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

QMB No	1545-0052

Department of the Treasury

Do not enter social security numbers on this form as it may be made public.

Internal Revenue Service Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection For calendar year 2016 or tax year beginning 2016, and ending Name of foundation A Employer identification number CATHERINE CROPPER FOUNDATION INC 30-0367431 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 206 MALLARD POINT DRIVE (859) 333-7269 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here GEORGETOWN, KY 40324 G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, Address change Name change check here and attach computation H Check type of organization |X| Section 501(c)(3) exempt private foundation E If private foundation status was terminated under Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation section 507(b)(1)(A), check here Fair market value of all assets at J Accounting method: X Cash Accrual If the foundation is in a 60-month termination end of year (from Part II, col (c), Other (specify) under section 507(b)(1)(B), check here line 16) ▶ \$ 463,137 (Part I, column (d) must be on cash basis) Analysis of Revenue and Expenses (The total of Parti (d) Disbursements (a) Revenue and amounts in columns (b), (c), and (d) may not necessarily equal (b) Net investment for charitable expenses per books (c) Adjusted net purposes (cash basis only) income income the amounts in column (a) (see instructions)) Contributions, gifts, grants, etc , received (attach schedule) 2 Check ► X if the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 13 4 Dividends and interest from securities 9,038 9,038 9,038 Gross rents b Net rental income or (loss) SCANNED Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 7 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances Less Cost of goods sold . b Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 9,053 9,051 9,05 13 Compensation of officers, directors, trustees, etc 800 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) STM107 1,140 b Accounting fees (attach schedule) STM108 1,200 Administrative Other professional fees (attach schedule) 17 Interest . . 18 Taxes (attach schedule) (see instructions) STM110 256 19 Depreciation (attach schedule) and depletion 20 Occupancy Operating and 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) . STM103 138 24 Total operating and administrative expenses. Add lines 13 through 23 . . 3,534 25 Contributions, gifts, grants paid 39,000 39,000 Total expenses and disbursements. Add lines 24 and 25 26 42,534 39,000 27 Subtract line 26 from line 12. Excess of revenue over expenses and disbursements (33,483) Net investment income (if negative, enter -0-) 9,051

For Paperwork Reduction Act Notice, see instructions.

Adjusted net income (if negative, enter -0-)

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9,051

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31

30-0367431	Pag
End of year	

Pa	+ Et	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	Ena or y	/ear
r d	t tk	should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	2,859	5,478	5,478
İ	2	Savings and temporary cash investments	9,989	47,448	47,448
İ	3	Accounts receivable >			
		Less allowance for doubtful accounts			
i	4	Pledges receivable			
ļ		Less allowance for doubtful accounts			
1	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions) .			
	7	Other notes and loans receivable (attach schedule)			
		Less. allowance for doubtful accounts			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			·· <u>·</u>
ä	10a	Investments - U S and state government obligations (attach schedule)			
		Investments - corporate stock (attach schedule) . STM137	302,375	248,749	248,749
	~	Investments - corporate bonds (attach schedule) STM138	159,812	161,462	161,462
	11	Investments - land, buildings, and equipment basis	200,022		
	••	Less accumulated depreciation (attach schedule)	•		
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			·
	14	Land, buildings, and equipment basis			
	1-4	Less accumulated depreciation (attach schedule)		Ì	
	15	Other assets (describe	· · · · · · · · · · · · · · · · · · ·		
	16	Total assets (to be completed by all filers - see the		· · · · <del>- · -</del>	
	10		475,035	463,137	463,137
	47	Instructions Also, see page 1, item I)	473,033	403,137	405,157
	17	Accounts payable and accrued expenses			
Ś	18	Grants payable			
Liabilities	19	Deferred revenue			
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0	0_	
		Foundations that follow SFAS 117, check here			
es		and complete lines 24 through 26 and lines 30 and 31.			
alances	24	Unrestricted			
a	25	Temporarily restricted .			
8	26	Permanently restricted			
Fund		Foundations that do not follow SFAS 117, check here			
Œ		and complete lines 27 through 31.			
Net Assets or	27	Capital stock, trust principal, or current funds	475,035	463,137	
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund .			
\ss	29	Retained earnings, accumulated income, endowment, or other funds			
¥,	30	Total net assets or fund balances (see instructions)	475,035	463,137	
ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	475,035	463,137	
P	rt I	Analysis of Changes in Net Assets or Fund Balan	ces		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30 (must agree with		
	end-	of-year figure reported on prior year's return)		. 1	475,035
2		er amount from Part I, line 27a		2	(33,483)
3		er increases not included in line 2 (itemize) >STM115		3	23,638
4		lines 1, 2, and 3		. 4	465,190
5		reases not included in line 2 (itemize) > STM116		5	2,053
6		Il net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	463,137
EEA					Form <b>990-PF</b> (2016)

	e kınd(s) of property sold (e g , real estate se, or common stock, 200 shs MLC Co )	),	(b) How acquired P-Purchase D-Donation	(c) Date acc		(d) Date sold (mo , day, yr )
1a						
b						
С						
d	· · · · · · · · · · · · · · · · · · ·					
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or o plus expen			(h) Gain (e) plus (f)	
a						
b						<del> </del>
<u>c</u>						
e e						···
<del></del>	gain in column (h) and owned by the	foundation on 1	2/31/60	<del></del>		
Complete only for assets showing						(h) gain minus ess than -0-) <b>or</b>
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col (j			Losses (fro	
а		,	-			
b						
С						
d						
е						
2 Capital gain net income or (net ca	nital loss) <b>f</b>	nter in Part I, line · -0- in Part I, line	<b>&gt;</b> 1	2		
3 Net short-term capital gain or (loss	s) as defined in sections 1222(5) and	(6)				
If gain, also enter in Part I, line 8,	column (c) (see instructions) If (loss)	, enter -0- ın	3			
Part I, line 8	<u> </u>	<u></u>	3	3		
	er Section 4940(e) for Redu				16	
(For optional use by domestic private	•	10(a) tax on net i	nvestment incom	e)		
If section 4940(d)(2) applies, leave this	s part blank					
Was the foundation liable for the section	on 4942 tax on the distributable amou	ınt of any year ın	the base period?	1		Yes No
If "Yes," the foundation does not qualit	y under section 4940(e) Do not com	plete this part				
1 Enter the appropriate amount in ea	ach column for each year; see the ins	tructions before	making any entri	es		
(a)  Base period years  Calendar year (or tax year beginning in	(b) Adjusted qualifying distributions	Net value of n	(c) oncharitable-use as	ssets		(d) oution ratio vided by col (c))
2015	29,500		500,		*	58932
2014	29,299		531,2			55156
2013	26,687		532,4			50118
2012	32,881		520,0			6323
2011	49,868		549,9	988	0.0	90671
2 Total of line 1, column (d)				2	0.3	18107
	-year base period - divide the total or	-	y the		l -	
number of years the foundation ha	as been in existence if less than 5 year	ars	• •	3	0.0	63621
4 Enter the net value of noncharitab	le-use assets for 2016 from Part X, II	ne 5		4		511,862
5 Multiply line 4 by line 3				. 5		32,565
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)			6		91
<b>7</b> Add lines 5 and 6				7	<del></del>	32,656
8 Enter qualifying distributions from	Part XII, line 4			8		39,000
If line 8 is equal to or greater than Part VI instructions.	line 7, check the box in Part VI, line	b, and complete	that part using a	1% tax rate	See the	

Par	T-VII-A   Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
•	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	_X_	
	Website address ► N/A			
14	The books are in care of ▶ DEIDRE BURRELL Telephone no ▶ 859-3	33-7	269	
	Located at ► 206 MALLARD POINT DRIVE, GEORGETOWN, KY ZIP+4 ► 40324	<u> </u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-Check here			▶ ∐
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	l	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country	<u> </u>	<del></del>	L
Pai	t VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	_	<u> </u>	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . Yes X No		ĺ	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		-	
	disqualified person? Yes X No		Ī	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No  Yes X No  Yes X No			
			ļ	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?		ŧ	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		]	
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)		1	
<b>.</b>	termination of government service, if terminating within 90 days.)  Yes X No  If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
b	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	ļ	
	Organizations relying on a current notice regarding disaster assistance check here	10		-
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		}	
·	were not corrected before the first day of the tax year beginning in 2016?	1c	Ì	х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	10		
~	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).		1	
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and			
_	6e, Part XIII) for tax year(s) beginning before 2016? Yes X No		-	
	If "Yes," list the years ▶ ,		<u> </u>	
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions )	2b	]	Ì
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	•		ļ	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year? Yes $[\overline{X}]$ No		F	
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or		}	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		[	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of		1	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		]	
	foundation had excess business holdings in 2016)	3b	L	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		1	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		X
EEA	, F	orm <b>9</b> 9	0-PF	(2016)

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Pa	t VII-B   Statements Regarding Activitie	s for \	Which Forr	n 4720	May Be	Requi	r <mark>ed</mark> (continued	)	
•5a	During the year did the foundation pay or incur any arr	nount to.							
	(1) Carry on propaganda, or otherwise attempt to influ	ience leg	gislation (section	n 4945(	e))? .	. [	Yes X No		
	(2) Influence the outcome of any specific public electrons	on (see	section 4955),	or to car	ry on,			1 1	
	directly or indirectly, any voter registration drive?					[	Yes X No	1	
	(3) Provide a grant to an individual for travel, study, or	r other s	ımılar purposes	;?		[	Yes X No		
	(4) Provide a grant to an organization other than a chi	arıtable,	etc., organizati	on desc	ribed in				
	section 4945(d)(4)(A)? (see instructions) .					. [	Yes X No	1 1	
	(5) Provide for any purpose other than religious, chart	itable, so	entific, literary	, or educ	cational			1	
	purposes, or for the prevention of cruelty to children	en or ani	mals?			ſ	Yes X No	1	
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans	sactions	fail to qualify u	nder the	exceptions	describe	d in	1 1	
	Regulations section 53 4945 or in a current notice regi							5b	
	Organizations relying on a current notice regarding dis	saster as	sistance check	here			▶ 🗍		
С	If the answer is "Yes" to question 5a(4), does the foun	dation cl	aim exemption	from the	e tax			1 1	
	because it maintained expenditure responsibility for th					ſ	Yes No		
	If "Yes," attach the statement required by Regulations	section	53 4945-5(d)					1 1	
6a	Did the foundation, during the year, receive any funds		• •	pav pre	emiums				
	on a personal benefit contract?	,,		, p 3 p		[	Yes X No		
b	Did the foundation, during the year, pay premiums, dir	ectly or i	ndirectly, on a	nersona	I benefit cont	ract?		6b	x
	If "Yes" to 6b, file Form 8870		,,	p0/00/10				0.5	<del></del>
<b>7</b> a	At any time during the tax year, was the foundation a	narty to a	nrohibited tav	shelter	transaction?	. [	Yes X No		
	If "Yes," did the foundation receive any proceeds or ha	-	•			ction?		7b	
$\overline{}$	rt VIII Information About Officers, Dire			_		_	s Highly Paid		00000
	and Contractors	0.0.0	, Tradicos,	· oun		iiugei	s, mgmy raic	Linki	<i>y</i> 003,
11	ist all officers, directors, trustees, foundation mana	aners an	d their compe	neation	/see instru	ctions)			<del></del>
	ist an omore, an octors, tradices, realization mane		e, and average		mpensation		Contributions to	(a) Eyne	ense account,
	(a) Name and address		rs per week ed to position		not paid, ster -0-)		oyee benefit plans ferred compensation	other a	allowances
DET	DRE BURRELL	DIREC		STMA		and de	ierrea compensation	<del> </del>	
_	MALLARD POINT DRIVE, KY 40324	PIREC	2.00	31111	200		0		0
	SY D SELKE	DIREC		STMA				<del> </del>	<del>_</del>
	05 E SNYDER RD, TUCSON, AZ 85749	DIREC	2.00	SIM	200		0		0
-	VIN SELKE	DIREC		STMA				<del> </del>	
	05 EAST SNYDER, TUCSON, AZ 85749	DIREC	2.00	SIMA	200		0		0
	D SELKE	DIREC		STMA				<del> </del>	
		DIREC	2.00	SIMA	200		0	İ	0
_	2 EAST 2ND ST, TUCSON, AZ 85710	thon th		on line		uotiono\		ــــــــــــــــــــــــــــــــــــــ	0
	Compensation of five highest-paid employees (other 'NONE."	ו נוומוו נו	iose meiuded	on me	ı - see ilisti	uctions	i. ii none, emei		
	NONE.				T		(d) Contributions to	T	
	(a) Name and address of each employee paid more than \$50	000	(b) Title, and a		(a) Compor	ration	employee benefit	(e) Exper	nse account,
	(a) Name and address of each employee paid more than the	,000	devoted to po		(c) Comper	isalion	plans and deferred compensation	other a	Illowances
NON					<del>                                     </del>			<del> </del>	
MON	<u> </u>								
		•						<del> </del>	
			<del></del>		<del> </del>		<u> </u>	<del> </del>	
					<del>                                     </del>			<del> </del>	
			ļ		<del> </del>			<del> </del>	
					1			1	
	Laurahan of other ampleyees and area 650,000		<u> </u>		<u> </u>		L	<del> </del>	
	I number of other employees paid over \$50,000		<del></del>		<u></u>	• •		Form 00	0 0 DE (2016)
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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly F	aid Employees,
3 Five highest-paid independent contractors for professional services (se	ee instructions). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include releving animal other beneficiaries served, conferences convened, research papers produced.		Expenses
1		
2		
3		
4		
Part IX-B   Summary of Program-Related Investments (see	e instructions)	<u> </u>
Describe the two largest program-related investments made by the foundation during the ta		Amount
1		
2		

Total. Add lines 1 through 3

All other program-related investments See instructions

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•

Pai	Minimum Investment Return (All domestic foundations must complete this part. Foreign	found	dations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	471,026
b	Average of monthly cash balances	1b	48,631
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	519,657
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	519,657
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions) .	4	7,795
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	511,862
6	Minimum investment return. Enter 5% of line 5	6	25,593
Pai	Distributable Amount (see instructions) (Section 4942(J)(3) and (J)(5) private operating for	ounda	itions
	and certain foreign organizations check here ▶   and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	25,593
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 ) . 2b		
C	Add lines 2a and 2b	2c	91
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	25,502
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	25,502
6	Deduction from distributable amount (see instructions)	6	<del></del>
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	25,502
Pa	rt 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	39,000
b	Program-related investments - total from Part IX-B	1b	
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		
а	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	39,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	91
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	38,909
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	found	ation
	qualifies for the section 4940(e) reduction of tax in those years		

•	Trans   Transmission   (a)	/h)	(a)	(4)	
1	Distributable amount for 2016 from Part XI, line 7	Corpus	(b) Years pnor to 2015	(c) 2015	(d) 2016 25,502
2	Undistributed income, if any, as of the end of 2016		······································		23,302
а	Enter amount for 2015 only			•	
b	Total for prior years				
3	Excess distributions carryover, if any, to 2016		· · · · · · · · · · · · · · · · · · ·		
а	From 2011 .				
b	From 2012			<u> </u>	,
С	From 2013	. }		<b>!</b>	
d	From 2014	t }		1	
е	From 2015			‡ ‡	
f	Total of lines 3a through e	19,037		<u>;</u>	
4	Qualifying distributions for 2016 from Part XII,		······································		
	line 4 ▶ \$ 39,000			•	
а	Applied to 2015, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)			ĺ	
C	Treated as distributions out of corpus (Election			· · · · · · · · · · · · · · · · · · ·	
	required - see instructions)			_	
đ	Applied to 2016 distributable amount	``	· · · · · · · · · · · · · · · · · · ·		25,502
е	Remaining amount distributed out of corpus	13,498	***************************************		
5	Excess distributions carryover applied to 2016				
	(If an amount appears in column (d), the same		***************************************		
	amount must be shown in column (a) )				
6	Enter the net total of each column as				
	indicated below:		;		:
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5 .	32,535			
b	Prior years' undistributed income Subtract			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·
	line 4b from line 2b			1	
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 .			<u>.</u>	
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions .				
е	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	·	,		0
7	Amounts treated as distributions out of corpus		·		
	to satisfy requirements imposed by section		;	ļ	
	170(b)(1)(F) or 4942(g)(3) (Election may be			1	
	required - see instructions)				
8	Excess distributions carryover from 2011 not			·	•
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2017.			1	
	Subtract lines 7 and 8 from line 6a	32,535			<del></del>
10	Analysis of line 9:		į	1	· · · ————
_	Excess from 2012 . 3,242				
b	Excess from 2013 7,998		1	<u> </u>	
C	Excess from 2014 3,070		į	<u> </u>	
d	Excess from 2015 4,727			<u> </u>	
е	Excess from 2016 . 13,498			·	

Part	XIV Private Operating Fou	ndations (see inst	tructions and Part	VII-A, question 9	)	<u> </u>
1a	If the foundation has received a ruling or	determination letter tha	it it is a private operati	ng		
•	foundation, and the ruling is effective for	2016, enter the date of	the ruling		<b>•</b>	
b	Check box to indicate whether the found		•	ed in section	4942(j)(3) or 4	1942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	1 10.20(0) 0. 1 1	/
	income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	investment return from Part X for each year listed	(a) 2010	(6) 2010	(6) 2014	(4) 2013	<u> </u>
b	85% of line 2a			<del> </del>		· · · · · · · · · · · · · · · · · · ·
_			<u>-</u>	<del>-</del>		
С	Qualifying distributions from Part XII, line 4 for each year listed				_	
d	Amounts included in line 2c not used directly for active conduct of exempt activities				<u></u>	3,4,
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c		- 1			
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(j)(3)(B)(i)					
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed .					
С	"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		· · · · · · · · · · · · · · · · · · ·			
Part		tion (Complete th	his part only if the	ne foundation ha	d \$5,000 or more	in assets at
··········	any time during the yea				. 40,000 00.0	400010 41
1	Information Regarding Foundation M				<del> </del>	
а	List any managers of the foundation wh	_	e than 2% of the total	contributions received l	ov the foundation	
	before the close of any tax year (but on	ly if they have contribute	ed more than \$5,000)	(See section 507(d)(2)	)	
b	List any managers of the foundation wh	o own 10% or more of t	he stock of a corporat	ion (or an equally large	portion of the	<del></del>
	ownership of a partnership or other enti				•	
2	Information Regarding Contribution,	Grant, Gift, Loan, Sch	nolarship, etc., Progr	ams:		
	Check here ▶ X if the foundation onl	v makes contributions to	o preselected charitab	le organizations and do	es not accept	
	unsolicited requests for funds. If the four other conditions, complete items 2a, b,	indation makes gifts, gra				
а	The name, address, and telephone num	<del></del>	of the person to whom	applications should be	addressed	
-			•		 	
b	The form in which applications should b	e submitted and informa	ation and materials the	ev should include		<del></del>
				· • · · · · · · · · · · · · · · · · · ·		
С	Any submission deadlines					
	•	<del></del>	·	<del></del>		
d	Any restrictions or limitations on awards	i, such as by geographi	cal areas, charitable fi	elds, kinds of institution	s, or other	
	factors:					

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
BEREA COLLEGE			INDIVIDUAL	
CPO 2216			SCHOLARSHIP FOR	
BEREA, KY 40403		PC	KY RESIDENTS	15,000
HONOR FLIGHT BLUEGRASS CHAPTER INC			HONOR FLIGHT	
11707 ROBINDALE RD			PROGRAM FOR WWII	
Louisville, KY 40243		PC	VETERANS	10,000
ROYAL SPRINGS FOP NO 59				
401 OUTLET CENTER DR SUITE 230			SHOP WITH A COP	
Georgetown, KY 40324		PC	PROGRAM	4,000
MEALS ON WHEELS OF LEXINGTON INC			PROVIDE SPECIAL	
460 EAST MAIN ST			DIETARY NEEDS,	
Lexington, KY 40503		PC	REPLENISH FOOD	6,000
CHILDRENS READING FOUND OF APPLACHI			PROVIDE PROGRAMS	
905 NORTH 12TH ST SUITE 12			TO FOSTER READING	
Middlesboro, KY 40965		PC	LITERACY SKILLS	2,000
FRIENDS OF THE DUNBAR ADVISORY COUN			FUND PROGRAM	
404 STONE CREEK DR			ACTIVITIES WITHIN	
Lexington, KY 40503		PC	DUNBAR COMMUNITY	2,000
Total			<b>&gt;</b> 3a	39,000
b Approved for future payment				
Total		L	<b>▶</b> 3b	

	Unrelated	business income	Excluded by se	ection 512, 513, or 514	(e)
	(a) Business	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
Program service revenue	code		<u> </u>		
b					
c c				<del></del> _	<u> </u>
d		<del></del>	-		
e					
f					
g Fees and contracts from government agencies		· · · · · · · · · · · · · · · · · · ·			<del></del>
Membership dues and assessments .		<del></del>		<u> </u>	
Interest on savings and temporary cash investments	522100	13			
Dividends and interest from securities .	523000	9,038			
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property .					
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than inventory					
Net income or (loss) from special events .					
Gross profit or (loss) from sales of inventory					
Other revenue. a					
b				·	
c					
d					
e					
Subtotal Add columns (b), (d), and (e)		9,051	<u> </u>		<u></u>
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations)		•		13	9,0
Line No. Explain below how each activity for which incomplishment of the foundation's exempt	•	a in column (e) of F		iouted importantly to tr	IE
V accomplishment of the foundation's exempt	ourposes (othe	r than by providing t	funds for such p	ourposes) (See instruc	ctions)
V accomplishment of the foundation's exempt	ourposes (ottle	r than by providing f	funds for such p	ourposes) (See instruc	ctions )
T accomplishment of the foundation's exempt	ourposes (oure	r than by providing f	funds for such p	ourposes) (See instruc	ctions )
V accomplishment of the foundation's exempt	ourposes (oure	r than by providing f	funds for such p	eurposes) (See instruc	ctions )
	Jurposes (ourie	r than by providing f	funds for such p	ourposes) (See instruc	ctions )
accomplishment of the foundation's exempt	Juliposes (ourie	r than by providing f	funds for such p	purposes) (See instruc	ctions )
	Juliposes (ourie	r than by providing f	funds for such p	purposes) (See instruc	ctions )
	Jul poses (oure	r than by providing f	funds for such p	purposes) (See instruc	ctions )
	Jul poses (ourie	r than by providing f	funds for such p	purposes) (See instruc	ctions )
	Juliposes (ourie	r than by providing f	funds for such p	purposes) (See instruc	ctions )
	Juliposes (ourie	r than by providing f	funds for such p	purposes) (See instruc	ctions )

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

1	Did the or	ganization direc	tly or indirectly engage	ge in any of the following wi	th any other	organization des	cribed		Yes	No
	ın section	501(c) of the Co	ode (other than section	on 501(c)(3) organizations)	or in section	527, relating to p	oolitical			
	organizati	ons?							1	
а	Transfers	from the reporti	ng foundation to a no	oncharitable exempt organiz	zation of				1	
	(1) Cash	· ·	•	• =				1a(1)	X	Ì
	(2) Other	assets						1a(2)		X
b	Other tran							1(-)	<del>                                     </del>	
_			oncharitable exempt	organization				1b(1)	f	Х
	• •		•	exempt organization	•	• •	•	1b(2)	1	X
			uipment, or other ass		•	•		1b(3)		X
	• •	oursement arran	•		•	•	•	1b(4)	<del> </del>	X
		or loan guarant	-	• •					<del> </del>	X
	• •	_		r fundraising solicitations	•	•		1b(5)	<del>†                                      </del>	X
_	, ,		•	ū				1b(6)	<b></b> -	$\frac{\hat{x}}{x}$
C	•			ther assets, or paid employ				1c	<u> </u>	Λ
d				nplete the following schedu		-				
		-	<del>-</del>	given by the reporting found						
				nt, show in column (d) the						
(a) Lii	ne no (b) A	mount involved		charitable exempt organization	(d) [	Description of trans	fers, transactions, and s	haring arr	angeme	ents
<u>1a-</u>	1	4,000	ROYAL SPRIM	IGS FOP 59	GI	FTS UNDERP	RIVILEGED CHI	-		
			<del>-</del>							
				·		·				
_		_								
						<u> </u>				
						<del></del>				
		-					·· ······			
							·			
	+									
			<del></del>							
	le the fou	ndation directly	or indirectly affiliated	with, or related to, one or n	ore tay even	nnt organizations				
2a		-	•	than section 501(c)(3)) or			•	Πv	s X	No
				man section 50 f(c)(5)) or i	n section 527	•			S A	] 140
D	<u>-</u>		owing schedule.			<del></del>				
		a) Name of organ	ızatıon	(b) Type of organi	zation		(c) Description of rela	tionship		
		· · · · · ·					· · · · · · · · · · · · · · · · · · ·			
						<u> </u>				
	Under p	enatties of penjury, I o	declare that I have examin ration of preparer (other the	ed this return, including accompany an taxpayer) is based on all informa	ring schedules are	nd statements, and to	the best of my knowledge :	and belief, it	is true,	
Sig	n	0	10 . 1	1		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		IRS discus		dum.
He		A/such	e Durnil	し レケハスノバ	DIREC	CTOR	with the	preparer sh	own belo	ow
•••		ature of officer or tru	istee	Date	Title		(see ins	1)7	Yes	No No
		Print/Type prepare	er's name	Prepacer's specialitie	ha4 :	Date	Check If	PTIN		
Pai	id	Angela M S	Serafini		1x 42	4181	self-employed	P0024	1073	
Pre	parer	<del></del>	► Angela M Se	erafini CPA	1 ()		Firm's EIN			
	e Only	Firm's address		Hargett Circle Su	te 180		Phone no			
US	Cilly	5 4541633	Lexington F				859-338	-3699		
EEA							32, 230	Form 99	0-PF	(2016)
,									•	/

Federal Supporting Statements **2016** PG01 Name(s) as shown on return CATHERINE CROPPER FOUNDATION INC 30-0367431 Form 990PF - Part VIII Statement #A01 Compensation Explanation Name DEIDRE BURRELL Explanation DIRECTOR FEES PG01 Form 990PF - Part VIII Statement #A02 Compensation Explanation Name PATSY D SELKE Explanation DIRECTOR FEES PG01 Form 990PF - Part VIII Statement #A03 Compensation Explanation Name MARVIN SELKE Explanation DIRECTOR FEES

	al Supporting Statement		2016 PG01
ame(s) as shown on return  ATHERINE CROPPER FOUNDATIO	NI TNC	FE	30 0367431
ATHERINE CROPPER FOUNDATIO	N INC		30-0367431
	m 990PF - Part VIII		Statement #A04
Compe	nsation Explanation		
<del>Iame</del> BRAD SELKE			
Explanation IRECTOR FEES			
DIRECTOR FEES			
E 000D	F - Part III - Line	2	PG01
	Increases Schedule	3	Statement #115
015 DIVIDEND IN TRANSIT		5,615	
JNREALIZED CAPITAL GAIN	····	18,023	
lotal		23,638	
			PG01
Form 990P	F - Part III - Line	5	Statement #116
	Decreases Schedule		
2016 DIVIDEND DEPOSIT IN TRANSIT		2,053	
Cotal		2,053	
			DG01
Form 990PF	- Part II - Line 10	(b)	PG01 Statement #137
	Corporate Stock Sch		
Category	BOY	Book Value	EOY FM
	120 022	144 40	3 44 46
APITAL INCOME BUILDER SER C THE INCOME FUND OF AMERICA	139,932 162,443	144,46 104,28	
			<del></del>
<b>Cotals</b>	302,375	248,749	9 248,749

Federal Su	upporting Statemer	its 20	<b>16</b> PG01
Name(s) as shown on return	-	FEIN	
CATHERINE CROPPER FOUNDATION I	NC		30-0367431
Investments: Co	art II - Line 1 rporate Bond Sc	•	Statement #138
Category	BOY	Book Value	EOY FMV
THE BOND FUND OF AMERICA SER C	159,812	161,462	161,462

						$\overline{}$
		Federal Su	Federal Supporting Statements	nents	2016 PG01	_
Name(s) as shown on return CATHERINE CROPPER FOUNDATION INC					Your Social Security Number 30-0367431	
	Form 990PF -	Part	I - Line 23 - Other Expenses Schedule	edule	Statement #103~	
Description	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose		
SERVICE CHARGES FILING FEES POSTAGE	100 15 23	0 0	0 0	0 0 0		
Totals	138	0	0	0		
	Form 990PF - Part		I - Line 16(a) - Legal Fees Schedule	dute	PG01 Statement #107~	
Description ATTEND MEETING, TAKE MINUTES	Revenue and expenses 1,140	Net investment	Adjusted net income	Charitable purpose 0		
Totals	1,140	0	0	0		
						$\neg$

		Federal Su	Federal Supporting Statements	nents	2016 PG01
Name(s) as shown on return CATHERINE CROPPER FOUNDATION INC					Your Social Security Number 30-0367431
	Form 990PF - Part I		Line 16(b) - Accounting Fees Schedule	chedule	Statement #108~
Description Tax RETURN PREPARATION	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose	
Totals	1,200	0	0		
	Form 5	Form 990PF - Part I - Line 18 - Taxes Schedule	. 18 - Taxes Schedule		PG01 Statement #110~
Description FEDERAL INCOME TAX	Revenue and expenses	Net investment	Adjusted net income	Charitable purpose	
Totals	256	0	0	0	
		·			