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# Department of the Treasury

### **Return of Private Foundation**

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

OMB No 1545-0052

Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. 2016

Open to Public Inspection

For	calen	dar year 2016 or tax year beginning	,	2016, and	ending		, 20
Na	me of fo	undation			A Employ	er identification numb	er
The	e Harry	and Pam Chapman Foundation			<u> </u>	30-0778564	
		d street (or PO box number if mail is not delivered to street address)	F	Room/suite	<b>B</b> Telepho	ne number (see instruct	tions)
462	26 Drak	ce Falls			1		
		n, state or province, country, and ZIP or foreign postal code			C If exemp	tion application is pend	ding, check here ▶ ☐
Kat	lv. Tex	as 77450					,
			of a former pu	blic charit	<b>D</b> 1. Foreig	ın organizations, check	here ▶□
		☐ Final return ☐ Amended r	•			•	
		Address change Name char	nge			n organizations meetin here and attach compi	
Н	Check	type of organization: Section 501(c)(3) exempt p	<del></del>	on	E If private	foundation status was	terminated under
		on 4947(a)(1) nonexempt charitable trust			section 5	507(b)(1)(A), check here	▶□
_		narket value of all assets at J Accounting method			1		
		f year (from Part II, col. (c),				indation is in a 60-mont ction 507(b)(1)(B), chec	
	line 16		on cash basis.)		ì		
		Analysis of Revenue and Expenses (The total of			<del></del>	1	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue an expenses per	(0) 146	t investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions) )	books		ncome	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	10	000		<del>                                     </del>	1
	2	Check ► ☐ If the foundation is <b>not</b> required to attach Sch. B	43,			<del>                                     </del>	<del>                                     </del>
	3	Interest on savings and temporary cash investments		2		<del> </del>	1
	4	Dividends and interest from securities				<del> </del>	<del>                                     </del>
	5a	Gross rents				<del> </del>	
	Ь	Net rental income or (loss)					
a)	6a	Net gain or (loss) from sale of assets not on line 10					
Ē	b	Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2)					
Re	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold				<del> </del>	F
	C	Gross profit or (loss) (attach schedule)					<del>                                     </del>
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	49.	002			
	13	Compensation of officers, directors, trustees, etc.		-			
Expenses	14	Other employee salaries and wages .					<del></del>
ž	15	Pension plans, employee benefits EIVED					
<u>Ş</u>	16a	Legal fees (attach schedule)					
	b						
ĕ	С	Other professional fees (attach schedule) 0.5.2017		1			
rat	17	Interest					
istı	18	Taxes (attach schedule) (see instructions)					
Ę.	19	Depreciation (attach schedule) and depletion					
ф	20	Occupancy					
٧	21	Travel, conferences, and meetings					
ınc	22	Printing and publications					
g	23	Other expenses (attach schedule)					
ţ	24	Total operating and administrative expenses.					
ž		Add lines 13 through 23					l
Operating and Administrative	25	Contributions, gifts, grants paid	8.	936			
0	26	Total expenses and disbursements. Add lines 24 and 25		936			
	27	Subtract line 26 from line 12.					
	а	Excess of revenue over expenses and disbursements	40.	066			
	ь	Net investment income (if negative, enter -0-)					
		Adjusted not income (if negative enter -0-)				T	<del>   </del>

	art II	Attached schedules and amounts in the description column	Beginning of year	End o	f year
		Balance Sheets Attached schedules and amounts in the description column 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	10,404	4,668	4,668
	2	Savings and temporary cash investments	4,451	50,253	50,253
	3	Accounts receivable ►			
	1	Less. allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
	ĺ	Less. allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	}	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶		·	
		Less allowance for doubtful accounts ▶			<del></del>
şţs	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments—U S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment. basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments-mortgage loans		<del></del>	
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶		· · · · · · · · · · · · · · · · · · ·	
	Ì	Less. accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ►)			<del></del>
	16	Total assets (to be completed by all filers-see the			
		ınstructions. Also, see page 1, item l)	14,855	54,921	54,921
	17	Accounts payable and accrued expenses			
Ş	18	Grants payable			Ì
Liabilities	19	Deferred revenue			
bil	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ► )			
	23	Total liabilities (add lines 17 through 22)	0	0	
Ø		Foundations that follow SFAS 117, check here			1
ည		and complete lines 24 through 26 and lines 30 and 31.	Ì		
lan	24	Unrestricted			
Balances	25	Temporarily restricted			
ğ	26	Permanently restricted			
or Fund		Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.			
Ξ,			į		
S.	27	Capital stock, trust principal, or current funds	<del></del>		
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	<del></del>		
4St	29	Retained earnings, accumulated income, endowment, or other funds  Total net assets or fund balances (see instructions) .			
et'	30 31	Total liabilities and net assets/fund balances (see	14,855	54,921	}
Ž	٥.	instructions)	14.055	54.023	
Pα	rt iii	Analysis of Changes in Net Assets or Fund Balances	14,855	54,921	
		I net assets or fund balances at beginning of year—Part II, colui	mn (a), line 30 (must	agree with	
		of-year figure reported on prior year's return)			14 055
2		r amount from Part I, line 27a		<del></del> -	14,855 40,066
3		er increases not included in line 2 (itemize)			40,000
4	Add	lines 1, 2, and 3		4	54,921
				<del></del> +	37,321
6	Tota	reases not included in line 2 (itemize)   I net assets or fund balances at end of year (line 4 minus line 5)—I	Part II, column (b), lin	e 30 6	54,921N/a
			<del></del>		- ,

Part	(a) List and describe the	Losses for Tax on Investme kind(s) of property sold (e.g., real estate, e.g., or common stock, 200 shs MLC Co.)		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr )
<u>1a</u>	N/A			<u> </u>		
<u>b</u>				<del> </del>		
<u>c</u>				<del> </del> -		
<u>d</u>				<del> </del>		<del></del>
<u>e</u>		(f) Depreciation allowed	(a) Cost o	r other basis	(b) Gau	n or (loss)
	(e) Gross sales price	(or allowable)		ense of sale		f) minus (g)
<u>a</u>						
b			<del></del>			
<u>c</u>						
<u>d</u>						
<u>e</u>	Complete only for assets show	wing gain in column (h) and owned	by the foundation	on 12/31/60		<del></del>
	Complete only for assets snow	<del></del>	<del></del>			(h) gain minus t less than -0-) <b>or</b>
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) I (j), if any		rom col (h))
а						
b						
c						
d_						
e			<del></del>		<del></del>	
2	Capital gain net income or		also enter in Pa enter -0- in Pa		2	
3	If gain, also enter in Part I	or (loss) as defined in sections , line 8, column (c) (see instruc	tions) If (loss)			
	Part I, line 8			<del>: : :                                </del>	3	
Part		er Section 4940(e) for Redurate foundations subject to the	<del></del>	<del></del>		
Was t	s," the foundation does not o	this part blank section 4942 tax on the distribution qualify under section 4940(e). Dunt in each column for each year	o not complete	this part.		☐ Yes ☐ No
	(a)	<del></del>	i, see the mstr		king any entires.	(d)
Cale	Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) of noncharitable-use as		nbution ratio divided by col (c))
	2015					<del></del>
	2014					
	2013	<del></del>				<del></del>
	2012	<del></del>				
	2011	<del></del>				
_	Takal of two displayment (d)					
2 3	Total of line 1, column (d)  Average distribution ratio f	or the 5-year base period—divi		line 2 by 5 or by	. 2	<del></del>
3		ation has been in existence if le			3	
4	Enter the net value of nonc	charitable-use assets for 2016 fi	om Part X, line	5	. 4	
5	Multiply line 4 by line 3 .				. 5	
6	Enter 1% of net investmen	t income (1% of Part I, line 27b	)		. 6	
7	Add lines 5 and 6 .				. 7	
8		ns from Part XII, line 4 ter than line 7, check the box in			8 hat part using a 1	% tax rate. See the

Part '	<u></u>	instr	uctio	ns)
` 1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.  Date of ruling or determination letter (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		None	
	here ► ☐ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			<u> </u> ]
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
3	Add lines 1 and 2		None	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		None	
6	Credits/Payments.			
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
c	Tax paid with application for extension of time to file (Form 8868) . 6c			į
_d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached  Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  9			
9 10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			<del></del>
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax   Refunded   11			
Part				L
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		1
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		· ·
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year?	1c		<b>\</b>
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<b>✓</b>
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	- <u>-</u>		
		3		<del>-</del>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b		<u>✓</u>
b 5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		
3	If "Yes," attach the statement required by General Instruction T	- <del> </del>		<del></del> -
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.			}
•	By language in the governing instrument, or		1	
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that		}	
	conflict with the state law remain in the governing instrument?	6	1	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	1	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		İ	}
~	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			<del></del>
•	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9	1	✓
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		✓
	Fo	rm <b>99</b>	0-PF	(2016)

Part	VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Ì	
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		1
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		<b>✓</b>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	✓.	
	Website address ►	+		
14	The books are in care of ► Harry S. Chapman Telephone no. ►			
	Located at ► 4626 Drake Falls, Katy, TX ZIP+4 ►	7745	0	
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 •   15		•	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
16	over a bank, securities, or other financial account in a foreign country?	16	.03	/
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			<u> </u>
	the foreign country ▶	!		
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?   Yes  No	.		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?	.		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes  No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes  No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ No (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)?		ì	
	(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	ľ	
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
_	Organizations relying on a current notice regarding disaster assistance check here	}	ļ	[
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?			<del>_</del>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1c		<del></del> -,
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	}	ľ	
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?	l	1	}
	6e, Part XIII) for tax year(s) beginning before 2016?	1	}	1
h	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)		}	1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	- {		İ
	all years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	➤ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		ļ	
<b>3</b> a			- (	{
	at any time during the year?		- {	1
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			ļ
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	]		)
	foundation had excess business holdings in 2016.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		_
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	-		
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		7

Pana	

Part	VII-B	Statements Regarding Activities	s for V	Vhich Form	4720	May Be R	equir	e <b>d</b> (conti	nued)			
5a	During	the year did the foundation pay or incur a	any amo	ount to	_					T		
	(1) Car	ry on propaganda, or otherwise attempt	to influe	ence legislati	on (sec	tion 4945(e	))? .	☐ Yes	✓ No		1 1	
		ence the outcome of any specific publi		•		•	-	,		}		
	dire	ctly or indirectly, any voter registration di	ıve?				•	☐ Yes	✓ No			
	(3) Prov	vide a grant to an individual for travel, stu	ıdy, or	other sımılar	purpos	es?		☐ Yes	☑ No	1 .		
		vide a grant to an organization other tha			_			l		1 1	1	
		tion 4945(d)(4)(A)? (see instructions)						☐ Yes	✓ No	1	i	
		vide for any purpose other than religious								1 1	, }	
		poses, or for the prevention of cruelty to						_	✓ No	1 1	¦	
b		nswer is "Yes" to 5a(1)–(5), did <b>any</b> of the							rıbed in			
	_	ions section 53.4945 or in a current notice	_	-		•	uctions	)?		5b	]	
		ations relying on a current notice regard							ightharpoons		. ]	
С		nswer is "Yes" to question 5a(4), does t			ı exem	ption from	the tax			1 1	, }	
		e it maintained expenditure responsibility					-	☐ Yes	☐ No	1 1	.	ļ
		attach the statement required by Regula								1 1		
6a		foundation, during the year, receive any		<del>-</del>	_					1 1	1	}
	-	rsonal benefit contract?						Yes	✓ No			
b		foundation, during the year, pay premiur	ns, dire	ctly or indire	ctly, on	a personal	benefi	t contract	? .	6b		<u> </u>
_		to 6b, file Form 8870.									}	}
		me during the tax year, was the foundation " did the foundation receive any proceed						☐ Yes	_			
	VIII	Information About Officers, Direct								7b		
r-aii	AVIII	and Contractors	tors, i	rustees, r	ounda	uon man	ayers,	riigiiiy r	alu El	прюу	<i>:</i> e5,	
1	l ist all	officers, directors, trustees, foundatio	n mana	agers and th	eir con	nnensation	(see i	nstructio	ns)			
<u> </u>				e, and average		mpensation		Contribution	e to	(-) 5		
		(a) Name and address	hou	rs per week ed to position	(If r	not paid, iter -0-)	emplo	yee benefit erred compe	plans	e) Experother a	nse acc Illowand	
Harry S	S. Chapm	an							, ioution			
		s, Katy, TX 77450	Directo	or		0			0			0
	S. Chap			<u> </u>								
4626 D	rake Falls	s, Katy, TX 77450	Directo	or	l	o			o			0
	. Chapma											
2415 B	elle Patri	ce Dr., Cumming, GA 30041	Directo	or	<u> </u>	0			o			0
			}						_			
			l		<u>.                                    </u>							
2	-	nsation of five highest-paid employed	es (oth	er than tho	se incl	uded on li	ne 1—:	see instr	uctions	). If no	ne, e	nter
	"NONE	." 		<del></del>		<del></del>						
			_	(b) Title, and a		1	. 1	(d) Contribu employee		(e) Exper	se acc	ount
,	(a) Name a	nd address of each employee paid more than \$50,00	30	hours per v devoted to p		(c) Comper	isation	plans and c	leferred			
								Compens	Sation			
None									}			
				ļ					[			
				<del> </del>		<del> </del>						
									]			
	<del></del> -			<del> </del>		<del> </del>						
				1		[			}			
				<del> </del>								
									1			
Total	number o	of other employees paid over \$50,000 .						· · ·				
						· · · · · · ·				orm <b>99</b> 0	)-PF(	2016)

Par	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Er and Contractors (continued)	nployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	IE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None		
Tota	number of others receiving over \$50,000 for professional services	
Par	IX-A Summary of Direct Charitable Activities	
	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	None	
		<u> </u>
2		
3		
4		
		}
		L
	IX-B Summary of Program-Related Investments (see instructions)	
De	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	None	
		1
2		
		1
		<u> </u>
	other program-related investments. See instructions	
3	None	
rota	. Add lines 1 through 3	- 000 PF

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore	ign fo	undations,
•	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	
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	0
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	
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here ► □ and do not complete this part.)	ounda	ations
1	Mınımum investment return from Part X, line 6	1_1	. 0
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	3	
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7_	0
Part	XII Qualifying Distributions (see instructions)		<u> </u>
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	0
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.	7	
а	Suitability test (prior IRS approval required)	За	
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	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years	g whet	ther the foundation
	quantities for the decition to refer research of the mineral years		Form 990-PF (2016)

Part	VIII Undistributed Income (see instruction	ons)	<del></del>		
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015 	(d) 2016
_	line 7		<del>                                     </del>		0
2	Undistributed income, if any, as of the end of 2016:				Į
а	Enter amount for 2015 only				
þ	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2016:				
а	From 2011				
b	From 2012				
C	From 2013		1		
d	From 2014				
е	From 2015				
f	Total of lines 3a through e				
4	Qualifying distributions for 2016 from Part XII,		<del>   </del>		
-	line 4. ▶ \$		-		
а	Applied to 2015, but not more than line 2a				
b					<u> </u>
b	(Election required—see instructions)				
_	Treated as distributions out of corpus (Election			<del></del>	
С	·				
_	required—see instructions)		<del></del>		
d	Applied to 2016 distributable amount		<del>                                     </del>		L
е	Remaining amount distributed out of corpus				
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		1		
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
•	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)		1		
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable	<del></del>	+		<del></del>
u	amount—see instructions				
_	Undistributed income for 2015. Subtract line		<del>                                     </del>		
е					
	4a from line 2a. Taxable amount—see				
	instructions				
f	Undistributed income for 2016. Subtract lines		1	İ	
	4d and 5 from line 1. This amount must be	1			
	distributed in 2017				0
7	Amounts treated as distributions out of corpus	İ			)
	to satisfy requirements imposed by section				}
	170(b)(1)(F) or 4942(g)(3) (Election may be			į	
	required—see instructions)		}		[
8	Excess distributions carryover from 2011 not		1		<del></del>
	applied on line 5 or line 7 (see instructions)				İ
9	Excess distributions carryover to 2017.		+		<del></del>
•	Subtract lines 7 and 8 from line 6a		Ì	)	1
40	Analysis of line 9:	<del></del>	<del> </del>		
10				į	
а	Excess from 2012				
b	Excess from 2013		1	}	}
С	Excess from 2014		1	ļ	
d	Excess from 2015				ł
е	Excess from 2016		]		1

Part	XIV Private Operating Founda				)	
· 1a	If the foundation has received a ruling	•		,		
	foundation, and the ruling is effective fo		-	•	F 1040/	
b	Check box to indicate whether the fou Enter the lesser of the adjusted net	Tax year	operating foundat	Prior 3 years	ection 4942(j)(	3) or 4942(j)(5)
2a	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	0	0	0	0	
ь	85% of line 2a	ļ — — — — — — — — — — — — — — — — — — —				
c	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities .					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon.					
а	"Assets" alternative test - enter.					
	(1) Value of all assets	ļ				
	(2) Value of assets qualifying under			1	}	
b	section 4942(j)(3)(B)(i)					
	of minimum investment return shown in Part X, line 6 for each year listed	i				
С	"Support" alternative test—enter					
	(1) Total support other than gross	ļ i				
	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				e foundation ha	ad \$5,000 or mo	re in assets at
	any time during the year-		ıs.)			
1_	Information Regarding Foundation	_	tad many than ON	of the test		Alb
а	List any managers of the foundation before the close of any tax year (but of					by the foundation
Harns 9	S. and Pamela S. Chapman	my ir arey nave ea	manage more and	ari 40,000). (000 00	3011011 001 (4)(2).)	
b	List any managers of the foundation	who own 10% or	more of the stoc	k of a corporation	(or an equally lar	ge portion of the
	ownership of a partnership or other e				· · · · · · · · · · · · · · · · · · ·	
2	Information Regarding Contribution	n, Grant, Gift, Loa	n, Scholarship, et	tc., Programs:	<del></del>	
	Check here ▶ ☑ If the foundation unsolicited requests for funds. If the foundation	oundation makes				
	other conditions, complete items 2a,					
а	The name, address, and telephone nu	ımber or e-maıl ad	dress of the perso	n to whom applica	ations should be a	ddressed:
b	The form in which applications should	d be submitted and	I information and r	naterials they shou	uld include:	
С	Any submission deadlines:					
d	Any restrictions or limitations on av	vards, such as by	geographical are	eas, charitable fie	lds, kinds of inst	tutions, or other

3 Grants and Contributions Paid During t	he Year or Approv	ed for Futu	ire Payment	
Recipient	If recipient is an individual,	Foundation		<del></del>
	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year		1		
		1		
		(		1
San Amanhad Cahadula		( (		
See Attached Schedule		1 1		- 1
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		i i		j
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		] ]		1
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		}		
		[		
Total		· · ·	· · · · · • ;	3a
<b>b</b> Approved for future payment				
, ,				1
				1
		1		}
		j i		
Total	<del></del>	<del></del>		

Pai	LAV	Analysis of Income-Producing Ac	TIAITIE2				
Ente	r gros	ss amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	ion 512, 513, or 514	(e)
			(a)	(b)	(c)	(d)	Related or exempt
			Business code	Amount	Exclusion code	Amount	function income (See instructions.)
1	Prog	ram service revenue.					
	a N	lone	ļ <u> </u>				
	b _				L		
	c _				<u> </u>		
	d _						
	е _						
	f						
	gF	ees and contracts from government agencies					
2	_	bership dues and assessments					
3		est on savings and temporary cash investments					
4		lends and interest from securities					
5	Net r	rental income or (loss) from real estate:					
_		Debt-financed property			<del> </del>		
		Not debt-financed property			<del>   </del>	<del></del>	
6		rental income or (loss) from personal property			1		
7		er investment income	-				
8		or (loss) from sales of assets other than inventory	<del></del>		<del>   </del>		
_		ncome or (loss) from special events			<del>   </del>		
9		s profit or (loss) from sales of inventory	}				<del></del>
10		• • • •					
• • •		er revenue. a	ļ — — — — — — — — — — — — — — — — — — —	ļ	<del> </del>		<del></del>
	р _		<del> </del>		<del> </del>		
			<del></del>				
	d _		ļ		<del></del>		
	e _	(1) (1)	<u> </u>		<u> </u>		
40							
		total. Add columns (b), (d), and (e)	L	L	<u> </u>		
13	Tota	I. Add line 12, columns (b), (d), and (e)				13	
<b>13</b> See	<b>Tota</b> works	II. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	s.)			13	
13 See Par	Tota works t XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Par Lin	Tota works t XV	II. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		aportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		aportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		aportantly to the tions)
13 See Par Lin	Tota works t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation I-B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		apportantly to the tions)

Part	XVII		n Regarding Tra	ansfers T	o and Tra	insactio	ns and	Relations	nips With	Nonchai	ritab	le	
1	ın sec	ne organization o	directly or indirectly e Code (other than									Yes	No
а	-		oorting foundation	to a nonch	haritable ex	empt org	anızatıoı	n of:					
	· · · · · · · · · · · · · · · · · · ·										1a(1)		1
(2) Other assets								1a(2)		<b>✓</b>			
b	Other	transactions.											
	(1) Sa	ales of assets to	a noncharitable ex	kempt orga	anızatıon						1b(1)		✓
	(2) Po	urchases of asse	ets from a nonchar	ıtable exer	npt organiz	zation					1b(2)		<b>✓</b>
	(3) R	ental of facilities,	, equipment, or oth	ner assets	•						1b(3)		<b>✓</b>
	(4) Re	eimbursement ai	rrangements .								1b(4)		<b>✓</b>
	<b>(5)</b> Lo	oans or loan gua	rantees .							•	1b(5)		✓
			ervices or members		-						1b(6)		1
			quipment, mailing							.	1c		✓
d			of the above is "Y										
			ther assets, or ser										
			on or sharing arran										
(a) Line	no (I	b) Amount involved	(c) Name of non	charitable ex	empt organiza	tion	(d) Desc	enption of transf	ers, transaction	ns, and shar	ing arra	angeme	ents
	-												
		·	<del></del>				<del></del>						
	-+				<del></del>								
	-+-								<del></del>				
		<del></del>	<del></del>					<del></del>	<del></del>				
	_												
	descr	ibed in section 5	ectly or indirectly a 601(c) of the Code a following schedul	(other thar						_	Yes		 Vo
		(a) Name of organ	ization		(b) Type of o	rganization			(c) Description	n of relations	ship		
				<u> </u>									
				<u> </u>									
								<u> </u>					
			<del></del>	1,				<u> </u>					
Ciam			declare that I have exami							my knowledg	e and b	elief, it i	s true,
Sign Here	- Huy/leaner				Date Title			May the IF with the p (see instruc			eparer s	shown t	elow
	Joigile	eture of officer or rus		Prenarer	r's signature	7 ^	<del></del>	Date	<del>, ,                                  </del>		īN	===	==
Paid	1				nman l	11000	usonf	1 Dalle 5		K [√] 1f [			_
Prepa	ויסונ	Norman O. Rasm	ussen, Jr. CPA	7 110	VIVENI	L MUM	mery	WH U	<del>~~</del>	mployed	P01	50381	<u>8</u>
Use C	)nly	Firm's name	4025 Countail Lake C	ir C Danel	and TV 33	504	<del>-//</del> -		Firm's EIN ▶	<u> </u>			
		rim s address 🕨	4035 Crystal Lake C	iii 5, Pearla	and, IX //	304			Phone no		QQ/	)_DF	(2016)

### The Harry and Pam Chapman Foundation 4626 Drake Falls Katy, TX 77450

Form 990-PF 12/31/16

Part 1, Line 1:

**Contributions:** 

Harry and Pam Chapman Harry and Pam Chapman

09/21/16 12/19/16 \$ 4,000.00 45,000.00

\$49,000.00

## The Harry and Pam Chapman Foundation 4626 Drake Falls Katy, TX 77450

Form 990-PF 12/31/16

### Part XV:

### **Grants and Contributions paid:**

05/14/16	Star of Hope	\$ 100.00
09/20/16	Changing Life Athletics	4,000.00
11/05/16	College of Idaho	1,000.00
12/18/16	Alzheimer's Association	25.00
12/18/16	American Cancer Society	50.00
12/18/16	American Heart Association	50.00
12/18/16	American Legion	50.00
12/18/16	Boys and Girls Club of America	50.00
12/18/16	Boystown	250.00
12/18/16	George Bush Presidential Libra	300.00
12/18/16	Boystown	25.00
12/18/16	Cystic Fibrosis Foundation	25.00
12/18/16	Jimmy Fund	100.00
12/18/16	Demolay International	50.00
12/18/16	The Glaucoma Foundation	25.00
12/18/16	Habitat for Humanity	55.00
12/18/16	Houston Food Bank	100.00
12/18/16	Meals on Wheels	100.00
12/18/16	Muscular Dystrophy Association	100.00
12/18/16	Parkinson Research Foundation	25.00
12/18/16	St. Jude's Children's Hospital	1,000.00
12/18/16	Salvation Army	100.00
12/18/16	Shriners' Hospital for Childre	1,000.00
12/18/16	Special Olympics Texas	50.00
12/18/16	Star of Hope	100.00
12/18/16	VFW	50.00
12/18/16	USO	100.00
Various	Bank fees	56.00

\$8,936.00

#### 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

2016

Name of	Name of the organization Employer identification number								
The Harry and Pam Chapman Foundation 30-07785						30-0778564			
Organiz	zation type (check on	e):							
Filers o	f:	Section:							
Form 990 or 990-EZ		☐ 501(c)(	501(c)( ) (enter number) organization						
		☐ 4947(a	(1) nor	exempt charitable trust <b>not</b> tre	ated as a private fou	undation			
		☐ 527 po	itical c	ganization					
Form 99	90-PF	<b>☑</b> 501(c)(	3) exer	pt private foundation					
		☐ 4947(a	(1) nor	exempt charitable trust treated	l as a private founda	ition			
		☐ 501(c)(	3) taxa	le private foundation					
Check i	f your organization is	covered by	he <b>Ge</b>	eral Rule or a Special Rule.		<del></del>			
	nly a section 501(c)(7)	-		ation can check boxes for bot	h the General Rule a	and a Special Rule. See			
Genera	l Rule								
For an organization filing Form 990, 990-EZ, or 990-PF that received or more (in money or property) from any one contributor. Comple contributor's total contributions.									
Special	Rules								
	For an organization (	described in	sectio	501(c)(3) filing Form 990 or 99	Ω∩-F7 that met the 3	131/2% support test of the			
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33½% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					90 or 990-EZ), Part II, line itions of the greater of (1)			
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.								
	For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year								
990-EZ,	Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 90-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).								

	organization		Employer identification number
Part I	and Pam Chapman Foundation  Contributors (See instructions). Use duplicate co	poies of Part Lif additional space	30-0778564 is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Harry and Pam Chapman  4626 Drake Falls  Katy, TX 77450	\$ 49,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Employer identification number

Part II	ace is needed.		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	J
(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

		tions completing Part III,	enter the total	Complete columns (a) through (e) and I of exclusively religious, charitable, etc., ee instructions.)				
	Use duplicate copies of Part III if ad							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ft	(d) Description of how gift is held				
		(e) Transfer o	f gift	<u> </u>				
	Transferee's name, address, a	ind ZIP + 4	Relation	ship of transferor to transferee				
1			,					
}								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ft	(d) Description of how gift is held				
İ		(e) Transfer o	f gift					
l			<b>.</b>					
ļ	Transferee's name, address, a	ind ZIP + 4	Relation	ship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ft	(d) Description of how gift is held				
l		(e) Transfer o	f gift	<del></del>				
		. =						
	Transferee's name, address, a	ind ZIP + 4	Relation	ship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift (c) Use		ft	(d) Description of how gift is held				
	(e) Transfer of gift							
	Transferee's name, address, a	and ZIP + 4	Relation	nship of transferor to transferee				

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or