplish Income is reporte empt purposes (RD GRANTS RD GRANTS	ment of Exem	13 pt Purposes f Part XVI-A contribut	ted importantly to	1,693,79

Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

-	GI C AVII	Exempt Organi	zations									
1		ganization directly or in Code (other than sectio							on 501		Yes	No
а	Transfers	from the reporting foun	dation to a no	ncharitable	exempt organiza	tion (of		Ī			
	(1) Cash								. :	1a(1)		No
	(2) Othe	rassets							. [1a(2)		No
b	Other tran	nsactions										
		s of assets to a nonchar							[:	1b(1)		No
	(2) Purcl	hases of assets from a r	oncharitable e	exempt org	anızatıon				[:	1b(2)		No
	(3) Rent	al of facilities, equipmer	nt, or other as	sets						1b(3)		No
		bursement arrangemen							. [:	1b(4)		No
		s or loan guarantees.							· [:	1b(5)		No
	(6) Perfo	rmance of services or m	embership or	fundraising	solicitations	•			· [1b(6)		No
С	Sharing o	f facılıtıes, equipment, n	nailing lists, of	ther assets,	, or paid employe	es.			· L	1c		No
d		wer to any of the above										
		ods, other assets, or ser nsaction or sharing arra										
	m any ara	noaction or sharing arra	ngement, sno	W III COIGIIII	in (a) the value o		goods, other asse	its, or services recei	veu			
(a	Line No	(b) Amount involved	(c) Name of n	oncharitable	exempt organization	n	(d) Description of	transfers, transactions,	, and sharı	ng arrai	ngemen	its
						_						
						_						
						+						
						+						
						+						
						+						
						+						
2 a	Is the fou	ndation directly or indire	ectly affiliated	with, or re	lated to, one or n	nore t	tax-exempt organ	ızatıons		_		
	described	in section 501(c) of the	Code (other t	than section	n 501(c)(3)) or in	secti	ion 527? 		\square] _{Yes}	✓ N	lo
b	If "Yes," o	complete the following s	chedule									
		(a) Name of organization	on		(b) Type of organ	nizatio	n	(c) Description	of relation	iship		
	I		.	<u> </u>	1.1			1 1 2 2 2 2				
		ler penalties of perjury, ny knowledge and belief										
Si		ch preparer has any kno		rrect, and c	ompiete beclara		or preparer (other	than taxpayer, is be	asca on a		mation	. 01
	ere L	****	-		2017-05-11		*****	1	May the IR:	S discus	s this r	eturn
,					2017 00 11		_)		with the pro	·		
	'	Signature of officer or t	rustee		Date		/ Title	((see ınstr)	₂ ⊻ γ	es 🗆 N	lo
		Print/Type preparer's	name	Preparer's	Signature		Data		DTIN			
		Trinic/Type preparers	i iiaiiie	i reparer 5	Jigilatule		Date	Check if self-	PTIN			
								employed ▶ □	F	00415	103	
P:	aid	STEVEN G SLAUGH	HIER				2017-08-09					
	eparer		NCON CLAUS:	ITED DON'T	D O NODTILOIT	D.4	1					
	se Only	Thin 5 hanner 50th	NSON SLAUGH	11EK DRIVE	R & NORTHCUTT	PΑ			Fırm's EII	N ► 63-	05883	313
J:	JC Olliy		BOX 489									
									Phone no	(251	943-	1565
FOLEY, AL 365360489						i none no	(231	, , , , . .	100			

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, not paid, enter Contributions to (e) other allowances hours per week (b) devoted to position -0-) employee benefit plans and deferred compensation MARJORIE Y SNOOK TRUSTEE 5 00 PO BOX 420

SUMMERDALE, AL 36580				
ROSEMARY JOHNSTON	TRUSTEE	6,000	0	0
12425 JOHN ARTHUR DRIVE FOLEY, AL 36535	5 00			
MELANIE LSMITH	TRUSTEE	3,000	0	0

FULEY, AL 36535				
MELANIE LSMITH	TRUSTEE	3,000	0	0
385 ROLAN GOOCH ROAD HAZEL GREEN, AL 35750	5 00			
WILLIAM L LAMBERT	TRUSTEE	6,000	0	0

385 ROLAN GOOCH ROAD HAZEL GREEN, AL 35750	5 00			
WILLIAM L LAMBERT	TRUSTEE	6,000	0	0
15665 DAUGHERTY ROAD	5 00			

WILLIAM L LAMBERT	TRUSTEE	6,000	0	0
15665 DAUGHERTY ROAD FOLEY, AL 36535	5 00			

FOLET, AL 30333		
15665 DAUGHERTY ROAD FOLEY, AL 36535		

	INOSILL	0,000		
235 WEST LAUREL AVENUE FOLEY, AL 36535	5 00			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Foundation Recipient If recipient is an individual. Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

Name and address (home or business) or substantial contributor a Paid during the year NONE PC ALABAMA FREE CLINIC PO BOX 1284 ENABLE RECIPIENT TO PROVIDE

BAY MINETTE, AL 36507 NO COST MEDICAL SERVICES TO INDIGENT ADULTS AND ADULTS

25,000 WITHOUT HEALTH INSURANCE

SNOOK CHRISTIAN ACADEMY NONE NC ENABLE RECIPIENT TO PROVIDE 1,425,483 18930 COUNTY ROAD 28 EDUCATION TO CHILDREN FROM PRE-K THROUGH 12TH GRADE AND MAINTAIN THE SCHOOL

FOLEY, AL 36535 **FACILITY** NONE PC ENABLE RECIPIENT TO PROVIDE SUPPORT/ADVOCACY TO P O BOX 7889 CHILDREN AND SINGLE

BALDWIN COUNTY CHILDREN'S 10,000 **FOUNDATION** SPANISH FORT, AL 36577 PARENTS INVOLVED WITH THE BALDWIN COUNTY FAMILY COURT SYSTEM

NONE PC AMERICAN HEART ASSOCIATION ENABLE RECIPIENT TO PROVIDE 25,000 2029 B ATRPORT BLVD **FDUCATION AND TRAINING OF A** MOBILE, AL 36606 LIFESAVING ACTIVITY(CPR)

NONE PC **ENABLE RECIPIENT TO** 32,500 CONSTRUCT A HOME FOR A

BALDWIN COUNTY HOME BUILDERS CHARITABLE FOUNDATION 916 PLANTATION BLVD WOUNDED VETERAN

FAIRHOPE, AL 36532

Total. . . . 2,273,711

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
BALDWIN COUNTY DRUG COURT FOUNDATION P O BOX 100 BAY MINETTE, AL 36507	NONE	PC	THE FOUNDATION SPONSORED A TABLE AT THE 7TH ANNUAL BALDWIN COUNTY DRUG COURT FOUNDATION COMMUNITY AWARENESS EVENT	10,000
BAY AREA FOOD BANK 5248 MOBILE SOUTH STREET THEODORE, AL 36582	NONE	PC	ENABLE RECIPIENT TO FUND BACKPACK PROGRAM	5,000
BCBEROBERTSDALE HIGH SCHOOL BAND 21630 STATE HIGHWAY 59 SOUTH ROBERTSDALE, AL 36567	NONE	GOV	ENABLE RECIPIENT TO PURCHASE BAND EQUIPMENT	5,000
BCBEELBERTA MIDDLE SCHOOL 13355 MAIN STREET ELBERTA, AL 36530	NONE	GOV	ENABLE RECIPIENT TO PURCHASE BAND EQUIPMENT	5,000
BCBEFOLEY ELEMENTARY SPECIAL EDUCATION DEPT	NONE	GOV	ENABLE RECIPIENT TO PURCHASE AND INSTALL	62,000

450 N CEDAR STREET PLAYGROUND EQUIPMENT

FOLEY, AL 36535 2,273,711

Total . За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future			
If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
any foundation manager or substantial contributor	recipient		
NONE	GOV	ENABLE RECIPIENT TO PROVIDE GENERAL SUPPORT FOR SOFTBALL	4,000
NONE	GOV	ENABLE RECIPIENT TO PURCHASE STABILITY BALLS FOR ALTERNATIVE CLASSROOM SEATING FOR ACTIVE CHILDREN	848
NONE	PC	ENABLE RECIPIENT TO PROVIDE STRINGS TEACHER AND PURCHASE VIOLINS	2,500
NONE	PC	ENABLE RECIPIENT TO PROVIDE SUPPORT FOR RONALD MCDONALD FAMILY ROOMS FOR FAMILIES WHO CANNOT AFFORD TO CONTRIBUTE	4,380
NONE	GOV	ENABLE RECIPIENT TO PURCHASE AWAY UNIFORMS AND EQUIPMENT	10,000
	If recipient is an individual, show any relationship to any foundation manager or substantial contributor NONE NONE NONE NONE	If recipient is an individual, show any relationship to any foundation manager or substantial contributor NONE GOV NONE GOV NONE PC NONE PC	If recipient is an individual, show any relationship to any foundation manager or substantial contributor NONE GOV ENABLE RECIPIENT TO PROVIDE GENERAL SUPPORT FOR SOFTBALL NONE GOV ENABLE RECIPIENT TO PROVIDE GENERAL SUPPORT FOR SOFTBALL NONE GOV ENABLE RECIPIENT TO PURCHASE STABILITY BALLS FOR ALTERNATIVE CLASSROOM SEATING FOR ACTIVE CHILDREN NONE PC ENABLE RECIPIENT TO PROVIDE STRINGS TEACHER AND PURCHASE VIOLINS NONE PC ENABLE RECIPIENT TO PROVIDE STRINGS TEACHER AND PURCHASE VIOLINS NONE PC ENABLE RECIPIENT TO PROVIDE SUPPORT FOR RONALD MCDONALD FAMILY ROOMS FOR FAMILIES WHO CANNOT AFFORD TO CONTRIBUTE NONE GOV ENABLE RECIPIENT TO PURCHASE AWAY UNIFORMS

Total . . 3a 2,273,711

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
BCBEFOLEY MIDDLE SCHOOL 200 NORTH OAK STREET FOLEY, AL 36535	NONE	GOV	ENABLE RECIPIENT TO PURCHASE AUDIO INTERACTIVE E-BOOKS	6,000
BCBEFOLEY INTERMEDIATE SCHOOL LIBRARY 2000 SOUTH CEDAR STREET FOLEY, AL 36535	NONE	GOV	ENABLE RECIPIENT TO PROVIDE THE COST OF READING INCENTIVES AND PURCHASE NEW BOOKS	3,000
MAGNOLIA SPRINGS VOLUNTEER FIRE DEPARTMENT 14809 GATES AVENUE MAGNOLIA SPRINGS, AL 36555	NONE	PC	ENABLE RECIPIENT TO PROVIDE FUNDS FOR A TRAINING FACILITY AND UPDATE THE TRAINING LIBRARY	9,000
CARE HOUSE P O BOX 874 BAY MINETTE, AL 36507	NONE	PC	ENABLE RECIPIENT TO PURCHASE RESOURCES AND MATERIALS TO PROVIDE COUNSELING SERVICES	63,000
CHRISTIAN SERVICE CENTER P O BOX 882 GULF SHORES, AL 36547	NONE	PC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE TO INDIGENT FAMILIES	10,000

2,273,711

Total . 3a

form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
THE EXCEPTIONAL FOUNDATION P O BOX 1267 FAIRHOPE, AL 36533	NONE	PC	ENABLE RECIPIENT TO PURCHASE A HANDICAPPED ACCESSIBLE VEHICLE	15,000
CRIMSON TIDE FOUNDATION P O BOX 870343 TUSCALOOSA, AL 35487	NONE	NC	ENDOWMENT TO PROVIDE SCHOLARSHIPS	120,000
BALDWIN COUNTY SHERIFFS BOYS RANCH P O BOX 157 SUMMERDALE, AL 36580	NONE	PC	ENABLE RECIPIENT TO FUND UTILITIES, FUEL, INTERNET AND PHONE COSTS	10,000
EQUINE THERAPY GROUP FOUNDATION INC 37252 CHEVAL AIRE ROAD BAY MINETTE, AL 36507	NONE	NC	ENABLE RECIPIENT TO EXPAND THE AVAILABILITY OF EQUINE ASSISTED THERAPY FOR SUBSIDIZED AND NO-COST COUNSELING TO THOSE IN NEED	5,000
HABITAT FOR HUMANITY	NONE	NC	ENABLE RECIPIENT TO PROVIDE	50,000

37252 CHEVAL AIRE ROAD BAY MINETTE, AL 36507			ASSISTED THERAPY FOR SUBSIDIZED AND NO-COST COUNSELING TO THOSE IN NEED	
HADITAT FOR HUMANITY	NONE	NC	LENABLE DECIDIENT TO DROVIDE I	1

CRITICAL HOME REPAIRS TO

19289 STATE HIGHWAY 59 SENIOR CITIZENS

SUMMERDALE, AL 36580

2,273,711

Total . . За

orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
INFINITY COUNSELING SERVICES 3817 GULF SHORES PKWY SUITE B GULF SHORES, AL 35947	NONE	NC	ENABLE RECIPIENT TO PROVIDE SUBSTANCE ABUSE SERVICES	10,000
JENNIFER CLAIRE MOORE FOUNDATION P O DRAWER 610 FOLEY, AL 36536	NONE	NC	ENABLE RECIPIENT TO HELP FUND THE "PEER HELPER PROGRAM" WITH TRAINING, MATERIALS AND SUPPLIES	25,000
JENSEN'S HEART OF GOLD 6093 ANDHURST DRIVE GULF SHORES, AL 36542	NONE	PC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE TO INDIGENT FAMILIES	7,500
JOHN MCCLURE SNOOK YOUTH CLUB OF FOLEY 1391 SOUTH CEDAR STREET FOLEY, AL 36535	NONE	NC	ENABLE RECIPIENT TO PROVIDE SUMMER CAMP FOR YOUTHS AGED 12-15	21,500
MAGNOLIA SPRINGS PUBLIC LIBRARY 12440 MAGNOLIA AVENUE SUITE 600 MAGNOLIA SPRINGS, AL 36555	NONE	PC	ENABLE RECIPIENT TO PURCHASE OF BOOKS,E-BOOKS AND OTHER LIBRARY MATERIALS	1,000
Total				2,273,711

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
THE FAMILY CENTER 27365 POLLARD ROAD DAPHNE, AL 36526	NONE	PC	ENABLE RECIPIENT TO PROVIDE PARENTING CLASSES AND SUPERVISED VISITATIONS IN BALDWIN COUNTY	5,000
PRODISEE PANTRY P O BOX 7403 SPANISH FORT, AL 36577	NONE	PC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE TO INDIGENT FAMILIES	25,000
SALVATION ARMY 1009 DAUPHIN STREET MOBILE, AL 36604	NONE	PC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE TO INDIGENT FAMILIES	15,000
SOUTH BALDWIN EDUCATION FOUNDATION P O BOX 1600 FOLEY, AL 36536	NONE	PC	ENABLE RECIPIENT TO FUND SCHOLARSHIPS AND ADMINISTRATIVE EXPENSES ASSISTANCE	170,000
SOUTH BALDWIN LITERACY COUNCIL 21441 HIGHWAY 98 EAST FOLEY, AL 36535	NONE	PC	ENABLE RECIPIENT TO FUND THE LEARN TO EARN PROGRAM FOR ADULTS	6,000
Total			 •	2,273,711

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
THE LIGHTHOUSE P O BOX 531 ROBERTSDALE, AL 36567	NONE	PC	ENABLE RECIPIENT TO FUND THE COURT ADVOCACY PROGRAM	15,000
THE SHOULDER OF THE CENTRAL GULF COAST P O BOX 7130 SPANISH FORT, AL 36577	NONE	PC	ENABLE RECIPIENT TO PROVIDE SUBSTANCE ABUSE TREATMENT SERVICES	10,000
UNDER HIS WINGS INC P O BOX 91 ROBERTSDALE, AL 36567	NONE	NC	ENABLE RECIPIENT TO FUND ANNUAL SALARIES FOR PERSONELL	15,000
UNITED WAY OF BALDWIN COUNTY 700 NORTH MCKENZIE ST FOLEY, AL 36535	NONE	PC	ENABLE RECIPIENT TO PROVIDE ASSISTANCE TO INDIGENT FAMILIES	5,000
MOBILE RESCUE MISSION 279A NORTH WASHINGTON AVENUE MOBILE, AL 36603	NONE	PC	ENABLE RECIPIENT TO PROVIDE LONG-TERM REHABILITATION	5,000
279A NORTH WASHINGTON AVENUE MOBILE, AL 36603 Total			LONG-TERM REHABILITATION	2,273,7

3a

Recipient If recipient is an individual, show any relationship to any foundation manager

Name and address (home or business)

Recipient If recipient is an individual, show any relationship to any foundation manager

Recipient If recipient is an individual, show any relationship to any foundation manager

Recipient If recipient is an individual, show any relationship to any foundation manager

Recipient If recipient is an individual, show any relationship to any foundation manager

Recipient If recipient is an individual, show any relationship to any foundation manager

a Paid during the year				
YOUTH REACH GULF COAST	NONE	NC	ENABLE RECIPIENT TO	

or substantial contributor

YOUTH REACH GULF COAST NONE NC ENABLE RECIPIENT TO 20,000
25062 COUNTY ROAD 38
SUMMERDALE, AL 36580 VEHICLE

SUMMERDALE, AL 36580		VEHICLE	
Total	 		2,273,711

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 9349128900738							
TY 2016 Accounting Fees Schedule							
	Name: SNOOK	FOUNDATION					
	EIN: 23-7250	795					
Catagory	A	Not Tourselment	Adioated Net	Disbursements			
Category	Amount	Net Investment Income	Adjusted Net Income	for Charitable Purposes			
ACCOUNTING FEES	48,725	14,618		34,107			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	l: 93491289007	387
TY 2016 All Other Program Re	lated Invest	ments Schedule			
Name:	SNOOK FOUND	PATION			
EIN:	23-7250795				
	Category			Amount	
N/A					0

TY 2016 Depreciation Schedule

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

Name: SNOOK FOUNDATION

FTN: 23-7250795

EIN: 23-7230793									
Description of Property	Date Acquired	Cost or Other Basıs	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
RANGE AND REFRIGERATOR	2011-03-08	2,122	1,701	200DB	7 000000000000	168	0		
LEXMARK X5463DE COPIER	2011-07-29	1,412	1,327	200DB	5 000000000000	85	0		
YUPON FARM LAND	2001-01-01	4,905,698		L		0	0		
MPC300 RICOH COPIER	2012-09-06	3,886	3,173	200DB	5 000000000000	439	0		
LANDSCAPING	2012-12-13	25,182	7,054	150DB	15 000000000000	1,813	0		
IRRIGATION SYSTEM	2012-11-08	25,090	7,029	150DB	15 000000000000	1,806	0		
AIR COMPRESSOR	2014-03-05	1,448	280	200DB	7 000000000000	127	0		
APPLE COMPUTER	2015-04-23	5,694	712	200DB	5 000000000000	854	0		
TABLE AND CHAIRS	2015-10-22	8,313	148	200DB	7 000000000000	1,145	0		

DLN: 93491289007387

TY 2016 Investments - Other Schedule	

As Filed Data -

itaiiic.	SNOOKTOOND	ALION
EIN:	23-7250795	

Category / Item

efile GRAPHIC print - DO NOT PROCESS

TRUST COMPANY OF AMERICA (MATSON

Name:	SNOOK FOUNDATION
EIN:	23-7250795

AT COST

FMV

18,743,918

ind of Year Fair Market Value
Market Value

24,312,994

DLN: 93491289007387

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491289007387
TV 2016 Land Etc		

IY 2016 Land, Etc. **Schedule**

Name: SNOOK FOUNDATION

EIN: 23-7250795					
Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value	
RANGE AND REFRIGERATOR	2,122	1,869	253		
LEXMARK X5463DE COPIER	1,412	1,412	0		
YUPON FARM LAND	4,905,698	0	4,905,698		
MPC300 RICOH COPIER	3,886	3,612	274		
LANDSCAPING	25,182	8,867	16,315		
IRRIGATION SYSTEM	25,090	8,835	16,255		
AIR COMPRESSOR	1,448	1,131	317		
APPLE COMPUTER	5,694	4,413	1,281		
TABLE AND CHAIRS	8,313	5,450	2,863		

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLI	N: 93491289007387
TY 2016 Legal Fees Schedu	ule			
	ne: SNOOK FOU IN: 23-7250795			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	22,957	11,478		11,479

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TY 2016 Other Assets Schedule

Name: SNOOK FOUNDATION

EIN: 23-7250795

Other Assets Schedule					
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value		
OTHER RECEIVABLE	227	227	227		
CONSTRUCTION IN PROCESS-ANTIQUE CAR MUSEUM	239,620	239,620	239,620		
CONSTRUCTION IN PROCESS-TELEPHONE MUSEUM	3,151,290	3,151,290	3,151,290		
RESTORED ANTIQUE AUTOMOBILES	573,877	573,877	573,877		
CERTIFICATE OF DEPOSIT	475,000	0	0		

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TY 2016 Other Expenses Schedule						
Name:	SNOOK FOUND	ATION				
EIN:	23-7250795					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
INSURANCE	20,796	13,298		7,498		
REPAIRS AND MAINTENANCE	4,248	0		2,124		
TELEPHONE	6,286	0		3,143		

13,080

2,751

6,076

32,787

450

693

2,869

0

0

0

0

0

0

1,376

6,540

1,375

6,076

32,787

450

693

UTILITIES

JANITORIAL

SECURITY

DUMPSTER

OFFICE EXPENSE

MISCELLANEOUS

GROUNDS MAINTENACE

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TY 2016 Other Increases Schedule	
Name: SNOOK FOUNDATION	
EIN: 23-7250795	
Description	Amount
ROUNDING	1

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491289007387	
TY 2016 Other Professional Fees Schedule					
Name: SNOOK FOUNDATION					
EIN: 23-7250795					
Category	Amount	Net Investment	Adjusted Net	Disbursements	

23 /230/33				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES - MATRIX	130,937	130,937		0

6,000

6,000

OTHER PROFESSIONAL FEES

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TY 2016 Taxes Schedule							
Name: SNOOK FOUNDATION							
EIN: 23-7250795							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
PAYROLL	17,234	0		17,234			
FOREIGN	12,754	12,754		0			
PROPERTY	495	0		495			
FEDERAL INCOME TAX	10,258	10,258		0			