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EXTENDED TO NOVEMBER 15, 2017 Return of Private Foundation

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

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OMB No 1545-0052

Form 990-PF

Department of the Treasury Internal Revenue Service Information about Form 990-PF and its separate instructions is at www irs gov/form990pf For calendar year 2016 or tax year beginning and ending A Employer identification number Name of foundation CAL TURNER FAMILY FOUNDATION, INC. 26-2886973 Room/suite Number and street (or P O box number if mail is not delivered to street address) B Telephone number 138 SECOND AVENUE NORTH, SUITE 200 (615) 846-2048 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 37201 NASHVILLE, TN G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col (c), line 16) 40,299,502. (Part I, column (d) must be on cash basis) ▶\$ Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) Part I (a) Revenue and expenses per books (d) Disbursements (b) Net investment (c) Adjusted net for charitable purposes (cash basis only) income income 29,150. N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 483,377. 477,855. STATEMENT 916,939. 916,939. STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 1,043,665. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 2,753,739. 1,043,665. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications Gross sales less returns and allowances **b** Less Cost of goods sold c Gross profit or (loss) 262,507. 244,271 STATEMENT 3 11 Other income 2,735,638. 2,682,730. Total. Add lines 1 through 11 12 0. 0. 0. Compensation of officers, directors, trustees, etc 13 14 Other employee salaries and wages 15 Pension plans, employee benefits 1,197. Ō. 1,197.STMT 4 Ġ 16a Legal fees 129,173. STMT 5 45,893. 83,280. b Accounting fees OGDEN. U c Other professional fees 23,456. 23,465. 0. 17 Interest 187,956. 166,456. STMT 6 0. 18 Taxes Depreciation and depletion 19 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 636,953. 18,270. STMT 7 595,943. 23 Other expenses 24 Total operating and administrative 978,735. 832,954. 101,550. expenses. Add lines 13 through 23 5,598,477. 5,598,477. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 6,577,212 832,954 5,700,027. Add lines 24 and 25 27 Subtract line 26 from line 12: -3,841,574. 2 Excess of revenue over expenses and disbursements 1,849,776. b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	r year
느		column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	1,605,091.	794,351.	794,351.
	3	Accounts receivable ► 38,662.			
)	Less: allowance for doubtful accounts	7.	38,662.	38,662.
	4	Pledges receivable ►			
	l	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	(disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			***************************************
<i>(</i> 0	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			
	ì	Investments - corporate stock STMT 8	4,681,538.	4,846,740.	6,067,669.
		Investments - corporate bonds			
	ļ	Investments - land, buildings, and equipment basis			
	l '''				
	12	Less accumulated depreciation Investments - mortgage loans			
	l	Investments - other STMT 9	38 984 575	35,749,884.	33,398,820.
	l	Land, buildings, and equipment basis	J0, J04, J1J.	33,743,004.	
	14	Less accumulated depreciation	· 		
	4.				
	l	Other assets (describe	 		
	10	Total assets (to be completed by all filers - see the	45,271,211.	41,429,637.	40 200 502
_		instructions. Also, see page 1, item I)	43,411,411.	41,429,031.	40,299,502.
		Accounts payable and accrued expenses	 		
	18	Grants payable			1
es	19	Deferred revenue			
Liabilities	5	Loans from officers, directors, trustees, and other disqualified persons			
jab	i	Mortgages and other notes payable			
_	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
	1	Foundations that follow SFAS 117, check here	}		
	1	and complete lines 24 through 26 and lines 30 and 31.			
ances	1	Unrestricted			
		Temporarily restricted			
Net Assets or Fund Ba	26	Permanently restricted			
핕	ļ	Foundations that do not follow SFAS 117, check here			
Ę	ļ	and complete lines 27 through 31.		_	
S	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	45,271,211.	41,429,637.	i
Š	30	Total net assets or fund balances	45,271,211.	41,429,637.	
	31	Total liabilities and net assets/fund balances	45,271,211.	41,429,637.	
Ē	art	Analysis of Changes in Net Assets or Fund Ba	lances		
느		···			
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line $% \left(1\right) =\left(1\right) \left(1$	30]	
	(mus	t agree with end-of-year figure reported on prior year's return)		1	45,271,211.
		amount from Part I, line 27a		2	-3,841,574.
		increases not included in line 2 (itemize)		3	0.
4	Add I	ines 1, 2, and 3		4	41,429,637.
5	Decr	eases not included in line 2 (itemize)		5	0.
6_	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	41,429,637.
					Form 990-PF (2016)

CAL TURNER FAMILY FOUNDATION, INC.

26-2886973

Page 2

	TURNER FAMILY Ind Losses for Tax on I			SEI	E ATTACHE		6-288 TATEM		Page 3
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How acql P - Purcha D - Donati				How acquired - Purchase - Donation	c) Date (mo., c	acquired day, yr.)	(d) Da (mo., d		
1a									
b									
С									
d				l					
е				Ĺ.,					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				iain or (loss) s (f) minus (
<u>a</u>									
<u>b</u>									
<u>c</u>				-+					
<u>d</u>			- 	-					
e 2,753,739.			<u>1,710,07</u>	4.				1,043	,665.
Complete only for assets showing	gain in column (h) and owned b						Col. (h) gain		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any				not less thar (from col. (l		
_a					·				
b									
С									
d									
e		_1						1,043	<u>,665.</u>
2 Capital gain net income or (net cap		ter in Part I, line -0- in Part I, line		}	2			1,043	,665.
3 Net short-term capital gain or (loss	s) as defined in sections 1222(5)	and (6)-			1				
If gain, also enter in Part I, line 8, o		una (0).		λl	1				
If (loss), enter -0- in Part I, line 8	, ,			_J_	3		N/A		
Part V Qualification Ur	ider Section 4940(e) fo	r Reduced	Tax on Net	Inve	stment Incor	ne			
(For optional use by domestic private	foundations subject to the section	1 4940(a) tax on	net investment inc	come.)				
If section 4940(d)(2) applies, leave thi	•	, ,		,	,				
Was the foundation liable for the section	on 4042 tay on the distributable a	amount of any ve	ar in the hace neri	iod2				Vac	X No
If "Yes," the foundation does not qualif			•					163	[_4 <u>*</u> _ NO
1 Enter the appropriate amount in ea				itries					
(a)		matractions ben	ore making any cr					(d)	
Base period vears	(b) Adjusted qualifying d	lietrihiitinne	Met value of no	(c)	table-use assets		Distrib	ution ratio	(a))
Calendar year (or tax year beginning	9						(col. (b) dıvı		
2015		70,926.			648,139.				27014
2014		04,862.			<u>,621,873.</u>				19296
2013		12,819.			170,619.	 			L4750
2012		18,674.			438,993.	<u> </u>			06183
2011	6,1	64,730.		47	029,232.	<u></u>		.13	31083
2 Total of line 1, column (d)						2		.58	38326
3 Average distribution ratio for the 5-	-year base period - divide the tota	al on line 2 by 5,	or by the number	of yea	rs				
the foundation has been in existence	ce if less than 5 years					3		.11	L7665
4 Enter the net value of noncharitable	e-use assets for 2016 from Part X	K, line 5				4	3.9	9,963	736.
5 Multiply line 4 by line 3						5		1,702	333.
6 Enter 1% of net investment income	(1% of Part I, line 27b)					6		18	498.
7 Add lines 5 and 6						7		1,720	831.
8 Enter qualifying distributions from	•					8		5,700,	027.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, li	ne 1b, and comp	lete that part using	g a 1%	6 tax rate. 			rm 990-1	DE
600501 11 00 16							E,	vrm 44(1-1	→ ► /2016 \

	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49		2886		tion	Page 4
	and all the control of the control 	40 -	See III	Struc	LION	<u>sj</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	j '	i			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				0 4	00
p	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1_1_		<u>_</u>	8,4	98.
	of Part I, line 27b		1			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	 		8,4	0.
3	Add lines 1 and 2	3_	 	±	0,4	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	 	1	8,4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	 -		0,4	50.
6	Credits/Payments: 2016 estimated tax payments and 2015 overpayment credited to 2016 6a 22,278.		ł	,		Ì
			ĺ			
	Exempt foreign organizations - tax withheld at source Tax paid with application for extension of time to file (Form 8868) 6c 32,000.					!
						l 1
	Backup withholding erroneously withhold Total condition and power and Add lines So through Sd.				4,2	70
,	Total credits and payments. Add lines 6a through 6d	7	 _			$\frac{78.}{13.}$
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				13.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	 		5 7	67.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2017 estimated tax	10	 		5, 1	0.
	Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ 35, 767 ⋅ Refunded ▶ rt VII-A Statements Regarding Activities	_11				<u> </u>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	<u> </u>			Yes	No
ıa	any political campaign?	1) [1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)	2		1b		X
U				-"-		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ea or		((
	distributed by the foundation in connection with the activities Did the foundation file Form 1120-POL for this year?			1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			<u> </u>		
u	(1) On the foundation. \$ 0 . (2) On foundation managers. \$ \$ 0 .					ı İ
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		ļ			
-	managers. ► \$0.			ł		
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	j	}	i
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		j			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		,	3_		<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		,_	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N,	/A	4b		-37
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		ļ	5		<u>X</u>
	If "Yes," attach the statement required by General Instruction T				-	1
ь	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		Í	1	j	ĺ
	By language in the governing instrument, or By total a goldston that effectively amond the governing instrument on that he mendatory diseases that conflict with the state.	lovu)		1	
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law			X	
7	remain in the governing instrument? 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			6 7	$\frac{\Lambda}{X}$	
′	Did the foundation have at least \$5,000 in assets at any time during the year of "Yes," complete Part II, col (c), and Part XV		}		- ^	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			}	}	
	TN			}	1	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	-			l	
	of each state as required by General Instruction G? If "No," attach explanation		,	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarion within the meaning of section within the meaning of sect	dar				
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV		}	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		<u>X</u>
			Fori	ո 990	-PF	(2016)

orm 990-PF (2016) CAL TURNER FAMILY FOUNDA			<u> 26-28869</u>	73 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	lequired (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				} }
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No	1 1
(2) Influence the outcome of any specific public election (see section 4955); o	ir to carry on, directly or indir	• • • • • • • • • • • • • • • • • • • •	च्छि ।	1 1
any voter registration drive?	0		es X No	1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es X No	1 1
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section		🔝	1 1
4945(d)(4)(A)? (see instructions)	as adventional aurages as i		es X No	} }
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or i		es 🗓 No	1 1
the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	dor the executions described		es LALINO	1 1
section 53.4945 or in a current notice regarding disaster assistance (see instru	·	iii negulations	N/A	5b
Organizations relying on a current notice regarding disaster assistance (see histid	•			30 1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ınad		
expenditure responsibility for the grant?			es 🔲 No	
If "Yes," attach the statement required by Regulations section 53 4945		1/22	C3 NO]]
6a Did the foundation, during the year, receive any funds, directly or indirectly, to			į	1 1
a personal benefit contract?	pay praimonio on		es X No	1 1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b. file Form 8870	order and the contract		<u> </u>	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?		es X No	,
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Truste		nagers, Highly		
Paid Employees, and Contractors				
List all officers, directors, trustees, foundation managers and their	compensation.			
/) Name and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances
])		
]	}]	L
SEE STATEMENT 10		0.	0.	0.
		ļ		
				
 	 	 		
			ĺ	
Compensation of five highest-paid employees (other than those inc	luded on line 1) If near	anter INONE II		
Compensation of five nighest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	(a) Eynança
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
NONE	devoted to position	 	compensation	allowances
NONE				
	 	 		
	}	1		
	 	 	 	
		1		
		 		
				
		 		
		}		
otal number of other employees paid over \$50,000			_	0
3			Form	990-PF (2016)
				,,,

Form 990-PF (2016) CAL TURNER FAMILY FOUNDATION, INC.		6-2886	973 Page 7
Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "NO	NE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	·	(c) Compensation
THE FAMILY OFFICE - 138 SECOND AVE. N, STE			
	NVEST./PROF. I	FEES	249,833.
Total number of others receiving over \$50,000 for professional services		•	0
PartixeA Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced,			Expenses
1 N/A			
		-	
2			
3			
4		_	
Partixable Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2		Amount
1 N/A	i dilu z.	-+	Amount
		\exists	
2			
		_	
All other program-related investments. See instructions.			
3		_	
			
			
Total, Add lines 1 through 3	<u>-</u>	Form	0. 1990-PF (2016)
		. 5111	(2010)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	is, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	A second of the land of the second of	1a	38,197,904.
b	Average of monthly cash balances	1b	38,197,904. 2,374,417.
c	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	40,572,321.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 0 •][
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	40,572,321.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	608,585.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	39,963,736.
6	Minimum investment return. Enter 5% of line 5	6	1,998,187.
P	foreign organizations check here and do not complete this part.) Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and do not complete this part.)	d certai	n
1	Mınımum investment return from Part X, line 6	1	1,998,187.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)	1 1	
C	Add lines 2a and 2b	2c	18,498.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,979,689.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,979,689.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,979,689.
P	art XII Qualifying Distributions (see instructions)	_	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	5,700,027.
b	Program-related investments - total from Part IX-B	1b	0.
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)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	5,700,027.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	, T	
	income. Enter 1% of Part I, line 27b	5	18,498.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,681,529.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies	for the section

CAL TURNER FAMILY FOUNDATION, INC. 26-2886973 Form 990-PF (2016) Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Corpus Years prior to 2015 2015 2016 1 Distributable amount for 2016 from Part XI, 1,979,689. 2 Undistributed income, if any, as of the end of 2016 0. a Enter amount for 2015 only b Total for prior years: 0. 3 Excess distributions carryover, if any, to 2016: 3,901,850. a From 2011 2,570,376. **b** From 2012 3,150,630. c From 2013 2,894,286. d From 2014 3,495,451. e From 2015 16,012,593. f Total of lines 3a through e 4 Qualifying distributions for 2016 from Part XII, line 4: ►\$ 5,700,027. Õ. a Applied to 2015, but not more than line 2a b Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 1,979,689. d Applied to 2016 distributable amount 3,720,338. e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount 0. must be shown in column (a)) 6 Enter the net total of each column as indicated below: 19,732,931. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0. 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 0. assessed d Subtract line 6c from line 6b. Taxable 0. amount - see instructions e Undistributed income for 2015. Subtract line 0. 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must 0. 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 0. may be required - see instructions) 8 Excess distributions carryover from 2011 3,901,850.

15,831,081

not applied on line 5 or line 7

9 Excess distributions carryover to 2017.

Subtract lines 7 and 8 from line 6a

10 Analysis of line 9:

e Excess from 2016

a Excess from 2012 b Excess from 2013 c Excess from 2014 d Excess from 2015 2,570,376. 3,150,630. 2,894,286. 3,495,451.

3,720,338.

			FOUNDATION,			1 86973 Pa	age 10
Part XIV Private Oper	rating Founda	tions (see in	structions and Part VII	-A, question 9)	N/A		
1 a If the foundation has receive	d a ruling or determi	nation letter tha	t it is a private operating	1			
foundation, and the ruling is	effective for 2016, e	nter the date of	the ruling	▶			
b Check box to indicate whether	er the found <u>ation is</u> a	ı private operatii	ng foundation described ii	n section	4942(j)(3) or4	942(j)(5)	
2 a Enter the lesser of the adjust		Tax year		Prior 3 years	- , 		
income from Part I or the mi	nımum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total	
investment return from Part	X for		,	<u> </u>	1	(
each year listed	Ĺ		<u> </u>	<u></u>	<u> </u>	<u> </u>	
b 85% of line 2a	ļ		<u> </u>	<u> </u>	<u> </u>		
 Qualifying distributions from 	Part XII,		i i	ł	}	{	
line 4 for each year listed			<u> </u>		<u> </u>		
d Amounts included in line 2c	not				1	-	
used directly for active cond	uct of		})		}	
exempt activities			<u> </u>		1	1	
e Qualifying distributions made	e directly		1				
for active conduct of exempt	activities.		j		1	ì	
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	<u> </u>				 	 	
alternative test relied upon:	1				}	}	
a "Assets" alternative test - ent(1) Value of all assets	er:				<u> </u>		
(2) Value of assets qualifyin under section 4942(j)(3			1				
b "Endowment" alternative test							
2/3 of minimum investment is shown in Part X, line 6 for eat listed							
c "Support" alternative test - er	iter:						
(1) Total support other than			į	ę		ļ	
investment income (inte dividends, rents, payme securities loans (section 512(a)(5)), or royalties)	rest, nts on						
(2) Support from general pu					 	 	—
and 5 or more exempt organizations as provide section 4942(j)(3)(B)(iii'	ed in			,			
(3) Largest amount of support					 		
an exempt organization							
(4) Gross investment incom	ie –		 		 		
Part XV Supplement		n (Comple	te this part only if	the foundation I	had \$5,000 or mor	e in assets	
	during the yea				, ,		
1 Information Regarding F	oundation Manag	ers:					
List any managers of the four year (but only if they have co	ndation who have co	ntributed more 1		ibutions received by the t	foundation before the close	e of any tax	
H. CALISTER TURI	NER, JR.						
b List any managers of the four other entity) of which the four	ndation who own 10°			or an equally large portio	n of the ownership of a pa	rtnership or	
NONE							
2 Information Regarding (Contribution Cro	t Citt I con	Coholorohin etc. Due				
Check here ► if the formulation makes gifts, g	oundation only make:	s contributions t	to preselected charitable o	organizations and does n			
a The name, address, and telep							
		1411 4001 633 61 11	ne person to whom applic	anons should be address.	ogu.		
SEE STATEMENT 1 b The form in which application		ed and informat	ion and materials they sh	ould include;			
c Any submission deadlines:							
2 . my coomings.							
d Any restrictions or limitations	s on awards, such as	by geographica	l areas, charitable fields, l	kınds of ınstitutions, or o	ther factors:		

Part XV Supplementary Informatio	n (continued)			
3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year]		
365 TRAVEL BALL ORGANIZATION	NONE	PUBLIC	THE GENERAL'S MISSION	
P.O. BOX 487		}	1	
FRANKLIN, KY 42135		 	 	5,000.
		l		
		İ		
BAREFOOT REPUBLIC CAMP	NONE	PUBLIC	PROGRAM SUPPORT	
PO BOX 40365				
NASHVILLE, TN 37204		 	 	1,740.
		-		
BELCOURT THEATRE	NONE	PUBLIC	CAPITAL CAMPAIGN	
2102 BELCOURT AVENUE				
NASHVILLE, TN 37212		<u> </u>	 - 	300,000.
BEST BUDDIES	NONE	PUBLIC	PROGRAM SUPPORT	
116 WILSON PIKE CIRCLE #207			}	
BRENTWOOD, TN 37027		ļ	<u> </u>	1,740.
BETHLEHEM CENTERS OF NASHVILLE	NONE	PUBLIC	PROGRAM SUPPORT	
1417 CHARLOTTE AVENUE				
NASHVILLE, TN 37203	 NTINUATION SHEE	<u> </u>	<u> </u>	1,740.
	MIINOAIION SHEE	T(5)	<u>▶ 3a</u>	5,598,477.
b Approved for future payment	}			
DRI GOUDE BURNER	10377	D	GIDTMIX GIVELTON	
BELCOURT THEATRE 2102 BELCOURT AVENUE	NONE	PUBLIC	CAPITAL CAMPAIGN	
NASHVILLE, TN 37212				400,000.
				
divided for vovey versages and the	l contra			
CENTER FOR YOUTH MINISTRY TRAINING 309 FRANKLIN ROAD	NONE	PUBLIC	SUPPORT FOR ACADEMIC DIRECTOR AND PROFESSOR	
BRENTWOOD, TN 37027		}	OF YOUTH MINISTRY	
,			2015-2017	45,000.
	T			
	1	1	[
FRANKLIN ROAD ACADEMY - FRA	NONE	PUBLIC	2017 FRA TURNER	
4700 FRANKLIN ROAD			FELLOWS SCHOLARSHIPS	
NASHVILLE, TN 37220				100,000.
Total SEE CO	NTINUATION SHEE	T(S)	▶ 3b	9,021,018.
			-	OOA DE (0040)

Part XVI-A	Analysis of Income-Pro	ducing Activities
Enter groce amounte	uplace atherwise indicated	Unrelated bu

Enter gross amounts unless otherwise indicated.	Unrelated business income			ided by section 512, 513, or 514	(e)
group amounts amount of the second	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion code	Amount	function income
_					
a	}	 -		 	 -
ь	 		} -		
c	<u> </u>	 	 	 	 -
d		 	<u> </u>		<u> </u>
e					
1			ļ		
g Fees and contracts from government agencies		<u> </u>			<u></u>
2 Membership dues and assessments	L				l
3 Interest on savings and temporary cash		ţ			
investments			14	483,377.	ĺ
4 Dividends and interest from securities			14	483,377. 916,939.	
5 Net rental income or (loss) from real estate:	1 1 1 415	ā,, · · · · · · · · · · · · · · · · · ·	13	2 9 2 3 3	1 2
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal	<u> </u>			 	
, , ,	1	ł)		
property		 			
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory		 	18	1,043,665.	
9 Net income or (loss) from special events		 	L	<u></u>	
10 Gross profit or (loss) from sales of inventory			L		
11 Other revenue:		[ł		
a SEE STATEMENT 12		18,236.		244,271.	
b					
c		<u> </u>	L		
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		18,236.	,	2,688,252.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	2,706,488.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Acco	mplichment of Eve	mnt	Durnococ	
Tart A Teladions in Dol Activities to	THE ACCO		mpt		
Line No. Explain below how each activity for which incom	e is reported	in column (e) of Part XVI-A	contrib	uted importantly to the accom	plishment of
the foundation's exempt purposes (other than by	providing fui	nds for such purposes).			
					
					
					
					
					
					
					
				 	
					
					
					

				OUNDATION, INC		<u>-2886973</u>	Pa	ige 13
Part 2			nsfers To	and Transactions ar	nd Relationships With No	ncharitable	-	
	Exempt Organ	nizations						
1 Did	the organization directly or ind	irectly engage in ar	y of the follow	ing with any other organization	n described in section 501(c) of		Yes	No
the	Code (other than section 501(c	:)(3) organizations)	or in section 5	27, relating to political organi	zations?	3 7.	1.7	
a Tra	nsfers from the reporting found	lation to a nonchari	table exempt o	rganization of:		1, 1, 1	1, 2, 1	
(1)	Cash					1a(1)		X
(2)	Other assets					1a(2)		X
b Oth	er transactions:					14 B		
(1)	Sales of assets to a noncharita	able exempt organiz	zation			1b(1)		X
(2)	Purchases of assets from a no	oncharitable exemp	t organization			1b(2)		X
(3)	Rental of facilities, equipment,	, or other assets				1b(3)		_X_
(4)	Reimbursement arrangements	3				1b(4)		X
(5)	Loans or loan guarantees					1b(5)		X
٠,,	Performance of services or me	· ·	=			1b(6)		X
	aring of facilities, equipment, ma					1c		X
					vays show the fair market value of the		ets,	
					e in any transaction or sharing arrange	ement, show in		
	umn (d) the value of the goods,							
(a) Line n	o (b) Amount involved	(c) Name		le exempt organization	(d) Description of transfers, transact	ons, and sharing arra	ngemen	ts
		 	N/A					
		ļ						
					+	- -		
			·					
		 						
	 	 						
		 						
	- 	 						
		 			+			
		 			+			
		 			 			
	- 	}			 	- 		
	- 	}			 			
	- 	 -	·					
		├ -						
								
	he foundation directly or indirec	•			ations described	٠.	177	1
	section 501(c) of the Code (othe		(c)(3)) or in sec	0000 527 ¢		Yes	LA.] No
<u>D 11 '</u>	es," complete the following sch (a) Name of or			(b) Type of organization	(c) Description of	relationship		
	N/A	gamzatton		(b) Type of Organization	(c) Description of	elationship		
	N/A			 				
								
								
				 				
	Under penalties of parjury, I declare	that I have examined to	his return, includin	g accompanying schedules and sta	stements, and to the best of my knowledge			
Sign	and belief, it is true, forrect, and cor	riplicte Declar tion of	er (other tha	in taxpayer) is based on all informati	on of which preparer has any knowledge	May the IRS d	prepare	r i
Here	& GROX	YAK	ح	111/6/17	SECRETARY	shown below (XX Yes	see instr	No
	Signature of officer or truste			Bate	Title			, ,40
	Print/Type preparer's na		Preparer's		Date Check X If	PTIN		
			C	5/1/	self- employed	(
Paid	STEPHEN T.	DOLAN<	tu	7 V / Y(_	10/21/17	P00666	397	
Prepa			AN & H	WARD, PLLC		2-10735		
Use (,	V	,	133			

Firm's address ► 3310 WEST END AVE STE 550 NASHVILLE, TN 37203

PAGE 1 OF

Capital Gains and Lo	sses for Tax on investment income					
	d describe the kind(s) of property solurick warehouse; or common stock, 20		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
	INVESTMENT PARTNE		P	1		
	INVESTMENT PARTNE		P			
c FROM K-1: HCTS			P	 		
	CASH MGMT PARTNE		P			
e FROM K-1: TURS			P			
f FROM K-1: TURS			P			
g FROM K-1: BEDE	LIA STREET PARTNE	RS, LP	P		_ 	
	NANT APARTMENT FU		P			
1,000 SH LULUL	EMON ATHLETICA IN	NC .	P	09/10/15	06/21/16	
	ARES TRUST SHORT		P	07/10/15		
k 5,000 SH PROSH		DOM	P	07/10/15		
	OF AMERICA CORP		P	04/04/13		
	OF AMERICA CORP		P	04/28/14		
	ROUP, INC		P	09/12/13		
0 1,000 SH CORRE	CTIONS CORP		P	01/16/14	06/21/16	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) Dlus (f) minus (g)		
a 75,915.					75,915.	
b 693,762.					693,762.	
<u>c</u>		4,957.			-4,957.	
d		6,138.			-6,138.	
0.50		251,056.			251,056.	
f 972,760.					972,760.	
20.000	 	600,187.			500,187.	
h 38,808.	 		38,80			
71,490.		53,870.			17,620.	
129,441. k 107,992.		140,106. 114,356.			-10,665.	
$\frac{k}{1}$ 107,992.	ļ	59,399.			$\frac{-6,364}{16,404}$	
100 002		74,506.			16,494. 35,387.	
n 109,893.		42,007.			10,351.	
$\frac{11}{0}$ $34,296.$		33,407.			889.	
	ng gain in column (h) and owned by t		/I) I os	ses (from 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	Gains (excess o	of col. (h) gain over ot less than "-0-")	col. (k),	
a					75,915.	
р					593,762.	
С					-4,957.	
d					-6,138.	
е					251,056.	
f					72,760.	
<u>g</u>		<u> </u>		<u> </u>	00,187.	
h					38,808.	
1					17,620.	
					10,665.	
<u>k</u>	 	 			-6,364.	
	 				16,494.	
<u>m</u>	 				35,387.	
<u>n</u>	 				10,351.	
0					089.	
2 Capital gain net income or (net ca	apital loss) { If gain, also enter 11 (loss), enter 1-0	in Part I, line 7 I-" in Part I, line 7	2			
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, if (loss), enter "-0-" in Part I, line 8		d (6):	3			

N/A

If (loss), enter "-0-" in Part I, line 8

Part XV Supplementary Information				
3 Grants and Contributions Paid During the			·	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
				}
BRENTWOOD UNITED METHODIST CHURCH	NONE	CHURCH	PROGRAM SUPPORT	
309 FRANKLIN ROAD		Ì		
BRENTWOOD, TN 37027		ļ	 	40,000.
CENTER FOR CONTEMPLATIVE JUSTICE,	NONE	PUBLIC	PROGRAM SUPPORT	
INC.				
BOX 6330-B		}		
NASHVILLE, TN 37235	- 	ļ	ļ	2,500.
	<u> </u>			
CENTER FOR YOUTH MINISTRY TRAINING	NONE	PUBLIC	SUPPORT FOR ACADEMIC	1
309 FRANKLIN ROAD			DIRECTOR AND YOUTH	1
BRENTWOOD, TN 37027		ļ	MINISTER	45,000.
		1		
COMMUNITIES IN SCHOOLS OF TENNESSEE	NONE	PUBLIC	GENERAL OPERATING AND	
401 COMMERCE STREET, PH			PROGRAM SUPPORT	
NASHVILLE, TN 37209		<u> </u>		2,500.
COMMINITING POINTNAMENT OF MEDICA	NONE	PUBLIC	DROGDAN GUDDODE	
COMMUNITY FOUNDATION OF MIDDLE TENNESSEE	NONE	POBLIC	PROGRAM SUPPORT	
3833 CLEGHORN AVENUE		1	}	
NASHVILLE, TN 37215		<u> </u>	<u> </u>	100,000.
		}		
CUMBERLAND HEIGHTS FOUNDATION	NONE	PUBLIC	50TH ANNIVERSARY	
P.O. BOX 90727	1		CELEBRATION	
NASHVILLE, TN 37209		ļ		50,000.
FAITH FAMILY MEDICAL CLINIC	NONE	PUBLIC	CLINIC OPERATING	
326 21ST AVENUE NORTH			SUPPORT	
NASHVILLE, TN 37203			 	50,000.
FAMILY AND CHILDREN'S SERVICES	NONE	PUBLIC	FCS CRISIS LINE	
201 23RD AVENUE NORTH]	
NASHVILLE, TN 37203	 	 		15,000.
		1		
FANNIE BATTLE DAY HOME FOR CHILDREN	NONE	PUBLIC	PROGRAM SUPPORT	
108 CHAPEL AVENUE	1		1	
NASHVILLE, TN 37206		-		1,740.
FANNIE BATTLE DAY HOME FOR CHILDREN	NONE	PUBLIC	GENERAL OPERATING	
108 CHAPEL AVENUE	1	1	SUPPORT	
NASHVILLE, TN 37206		<u> </u>	L	15,000.
Total from continuation sheets		 	<u></u>	5,288,257.

Show a	ndation manager s	contrections of contractions o	1,740.
Name and address (home or business) any for or subsequences o	ndation manager Stantial contributor r	contrections of contractions o	PPORT 1,740
FIRST STEPS, INC. NONE 1900 GRAYBAR LANE NASHVILLE, TN 37215 FISK UNIVERSITY NONE 1000 17TH AVENUE NORTH	PUBLIC	C PROGRAM SUP	1,740
1900 GRAYBAR LANE NASHVILLE, TN 37215 FISK UNIVERSITY 1000 17TH AVENUE NORTH			1,740.
NASHVILLE, TN 37215 FISK UNIVERSITY NONE 1000 17TH AVENUE NORTH	PUBLIC	c chairman sc	
FISK UNIVERSITY NONE 1000 17TH AVENUE NORTH	PUBLIC	C CHAIRMAN SC	
1000 17TH AVENUE NORTH	PUBLIC	c chairman sc	
1000 17TH AVENUE NORTH	PUBLIC	CHAIRMAN SC	
			HOLARS
NASHVILLE, TN 37208		ſ	
I			35,000.
FRANKLIN ROAD ACADEMY - FRA NONE	PUBLIC	C PROGRAM SUP	PART
4700 FRANKLIN ROAD	(0221		
NASHVILLE, TN 37220			80,880.
GORDON MEMORIAL UNITED METHODIST NONE	PUBLIC	c program sup	PORT FOR
CHURCH			LLE FREEDOM
2334 HERMAN STREET		SCHOOL PART	
NASHVILLE, TN 37208		SUMMER READ	PING PROGRAM 25,000.
GRACE M. EATON CHILD CARE & PARENT NONE	PUBLIC	C OPERATING S	UPPORT
RESOURCE CTR			
1708 PEARL STREET			
NASHVILLE, TN 37203			25,000.
HART NONE	PUBLIC	GENERAL OPE	RATING
102 WOODMONT BLVD, STE 200		SUPPORT	1
NASHVILLE, TN 37205			62,800.
HARVEST HANDS COMMUNITY DEVELOPMENT NONE	PUBLIC	GENERAL SUP	PORT
CORP			
155B OLD HERMITAGE AVE		ļ	1
NASHVILLE, TN 37210			25,000.
İ			
INTERFAITH DENTAL CLINIC NONE	Pubric	AFFORDABLE 1	DENTISTRY
1721 PATTERSON STREET		FOR THE WOR	Ĭ
NASHVILLE, TN 37203		AND ELDERLY	25,000.
JUNIOR ACHIEVEMENT OF MIDDLE NONE	PUBLIC	STEM SUMMIT	AND JA
Tennessee		BIZTOWN FOR	
120 POWELL PLACE		NASHVILLE P	UBLIC
NASHVILLE, TN 37204		schools	10,000.
LEWIS COUNTY IMAGINATION LIBRARY NONE	GOVERN	NMENTAL PROGRAMMING	
206 SOUTH COURT STREET		PROVIDE AGE	}
HOHENWALD, TN 38462		APPROPRIATE	BOOKS
		MONTHLY TO	
Total from continuation sheets		CHILDREN COL	UNTRY-WIDE 5,000.

Part XV Supplementary Information				
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	30/11/10/10/1	
MAGDALENE (THISTLE FARMS)	NONE	PUBLIC	CAPITAL CAMPAIGN	
5122 CHARLOTTE AVENUE		{	DESIGNED TO	
NASHVILLE, TN 37209		}	EXPAND/ENHANCE	
			OPERATIONS	125,000.
		}		
MARTHA O'BRYAN CENTER	NONE	PUBLIC	PROGRAM SUPPORT	
711 SOUTH SEVENTH STREET	})	1	
NASHVILLE, TN 37206				1,740.
		}		
MCNEILLY CENTER FOR CHILDREN	NONE	PUBLIC	OPERATING SUPPORT	
100 MERIDIAN ST.]	1	
NASHVILLE, TN 37207		 	 	25,000.
	}			
MEHARRY MEDICAL COLLEGE	NONE	PUBLIC	CAPITAL CAMPAIGN FOR	
1005 DR. D.B. TODD JR. BLVD.			NEW CAMPUS CENTER	
NASHVILLE, TN 37208		 	+	600,000.
		ļ		
MENDING HEARTS	NONE	PUBLIC	PROGRAM AND OPERATING	
P.O. BOX 280236			SUPPORT	105 000
NASHVILLE, TN 37228		 	 	125,000.
	[
MERCY COMMUNITY HEALTHCARE	NONE	PUBLIC	UNINSURED INDIVIDUALS	
1113 MURFREESBORO ROAD FRANKLIN, TN 37064		}	AND FAMILIES	25,000.
Idawilla, In 37004		 	 	23,000.
NASHVILLE AREA EPISCOPAL OFFICE	NONE	PUBLIC	PROGRAM SUPPORT	
520 COMMERCE STREET	NOINE	FOBLIC	PROGRAM SUPPORT	
NASHVILLE, TN 37203		ļ		10,000.
			}	
NELSON ANDREWS LEADERSHIP LODGE	NONE	PUBLIC	GENERAL OPERATING AND	
3088 SMITH SPRINGS RD.		1	PROGRAM SUPPORT	
ANTIOCH, TN 37013		 	 	240,000.
NEW HOPE ACADEMY	NONE	PUBLIC	CAPITAL CAMPAIGN	
1820 DOWNS BLVD		}		
FRANKLIN, TN 37064	- 	 	 	100,000.
OUR KIDS CENTER, INC.	NONE	PUBLIC	GENERAL OPERATING	
1804 HAYES STREET		}	SUPPORT	2 502
NASHVILLE, TN 37203 Total from continuation sheets		<u> </u>	 	2,500.
Total Itum Communation Sheets			<u></u>	

CAL TURNER FAMILY FOUNDATION, INC. 26-2886973

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	A
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
PRESTON TAYLOR MINISTRIES	NONE	PUBLIC	GENERAL OPERATING AND	
P.O. BOX 90442	{	}	PROGRAM SUPPORT	
NASHVILLE, TN 37209	 			5,220
RENEWAL HOUSE, INC.	NONE	PUBLIC	GENERAL OPERATING	
P.O. BOX 280356		}	EXPENSE	
NASHVILLE, TN 37228	 	 	+	2,500
REPUBLIC SCHOOLS	NONE	PUBLIC	GENERAL OPERATING	
3515 GALLATIN PIKE NASHVILLE, TN 37216		1	SUPPORT	2,500
REPUBLIC SCHOOLS	NONE	PUBLIC	PROGRAM SUPPORT FOR	2,300
3515 GALLATIN PIKE		1	COLLEGE AND CAREER	
NASHVILLE, TN 37216	}	}	READINESS PROGRAM FOR	
		}	2016/2017 AND	
			2017/2018	75,000
		Ì		
SALVATION ARMY NASHVILLE TENNESSEE	NONE	PUBLIC	PROGRAM SUPPORT	
631 DICKERSON RD				
NASHVILLE, TN 37207	 	 	 	1,740
SECOND HARVEST FOOD BANK	NONE	PUBLIC	GENERAL OPERATING	
331 GREAT CIRCLE ROAD		1	SUPPORT TO REPLACE	
NASHVILLE, TN 37228			AGING AND BROKEN	
		ļ	WAREHOUSE EQUIPMENT	25,000
	}			
SONGS FOR SOUND	NONE	PUBLIC	HEAR THE MUSIC	
2720 EUGENIA AVENUE		ĺ	PROJECT: 60 DAYS IN	25 000
NASHVILLE, TN 37211		 	NASHVILLE 2017	25,000
TEACH FOR AMERICA - GREATER NASHVILLE	NONE	PUBLIC	HIRE 60 NEW TEACHERS	
220 ATHENS WAY		1	AND PROVIDE ONGOING	
NASHVILLE, TN 37228		1	PROFESSIONAL	
	 	 	DEVELOPMENT	75,000
	}			
THE NASHVILLE FOOD PROJECT, INC.	NONE	PUBLIC	PROGRAM SUPPORT	
3605 HILLSBORO PIKE			}	
NASHVILLE, TN 37215	_	-		1,740.
THE NASHVILLE FOOD PROJECT, INC.	NONE	PUBLIC	CAPITAL SUPPORT	
3605 HILLSBORO PIKE		}		E0 000
NASHVILLE, TN 37215		L		50,000.
Total from continuation sheets				

Part XV Supplementary Information	n			
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	if recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	, anount
THE NEW BEGINNINGS CENTER	NONE	PUBLIC	REVERSING DISEASE	
509 CRAIGHEAD STREET SUITE 100		}	THROUGH PREVENTATIVE	}
NASHVILLE, TN 37204		}	WELLNESS PROGRAMMING	
		ì	FOR LOW-INCOME	1
	 	 	NASHVILLIANS	25,000.
THE RED ROAD	NONE	PUBLIC	PROGRAM SUPPORT	
P.O. BOX 1565		1		{
FRANKLIN, TN 37065		Í		64,000.
	, , , , , , , , , , , , , , , , , , ,			
TRAVELLERS REST 636 FARRELL PARKWAY	NONE	PUBLIC	PROGRAM SUPPORT	
NASHVILLE, TN 37215				30,000.
MIDATED (11. 37.823		 		
	<u> </u>	}		
VANDERBILT UNIVERSITY	NONE	PUBLIC	PROGRAM SUPPORT	
205 KIRKLAND HALL				
NASHVILLE, TN 37240		ļ		305,000.
WESLEY THEOLOGICAL SEMINARY OF THE	NONE	PUBLIC	SCHOLARSHIPS FOR	
METHODIST CHURCH	NONE	FORDIC	DOCTOR OF MINISTRY	
4500 MASSACHUSETTS AVENUE		1	STUDENTS	
WASHINGTON, DC 20016	1	1		208,767.
WILLIAMSON MEDICAL FOUNDATION, INC.	NONE	TYPE I SUPPORT	CLOSE TO HOME: A	
4321 CAROTHERS PARKWAY		DRG	CAMPAIGN FOR	
FRANKLIN, TN 37067			WORLD-CLASS PEDIATRIC	
		 	AND SURGICAL CARE	250,000.
	}			
YMCA OF MIDDLE TENNESSEE	NONE	PUBLIC	PROGRAM AND OPERATING	
1000 CHURCH STREET			SUPPORT	
NASHVILLE, TN 37203	<u> </u>			1,740.
	į.		ļ	
23RD PSALM MINISTRY	NONE	PUBLIC	GENERAL OPERATING	
2203 BUENA VISTA PIKE			SUPPORT FOR PRISON	
NASHVILLE, TN 37218	1	1	MINISTRY	7,500.
			1	
AMERICAN RED CROSS - NASHVILLE	NONE	PUBLIC	GENERAL OPERATING	
2201 CHARLOTTE AVENUE NASHVILLE TN 37203		1	SUPPORT	10.000
MADINITUD, IN 3/203	+	 	 	10,000.
			1	
AMERICAN RED CROSS - NASHVILLE	NONE	PUBLIC	PROGRAM SUPPORT FOR	
2201 CHARLOTTE AVENUE			THE HOME FIRE	
NASHVILLE, TN 37203		L	PREPARDNESS CAMPAIGN	25,000.
Total from continuation sheets			<u> </u>	

Part XV Supplementary Information	on			
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Sont load of	
AMERICAN RED CROSS - NASHVILLE	NONE	PUBLIC	RELIEF EFFORTS FOR	
2201 CHARLOTTE AVENUE	NONE	CODDIC	GATLINBURG AND THE	
NASHVILLE, TN 37203		1	GREAT SMOKY MOUNTAINS	
<u> </u>			WILDFIRES	25,000.
PO BOX 40365	NONE	PUBLIC	SALARY SUPPORT FOR RETREAT COORDINATOR	
NASHVILLE, TN 37204			AND DEVELOPMENT	
		}	DIRECTOR	25,000.
BIG BROTHERS BIG SISTERS OF MIDDLE	NONE	PUBLIC	OPERATING AND PROGRAM	
TENNESSEE 1704 CHARLOTTE AVENUE, STE 130			SUPPORT FOR YOUTH MENTORING PROGRAMS	
NASHVILLE, TN 37203		1	MENTORING PROGRAMS	15,000.
		 		
BRIARWOOD PRESBYTERIAN CHURCH	NONE	CHURCH	CAMPUS MINISTRY	
P.O. BOX 43737 BIRMINGHAM, AL 35243			SUPPORT	5,000.
21411101411, 112 33213		1		3,000.
CHARLEY FOUNDATION	NONE	PUBLIC	PROGRAM SUPPORT	
P.O. BOX 120126 NASHVILLE, TN 37212				1 500
MASIVIIIII, IN 37212	- 	 	 	1,500.
COMMUNITY RESOURCE CENTER	NONE	PUBLIC	PROGRAM SUPPORT	
218 OMOHUNDRO PLACE NASHVILLE, TN 37210				5,000.
				3,000.
	Į			
CONEXION AMERICAS	NONE	PUBLIC	GENERAL OPERATING	
2195 NOLENSVILLE PIKE NASHVILLE, TN 37211	1		SUPPORT	2,500.
,		 	 	2,300.
DISMAS, INC.	NONE	PUBLIC	PROGRAM SUPPORT	
1513 16TH AVE. S. NASHVILLE, TN 37212			1	10,000.
		 	 	10,000.
FEED AMERICA FIRST	NONE	PUBLIC	GENERAL OPERATING	
1715 S. RUTHERFORD BLVD, STE K MURFREESBORO, TN 37130			SUPPORT	5,000.
	 		+	3,000.
FIRST BAPTIST CHURCH CAPITOL HILL	NONE	CHURCH	PROGRAM SUPPORT	
625 ROSA L. PARKS BLVD NASHVILLE, TN 37203		}		25,000.
Total from continuation sheets			- 	
				

Part XV Supplementary Information				
3 Grants and Contributions Paid During the	Year (Continuation)			
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		
		-		
PIROM OMPRO TWO	NONE	PUBLIC	PROGRAM SUPPORT	
FIRST STEPS, INC. 1900 GRAYBAR LANE	NONE	FOBELIC	FROGRAM SUPPORT	
NASHVILLE TN 37215		1	1	25,000.
FISK UNIVERSITY	NONE	PUBLIC	SESQUICENTENNIAL	
1000 17TH AVENUE NORTH NASHVILLE, TN 37208	ł	l	SCHOLARSHIP BENEFIT	E0 000
NASHVIIDE, IN 37200		 	 	50,000.
HANDS ON NASHVILLE	NONE	PUBLIC	OPERATING SUPPORT	
37 PEABODY STREET		1		
NASHVILLE, TN 37210		·	 	2,500.
		1		
HEALING HOUSING INC.	NONE	PUBLIC	OPEN DOORS CAPITAL	
P.O. BOX 2385			CAMPAIGN	
BRENTWOOD, TN 37024				50,000.
HIGH HOPES, INC.	NONE	PUBLIC	PROGRAM SUPPORT FOR A	
301 HIGH HOPES CT			PEDIATRIC THERAPY	
FRANKLIN, TN 37064	}	1	CLINIC AND INCLUSIVE PRESCHOOL	50,000.
		 		
MAGDALENE (THISTLE FARMS)	NONE	PUBLIC	GENERAL OPERATING	
5122 CHARLOTTE AVENUE		}	SUPPORT	
NASHVILLE, TN 37209	 	 	 	10,000.
MARTHA O'BRYAN CENTER	NONE	PUBLIC	SUPPORT ACADEMIC	
711 SOUTH SEVENTH STREET		ĺ	STUDENT UNIONS AT	
NASHVILLE, TN 37206		[STRATFORD AND	
		_	MAPLEWOOD HIGH SCHOOLS	25,000.
		}		
MATTHEW 25, INC.	NONE	PUBLIC	OPERATING SUPPORT	
P.O. BOX 158461				
NASHVILLE, TN 37215		L		25,000.
MENTAL HEALTH ASSOCIATION OF MIDDLE	NONE	PUBLIC	MULTICULTURAL OUTREACH	
TENNESSEE 446 METROPLEX DR. STE A-224			PROGRAM	
NASHVILLE, TN 37211				20,000.
			 	
MONROE HARDING, INC.	NONE	PUBLIC	HIRING A FULL-TIME	
1120 GLENDALE LANE			ACADEMIC SUPPORT	FA 444
NASHVILLE, TN 37204		<u> </u>	COORDINATOR	50,000.
Total from continuation sheets				

CAL TURNER FAMILY FOUNDATION, INC.

Supplementary Information 3 Grants and Contributions Paid During the			T	
Recipient	If recipient is an individual,	1		
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
NASHVILLE AREA EPISCOPAL OFFICE	NONE	PUBLIC	TURNER CENTER FOR	
520 COMMERCE STREET			CHURCH LEADERSHIP AND	
NASHVILLE TN 37203	1		CONGREGATIONAL	
		<u> </u>	DEVELOPMENT	216,000
NASHVILLE FIRST CHURCH OF THE	NONE	PUBLIC	THREE YEARS OF	
NAZARENE/510 FOUNDATION	Ì	1	PROGRAMMING SUPPORT	
510 WOODLAND STREET		1	(RENEWAL OF SUPPORT)	07 500
NASHVILLE, TN 37206				97,500
NASHVILLE INTERNATIONAL CENTER FOR	NONE	PUBLIC	INCREASED AFFORDABLE	
EMPOWERMENT	1	i	HOUSING FOR NEW	
417 WELSHWOOD DRIVE	}		americans	
NASHVILLE, TN 37211	<u> </u>		_1	50,000
NASHVILLE LAUNCH PAD	NONE	PUBLIC	GENERAL OPERATING	
P.O. BOX 330695	NONE	FUBLIC	SUPPORT	
NASHVILLE, IN 37203	Í	1	BOFFORT	7,500
		 		
NASHVILLE PUBLIC RADIO - WPLN	NONE	PUBLIC	GENERAL OPERATING	
P.O. BOX 440567	}	}	SUPPORT	
NASHVILLE, TN 37244	 	 		5,000
NASHVILLE STEAM PRESERVATION SOCIETY	NONE	PUBLIC	LOCOMOTIVE 576	
220 WILLOW STREET	}	1	RESTORATION PROJECT	
NASHVILLE, TN 37210				25,000
)		
NASHVILLE ZOO, INC.	NONE	PUBLIC	SURGERY SUITE AT	
3777 NOLENSVILLE RD.		ĺ	NASHVILLE ZOO	
NASHVILLE, TN 37211	1	}	VETERINARY CENTER	250,000
	T			
		Ì		
NATIONAL ALLIANCE ON MENTAL ILLNESS	NONE	PUBLIC	PROGRAM SUPPORT	
3803 N. FAIRFAX DRIVE]	E00 000
ARLINGTON, VA 22203	 	 		590,000
DASIS CENTER	NONE	PUBLIC	CRISIS AND RESIDENTIAL	
1704 CHARLOTTE PIKE			SERVICES	
NASHVILLE, TN 37212		 	 	50,000.
DASIS CENTER	NONE	PUBLIC	GENERAL OPERATING	
1704 CHARLOTTE PIKE			SUPPORT	
NASHVILLE, TN 37212		1	1	2,500
Total from continuation sheets		<u> </u>	· · · · · · · · · · · · · · · · · · ·	

CAL TURNER FAMILY FOUNDATION, INC. 26-2886973

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	
OPEN TABLE NASHVILLE	NONE	PUBLIC	HIRE A PROJECT MANAGER	
210 MORTON AVENUE	ł		AND FUND STARTUP COSTS	
NASHVILLE, TN 37211	ţ		ASSOCIATED WITH "TINY	
		 	HOUSE VILLAGES"	187,000
OPERATION ANDREW GROUP	NONE	PUBLIC	PROGRAM SUPPORT	
3902 GRANNY WHITE				
NASHVILLE, TN 37204		 	 	50,000
PARK CENTER	NONE ·	PUBLIC	PROGRAM SUPPORT FOR	
801 12TH AVENUE SOUTH		1	RESIDENTIAL SERVICES PROGRAM	E0 000
NASHVILLE, TN 37203		 	PROGRAM	50,000
PEACE, POWER AND PURPOSE MINISTRY,	NONE	PUBLIC	OPERATING SUPPORT	
INC.		1		
1535 TOWNE PARK LANE		Ì		
FRANKLIN, TN 37067		 	+	10,000
PRESTON TAYLOR MINISTRIES	NONE	PUBLIC	PROGRAM SUPPORT FOR	
P.O. BOX 90442	(SUMMER SALT (SERVENT	
NASHVILLE, TN 37209			AND LEADERSHIP	
	 	 	TRAINING)	11,650
PROJECT REDESIGN, INC.	NONE	PUBLIC	GENERAL OPERATING	
P.O. BOX 159276		ļ	SUPPORT	2 500
NASHVILLE, TN 37215		 		2,500
PROJECT TRANSFORMATION TENNESSEE	NONE	PUBLIC	PROGRAM SUPPORT FOR	
522 RUSSELL STREET		ļ	SUMMER AND AFTER	
NASHVILLE, TN 37206			SCHOOL PROGRAMS	10,000
REFORMED UNIVERISTY FELLOWSHIP/RUF	NONE	PUBLIC	OPERATING SUPPORT	
CHARLOTTE, NC 28289	\			25,000
SECOND HARVEST FOOD BANK	NONE	PUBLIC	PROGRAM SUPPORT	
331 GREAT CIRCLE ROAD				
NASHVILLE, TN 37228		 	+	10,000
SEXUAL ASSAULT CENTER 101 FRENCH LANDING DR	NONE	PUBLIC	CLINICAL SERVICES FOR	
NASHVILLE, TN 37228	1	1	SEXUAL ASSAULT SURVIVORS	20,000
Total from continuation sheets				

Part XV Supplementary Informati				
3 Grants and Contributions Paid During the	Year (Continuation)	_		
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	Contribution	
		j		
SOUTHERN WORD, INC.	NONE	PUBLIC	PROGRAM SUPPORT FOR	
1704 CHARLOTTE AVENUE, STE 200	1		YOUTH SPEAKS NASHVILLE	
NASHVILLE, TN 37203		L		2,500.
		1		
STARS NASHVILLE	NONE	PUBLIC	GENERAL OPERATING	
1704 CHARLOTTE AVENUE	1	\[\]	SUPPORT	
NASHVILLE, TN 37203	1	}		25,000.
		L		
TENNESSEE PARKS AND GREENWAYS	NONE	PUBLIC	PROGRAM SUPPORT	
1205 A LINDEN AVENUE	}	1	}	0.500
NASHVILLE, TN 37215		 	 	2,500.
THE SOCIETY OF SAINT ANDREW INC	NONE	PUBLIC	TENNESSEE GLEANING	
701 GALLATIN PIKE S		1	NETWORK	
MADISON, TN 37115		 	 	10,000.
UNA CHURCH OF CHRIST	NONE	PUBLIC	OPERATION SUPPORT	
1917 OLD MURFREESBORO PIKE	10112	102210	DIEMITON BOTTON	
NASHVILLE, TN 37217		İ	1	5,000.
		 	 	
WHO U WITH MINISTRIES	NONE	PUBLIC	PROGRAM SUPPORT	
2900 VANDERBILT PLACE, STE 101			1	05 000
NASHVILLE, TN 37212		 	 	25,000.
WILLIAMSON COUNTY CASA INC.	NONE	PUBLIC	I AM FOR THE CHILD	
212 E. MAIN STREET, STE 200		}	PROGRAM SUPPORT	
FRANKLIN, TN 37064		 	 	5,000.
	}	}		
YMCA OF MIDDLE TENNESSEE	NONE	PUBLIC	RESTORE MINISTRIES	
1000 CHURCH STREET		1	1	
NASHVILLE, TN 37203		ļ	<u> </u>	40,000.
YOUTH ENCOURAGEMENT SERVICES, INC	NONE	BABTIC	PROGRAM SUPPORT FOR	
521 MCIVER STREET			AFTER-SCHOOL AND	
NASHVILLE, TN 37211	1	1	SUMMER PROGRAMS FOR	
			NASHVILLE'S INNER CITY	15 000
		 	YOUTH	15,000.
			}	
	}	}		
Total from continuation sheets				
. Just it will section divides				

Supplementary Information Grants and Contributions Approved for Fu				
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	CONTRIBUTION	7 1110 0111
LEWIS COUNTY IMAGINATION LIBRARY	NONE	PUBLIC	PROGRAMMING SUPPORT TO	
206 SOUTH COURT STREET			PROVIDE AGE	
HOHENWALD, TN 38462			APPROPRIATE BOOKS	
]		MONTHLY TO PRESCHOOL	
			CHILDREN COUNTY-WIDE	5,00
NASHVILLE AREA EPISCOPAL OFFICE	NONE	PUBLIC	PROGRAM SUPPORT	
520 COMMERCE STREET)			122.00
NASHVILLE, TN 37203		 	+	133,00
NASHVILLE AREA EPISCOPAL OFFICE	NONE	PUBLIC	TURNER CENTER FOR	
520 COMMERCE STREET			CHURCH LEADERSHIP AND	
NASHVILLE, TN 37203	}		CONGREGATIONAL	
			DEVELOPMENT	113,000
NEW HOPE ACADEMY	NONE	BABFIC	CAPITAL CAMPAIGN	
1820 DOWNS BLVD			1	
FRANKLIN, TN 37064	- 	 	 	300,000
		Ĭ		
OPERATION ANDREW GROUP	NONE	PUBLIC	PROGRAM SUPPORT	
3902 GRANNY WHITE]			
NASHVILLE, TN 37204		 	 	50,000
]		
PROGRESS, INC.	NONE	BABFIC	EXPANSION OF	
319 EZELL PIKE		,	EMPLOYMENT PROGRAM	
NASHVILLE, TN 37217		 	+	50,000
	}	1		
VANDERBILT UNIVERSITY	NONE	PUBLIC	TURNER FAMILY CENTER	
205 KIRKLAND HALL			FOR SOCIAL VENTURES	
NASHVILLE, TN 37240		 	}	869,000
WESLEY THEOLOGICAL SEMINARY OF THE	NONE	PUBLIC	SCHOLARSHIPS FOR	
METHODIST CHURCH			DOCTOR OF MINISTRY	
4500 MASSACHUSETTS AVENUE			STUDENTS	
WASHINGTON, DC 20016				76,018
FRANKLIN ROAD ACADEMY - FRA	NONE	PUBLIC	CAPITAL CAMPAIGN	
4700 FRANKLIN ROAD		}		
NASHVILLE, TN 37220		<u> </u>		5,000,000
HEALING HOUSING INC.	NONE	PUBLIC	OPEN DOORS CAPITAL	
P.O. BOX 2385		1	CAMPAIGN	
BRENTWOOD, TN 37024				50,000
Total from continuation sheets				8,476,018

CAL TURNER FAMILY FOUNDATION, INC.

26-2886973

3 Grants and Contributions Approved for Fut				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
NASHVILLE ZOO, INC.	NONE	PUBLIC	SURGERY SUITE AT	
3777 NOLENSVILLE RD.			NASHVILLE ZOO	
NASHVILLE, TN 37211	+	 	VETERINARY CENTER	750,00
VANDERBILT UNIVERSITY MEDICAL CENTER 2525 WEST END AVENUE, STE 450	NONE	PUBLIC	GROWING TO NEW HEIGHTS	
NASHVILLE, TN 37203		1	+	1,000,00
YMCA OF MIDDLE TENNESSEE 1000 CHURCH STREET	NONE	PUBLIC	RESTORE MINISTRIES	
NASHVILLE, TN 37203	+	 	 	80,00
	,			
	+		-	
		}		
	-		-	
Total from continuation sheets	<u> </u>			

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

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

2016

Name of the organization	Employer identification number							
C.A	L TURNER FAMILY FOUNDATION, INC.	26-2886973						
Organization type (check o								
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 private foundation							
	501(c)(3) taxable private foundation							
• •	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.						
General Rule								
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's							
Special Rules								
sections 509(a)(1) a any one contributo	a described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amoun line 1 Complete Parts I and II.	or 16b, and that received from						
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a tions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or educatively to children or animals. Complete Parts I, II, and III	•						
year, contributions is checked, enter h purpose. Don't cor	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled motere the total contributions that were received during the year for an exclusively religious inplete any of the parts unless the General Rule applies to this organization because it refer to contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box , charitable, etc ,						
but it must answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo he filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)							

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

Name of organization

Employer identification number

CAL T	URNER FAMILY FOUNDATION, INC.		26-2886973
Pan I	Contributors (See instructions) Use duplicate copies of Part I if addition.	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
1	H. CALISTER TURNER, JR. 138 SECOND AVENUE NORTH, #200 NASHVILLE, TN 37201	\$\$	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
		\$	Person Payroll Occash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) s Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution:	(d) s Type of contribution
			Person Payroll

Name, address, and ZIP + 4

(b)

Name, address, and ZIP + 4

Total contributions

(c)

Total contributions

Person

Noncash (Complete Part II for noncash contributions)

Person
Payroll
Noncash
(Complete Part II for noncash contributions)

Type of contribution

(d)

Type of contribution

(a) No.

(a)

No.

Employer identification number

CAL TURNER FAMILY FOUNDATION, INC.

26-2886973

Part II	Noncash Property (See instructions) Use duplicate copies of Par	t II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	316 SH AUTOZONE STOCK		
1_		\$\$50,857.	12/30/16
(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
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	

Employer identification number

CAL_T	JRNER FAMILY FOUNDATION	INC.		<u>_</u>	26-2886973
Perill	Exclusively religious, charitable, etc., contributor. Complete of	ributions to organizations desc	ribed in section	n 501(c)(7), (8), or (10) that total more than \$1,000 for
	completing Part III, enter the total of exclusively religious	, charitable, etc., contributions of \$1	,000 or less for the	e year (Enterthis info once	s, ► s
	Use duplicate copies of Part III if additiona	al space is needed			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Desc	ription of how gift is held
j					
1					
}		(e) Transfer	of gift		
ļ	Transferee's name, address, ar	nd ZIP + 4	R	elationship of tran	sferor to transferee
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Desc	ription of how gift is held
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FORM 990-PF INTERE	ST ON SAVIN	GS AND I	EMPOR	ARY	CASH	INVESTMENTS	S	ТАТЕМЕНТ	1
SOURCE			(A) REVENUE NE PER BOOKS			(B) INVESTMENT INCOME		(C) ADJUSTED NET INCOMI	
FROM K-1'S RAYMOND JAMES			482,8 4	91. 86.		477,369. 486.			
TOTAL TO PART I, LI	NE 3		483,3	77.		477,855.			
FORM 990-PF	DIVIDENDS	AND INT	EREST	FRO	M SEC	URITIES	S'	FATEMENT :	2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	នេ	RE	(A) VENUE BOOK			(C) ADJUSTE NET INCO	
FROM K-1'S NORTHERN TRUST RAYMOND JAMES	865,927. 2,235. 48,777.		0.		65,92 2,23 48,77	5. 2,2	35.		
TO PART I, LINE 4	916,939.		0.	9	16,93	916,9	39.		===
FORM 990-PF		OTHER	INCO	ME			S'	ratement 3	 3
DESCRIPTION			REV	(A) VENU BOO		(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOM	
7/6 INVESTMENT K-1 BEDELIA STREET K-1 DG STORE III, LP TD REAL ESTATE LP COVENANT APT. FUND STONEMOR PARTNERS, OAKTREE CAPITAL K-1 TURSON, LP				1 85 17 -1 -2	,586. ,881. ,029. ,778. ,721. ,171. 122. ,997.	183,550 1,881 57,309 17,778 -1,721 349 122 -14,997	3.		
TOTAL TO FORM 990-P	F, PART I, I	LINE 11		262	,507.	244,271	~ .• == =		

FORM 990-PF	LEGAL	FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	1,197.	1,197.		0.
TO FM 990-PF, PG 1, LN 16A	1,197.	1,197.		0.
FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	129,173.	45,893.		83,280.
TO FORM 990-PF, PG 1, LN 16B	129,173.	45,893.		83,280.
FORM 990-PF	TAX	ES	S	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL INCOME TAX FOREIGN TAX PAID STATE INCOME TAX	21,500. 24,769. 141,687.	24,769.		0. 0. 0.
TO FORM 990-PF, PG 1, LN 18	187,956.	166,456.		0.

FORM 990-PF	OTHER E	XPENSES	S	STATEMENT 7		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
BROKERAGE FEES	164,779.	164,779.		0.		
DUES & MEMBERSHIPS	6,490.			6,490.		
FOOD & BEVERAGE	492.			320.		
SEMINARS, BOOKS, EDUCATION	1,598.	559.		1,039.		
MISCELLANEOUS	6,665.			6,085.		
OFFICE SUPPLIES	4,600.			4,311.		
K-1: 7/6 INVESTMENT	•			-,		
PARTNERSHIP	253,969.	253,679.		0.		
K-1: HCTS CASH MANAGEMENT						
P'SHIP	1,983.	1,983.		0.		
K-1: BEDELIA STREET	9,541.	9,520.		0.		
K-1: TURSON, LP	178,088.	155,759.		0.		
K-1: 7/6 INVESTMENT						
P'SHIP-CHARITABLE	25.	0.		25.		
K-1: TD REAL ESTATE LP	8,581.	8,493.		0.		
K-1: STONEMOR PARTNERS LP	1.	0.		0.		
K-1: OAK TREE	131.	130.		0.		
K-1: DC STORES III	10.	0.		0.		
TO FORM 990-PF, PG 1, LN 23	636,953.	595,943.		18,270.		

FORM 990-PF CORPORATE STOC	CK	STATEMENT 8
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
RAYMOND JAMES NORTHERN TRUST - AUTOZONE	4,817,590. 29,150.	5,818,095. 249,574.
TOTAL TO FORM 990-PF, PART II, LINE 10B	4,846,740.	6,067,669.

FORM 990-PF OT	HER INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
BEDELIA STREET PARTNERS, LP	COST	1,845,968.	1,505,836.
TURSON, LP	COST	17,125,572.	17,983,395.
7/6 INVESTMENT PARTNERSHIP	COST	13,475,677.	10,370,496.
HCTS CASH MANAGEMENT PARTNERSHIP	COST	384,403.	308,817.
COVENANT APARTMENT FUND VI, LP	COST	58,450.	6,960.
DG STORE III, LP	COST	-139,456.	667,269.
TD REAL ESTATE LP	COST	2,999,270.	2,556,047.
TOTAL TO FORM 990-PF, PART II, LI	NE 13	35,749,884.	33,398,820.

FORM 990-PF PART V	III - L STEES A	IST ND 1	OF OFFICERS, D	IRECTORS GERS	STAT	EMENT 10
NAME AND ADDRESS			TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EVDENCE
H. CALISTER TURNER, JR. 138 SECOND AVENUE NORTH, NASHVILLE, TN 37201	SUITE	200	PRESIDENT 1.00	0.	0.	0.
MARGARET B. TURNER 138 SECOND AVENUE NORTH, NASHVILLE, TN 37201	SUITE	200	DIRECTOR 1.00	0.	0.	0.
HURLEY C. TURNER, III 138 SECOND AVENUE NORTH, NASHVILLE, TN 37201	SUITE	200	VP/TREASURER 1.00	0.	0.	0.
JENNIFER L. TURNER 138 SECOND AVENUE NORTH, NASHVILLE, TN 37201				0.	0.	0.
CABOT PYLE 138 SECOND AVENUE NORTH, NASHVILLE, TN 37201			ASSISTANT SECR		0.	0.
HAL CATO 138 SECOND AVENUE NORTH, NASHVILLE, TN 37021	SUITE	200	DIRECTOR 1.00	0.	0.	0.
SUSAN LANIGAN 138 SECOND AVENUE NORTH, NASHVILLE, TN 37021			DIRECTOR 1.00	0.	0.	0.
MATTHEW SPRINGER 138 SECOND AVENUE NORTH, NASHVILLE, TN 37021	SUITE	200	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PI	F, PAGE	6,	PART VIII	0.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 11

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

CABOT PYLE 138 SECOND AVENUE NORTH NASHVILLE, TN 37201

TELEPHONE NUMBER

NAME OF GRANT PROGRAM

(615) 846-2053

CTFF GRANT PROGRAM

FORM AND CONTENT OF APPLICATIONS

APPLICATION FORM PROVIDED BY THE FOUNDATION. INCLUDE: DOCUMENTATION OF TAX EXEMPT STATUS, LIST OF OFFICERS & DIRECTORS, MOST RECENT AUDITED FINANCIAL STATEMENT, INTERNAL FINANCIAL STATEMENTS & OPERATING BUDGET, PROJECTED BUDGET.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NO GRANTS FOR: INDIVIDUALS, LOANS, TRAVEL OR SEMINARS, GOVERNMENT AGENCIES, POLITICAL PURPOSES, DINNER EVENTS, OTHER PRIVATE FOUNDATIONS, TELETHONS.

FORM 990-PF	HER REVENUE	STATEMENT 12			
DESCRIPTION	BUS CODE	UNRELATED BUSINESS INC	EXCL CODE	EXCLUDED AMOUNT	RELATED OR EXEMPT FUNC- TION INCOME
7/6 INVESTMENT K-1	211110	-6,964.	14	183,550.	
BEDELIA STREET K-1			14	1,881.	
DG STORE III, LP	531120	27,720.	14	57,309.	
TD REAL ESTATE LP			14	17,778.	
COVENANT APT. FUND VI			14	-1,721.	
STONEMOR PARTNERS, LP	900099	-2,520.	14	349.	
OAKTREE CAPITAL K-1			14	122.	
TURSON, LP			14	-14,997.	
TOTAL TO FORM 990-PF, PG	12, LN 11	18,236.	-	244,271.	