

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

2016

OMB No 1545-0052

Department of the Treasury 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.

Open to Public Inspection

| Fo | or cal | enda | r year 2016 or tax year beginning | , 2016, | , and ending | | , | |
|-------------|-------------|---------------|--|--------------------------|--------------------|--------------|--|-------------------------|
| | | | | | | Α | Employer identification num | nber |
| | | | FAMILY FOUNDATION INC. | | | ┕ | 32-0338339 | |
| | | | DEN CIRCLE | | | В | Telephone number (see inst | ructions) |
| S | TAT | MAH | , GA 30666 | | | ⊢ | 770-725-5382 | |
| | | | | | | C | If exemption application is | pending, check here |
| _ | Che | ok a | II that apply Initial return | Initial return of a form | nor public charity | ł | | |
| G | Cite | ich a | Final return | Amended return | ner public charity | D | Foreign organizations, check | k here |
| | | | Address change | Name change | | | 2 Foreign organizations meet | ing the 85% test, check |
| | Cho | ole to | | | oundation. | 1 | here and attach computation | |
| п | Cite | _ ` | | (c)(3) exempt private f | | _ | If assume formulation atatura | an tarminated |
| - | | | ction 4947(a)(1) nonexempt charitable t | | private foundation | E | If private foundation status under section 507(b)(1)(A) | |
| , | | | | counting method X C | ash Accrual | ĺ | | |
| | ► \$ | ,,, ,,,, | 1 1 1 | Other (specify) | | F | If the foundation is in a 60 | |
| <u> </u> | | T A | | column (d) must be or | i casii basis.) | Ц. | under section 507(b)(1)(B) | , check here |
| <u> </u> | art I | | nalysis of Revenue and xpenses (The total of amounts in | (a) Revenue and | (b) Net investmei | nt | (c) Adjusted net | (d) Disbursements |
| | | CC | plumns (b), (c), and (d) may not neces- | expenses per books | income | | income | for charitable purposes |
| | | \$a | arily equal the amounts in column (a) | | | | | (cash basis only) |
| _ | | (S | ee instructions)) | | | | | |
| 4 | | | Contributions, gifts, grants, etc., received (attach schedule) | 505,157. | | | | |
|) | | 2 | Check ► ☐ If the foundation is not required to attach Sch B | | | | | |
| | | 3 | Interest on savings and temporary cash investments | 41. | 4 | 11. | 41. | |
| ś | | 4 | Dividends and interest from securities | 120,101. | 120,10 | | 120,101. | |
| 7 | | | Gross rents | | | | | |
| j | | 1 | Net rental income | | | | | |
| 5 | R | | Net gain or (loss) from sale of assets not on line 10. | 75,475. | | | | |
| | E V | " | Gross sales price for all sseets on line 6a 5, 620, 744. | | | | | |
| | Ė | 7 | Capital gain net income (from Part IV, line 2) | | 75,47 | <u> 75.</u> | | |
| <u>-</u> - | N U | 8 | Net short-term capital gain | | | | 0. | |
| <u>~</u> | Ē | 9 | Income modifications Gross sales less | | | | | |
| 2017 | _ | 102 | returns and allowances | | | | | |
| ~ | | ł | Less Cost of | | | | | |
| | | ١, | goods sold Gross profit or (loss) (attach schedule) | | | | | |
| | | | Other income (attach schedule) | | | | | |
| | | | | | | | | |
| | | 12. | Total Add lines 1 through 11 | 700,774. | 195,61 | 7. | 120,142. | |
| _ | 1 | 13 | Compensation of officers, directors, trustees, etc | 0. | | | | |
| | 1 | 14 | Other employee salaries and wages | | | | | |
| | | ≬15 ," | Pension plans, employee benefits (*) Legal fees (attach schedule) | | | | | |
| | A | 163 | Legal fees (attach schedule) | | | | | · |
| | D M | 1 | Accounting logs (attern sth) SEE, ST 1 | 1,650. | | | | 1,650. |
| _ | N | 1 | Other professional description Schi) | | | | <u></u> | |
| P | S | 17 | Interest | | | | | |
| P E R | T R | 18 19 | Taxes (attach schedule)(see instrs) Depreciation (attach | ļ | | | | |
| Ā | A | 19 | schedule) and depletion | | | | | |
| Ì | į | 20 | Occupancy | | <u> </u> | | | |
| G | Ě | 21 | Travel, conferences, and meetings | | | | | |
| A | E | 22 | Printing and publications | | | | | |
| Ď | X P. | 23 | Other expenses (attach schedule) | | | _ | | |
| | N | | SEE STATEMENT 2 | 67,475. | 50,72 | <u> 19</u> . | | 16,746. |
| | SES | 24 | Total operating and administrative expenses. Add lines 13 through 23 | 60 12F | 50,72 | 2 | | 10 206 |
| | S | 25 | Contributions, gifts, grants paid PART XV | 69,125. 350,500. | 50,72 | | | 18,396. 350,500. |
| | | 26 | Total expenses and disbursements | 350,500. | | | | 330,300. |
| | | | Add lines 24 and 25 | 419,625. | 50,72 | 29. | 0. | 368,896. |
| | | 27 | Subtract line 26 from line 12 | | | | | - |
| | | а | Excess of revenue over expenses and disbursements | 201 140 | | | | 1 |
| | | H | Net investment income (if negative, enter 0-) | 281,149. | 144,88 | <u> </u> | | |
| | ļ | | Adjusted net income (if negative, enter -0) | | 144,00 | , 0 . | 120,142. | |
| | - 1 | - | , (nogotive) onto. o / | | | | 1 -20/11/20 | |

Form 990-PF

Page **2**

| Par | H | Balance Sheets | Attached schedules and amounts in the description column should be for end-of year amounts only | Beginning of year | | | f year |
|-----------------------|---------------|---|---|---------------------------|-----------------------|-------------|-----------------------|
| - 4 | | | (See instructions) | (a) Book Value | (b) Book Value | | (c) Fair Market Value |
| | 1 | Cash - non-interest | -bearing | 333,497. | 504,4 | 36. | 504,436. |
| | 2 | Savings and tempora | ary cash investments | | | | |
| | 3 | Accounts receivable | * | | | | |
| | | Less allowance for o | doubtful accounts ► | | | | |
| | 4 | Pledges receivable | • | | | | |
| | | Less allowance for o | doubtful accounts > | | | | |
| | 5 | Grants receivable | | | | | |
| | 6 | Receivables due from offic disqualified persons (attac | ers, directors, trustees, and other ch schedule) (see instructions) | | | | |
| | 7 | Other notes and loans reco | eivable (attach sch) | | | | |
| A | | Less allowance for o | doubtful accounts | | | | |
| S | 8 | Inventories for sale of | or use | | | | |
| A S S E T | 9 | Prepaid expenses ar | nd deferred charges | | | | |
| S | | • | and state government | | | | |
| | ١, | Investments — corporate : | · | 7,618,175. | 6,823,6 | 78 | 6,823,678. |
| | 1 | Investments — corporate | , | 1,010,110. | 0,023,0 | | 0,020,0101 |
| | | Investments – land, equipment basis. | · · · | | ····· | | |
| | | Less accumulated deprect (attach schedule) | ation – – – – – – – – – – – – – – – – – – – | | | | |
| | 12 | Investments – morto | nage loans | | | | |
| | 13 | Investments – other | • | | | | |
| | 14 | Land, buildings, and | , | | | | |
| | | Less accumulated depreci (attach schedule) | | | | | |
| | 15 | Other assets (describ | he ▶ | | | | |
| | ı | Total assets (to be o | completed by all filers — Also, see page 1, item I) | 7,951,672. | 7,328,1 | 14. | 7,328,114. |
| Ļ | 17 | Accounts payable ar | nd accrued expenses | | | | |
| , L | 18 | Grants payable | | | | | |
| A B | 19 | Deferred revenue | I | | | | |
| ľ | 20 | Loans from officers, direct | tors, trustees, & other disqualified persons | | | | } |
| ī | 21 | Mortgages and other notes | s payable (attach schedule) | | | | į |
| Ţ | 22 | Other liabilities (desc | cribe►) | | | | |
| Ė | | | | | | | |
| <u> </u> | 23 | Total liabilities (add | | 0. | | 0. | |
| | | and complete lines | Now SFAS 117, check here 24 through 26 and lines 30 and 31. | | | | |
| N F E U T N | 24 | Unrestricted | | 7,951,672. | 7,328,1 | 14. | |
| TN | 25 | Temporarily restricte | ed | | | | |
| D | 26 | Permanently restricted | ed | | | | |
| ASSETS. | | Foundations that do and complete lines 2 | o not follow SFAS 117, check here 27 through 31. | | | | |
| ΕL | 27 | Capital stock, trust p | orincipal, or current funds | | | | |
| ŚÑ | 28 | Paid-in or capital surplus, | or land, bldg., and equipment fund | | | | 1 |
| o E | 29 | Retained earnings, accumi | ulated income, endowment, or other funds | | | | |
| RS | 30 | Total net assets or f | und balances (see instructions) | 7,951,672. | 7,328,1 | 14. | 1 |
| | 31 | | net assets/fund balances | T | | | |
| | | (see instructions) | | 7,951,672. | 7,328,1 | 14. | |
| | | | ges in Net Assets or Fund Balanc | | | | |
| 1 | Total end- | l net assets or fund ba of-year figure reported | alances at beginning of year — Part II, colu d on prior year's return). | ımn (a), line 30 (must ag | ree with | 1 | 7,951,672. |
| 2 | Ente | r amount from Part I, | line 27a | | | 2 | 281,149. |
| | | increases not included in lir | | | Ì | 3 | |
| | | lines 1, 2, and 3 | | | | 4 | 8,232,821. |
| | | ases not included in line 2 (| itemize) | 3 | İ | 5 | 904,707. |
| | | • | alances at end of year (line 4 minus line 5) | | ne 30 | 6 | 7,328,114. |
| | | | | | | | |

| (a) List and des | and Losses for Tax on Investment scribe the kind(s) of property sold (e.g., invarehouse, or common stock, 200 shares | eal estate, | b) How acquired P — Purchase D — Donation | (C) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
|---|---|--|---|--|----------------------------------|
| 1a SHORT TERM - SEE | ר איייארעבים | | P Donation | VARIOUS | VARIOUS |
| b LONG TERM - SEE | | | P | VARIOUS | VARIOUS |
| c CAPITAL GAIN DIS | | | P | VARIOUS | VARIOUS |
| d | | | | | |
| e | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basi plus expense of sale | | (h) Gain or (e) plus (f) m | |
| a 4,164,3 | 67. | 4,254 | | | -89,957. |
| b 1,454,3 | 56. | 1,290 | ,945. | | 163,411. |
| c 2,0 | 21. | | | | 2,021. |
| d | | | | | |
| <u>e</u> | | | | | |
| Complete only for assets | showing gain in column (h) and owned to | | | (I) Gains (Col | (h) |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (i) over col (j), if any | | pain minus col (k), t an -0-) or Losses (f | |
| | | | | | <u>-89,957.</u> |
| | | | | | 163,411. |
| <u>c</u> | | | | | 2,021. |
| <u>d</u> | | | | | |
| <u>e</u> | <u>_</u> | | | <u> </u> | |
| 2 Capital gain net income o | | enter in Part I, line 7 ter -0- in Part I, line 7 | 2 | | 75 475 |
| 3 Net short-term capital gai | n or (loss) as defined in sections 1222(5 | | 2 | | 75,475. |
| If gain, also enter in Part in Part I, line 8 | I, line 8, column (c) (see instructions) I | f (loss), enter -0- | 3 | | -89,957. |
| Part V Qualification U | nder Section 4940(e) for Reduce | d Tax on Net Investme | nt Income | ' | <u> </u> |
| f 'Yes,' the foundation does no | ne section 4942 tax on the distributable a of qualify under section 4940(e) Do not o | complete this part | | Yes | X No |
| 1 Enter the appropriate amou | int in each column for each year, see the in | structions before making any e | entries | | |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use asse | ets | (d) Distribution (col (b) divided | |
| 2015 | 445,602. | 8,188 | ,030. | | 0.054421 |
| 2014 | 440,751. | 7,717 | ,856. | | 0.057108 |
| 2013 | 339,310. | 6,164 | ,401. | | 0.055043 |
| 2012 | 227,013. | 5,411 | , 977. | | 0.041946 |
| 2011 | 57,316. | | | | |
| 2 Total of line 1, column (d) |) | | 2 | | 0.208518 |
| 3 Average distribution ratio number of years the found | for the 5-year base period — divide the dation has been in existence if less than | total on line 2 by 5, or by the 5 years | 3 | | 0.041704 |
| 4 Enter the net value of nor | ncharitable-use assets for 2016 from Par | t X, line 5 | 4 | | 7,247,744. |
| 5 Multiply line 4 by line 3 | | | 5 | | 302,260. |
| 6 Enter 1% of net investme | nt income (1% of Part I, line 27b) | | 6 | | 1,449. |
| 7 Add lines 5 and 6 | | | 7 | | 303,709. |
| | | | | | |
| 8 Enter qualifying distribution | ons from Part XII, line 4 er than line 7, check the box in Part VI, line | | 8 | | 368,896. |

| Form 990-PF (2016) THE CHU FAMILY FOUNDATION INC. 32-03383 | 39 | P | age_ 4 |
|--|-----------------|----------------|---------------------------|
| Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruc | lions) | | |
| 1 a Exempt operating foundations described in section 4940(d)(2), check here | | | _ |
| Date of ruling or determination letter (attach copy of letter if necessary – see instructions) | | | |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, | | 1,4 | 49. |
| check here ► X and enter 1% of Part I, line 27b | | | |
| c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b) | | | |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable | | | |
| foundations only Others enter -0-). | | | 0. |
| 3 Add lines 1 and 2 | | 1,4 | 49. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | | 0. |
| 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- | | 1,4 | 49. |
| 6 Credits/Payments | | | |
| a 2016 estimated tax pmts and 2015 overpayment credited to 2016 6 a 3, 200. | | | |
| b Exempt foreign organizations — tax withheld at source 6 b | | | |
| c Tax paid with application for extension of time to file (Form 8868) | | | - |
| d Backup withholding erroneously withheld | | | |
| 7 Total credits and payments Add lines 6a through 6d | | 3, 2 | 00. |
| 8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached | | | |
| 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed | | | 0. |
| 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | 51. |
| 11 Enter the amount of line 10 to be Credited to 2017 estimated tax 1,600. Refunded 11 | | 1 | 51. |
| Part VII-A Statements Regarding Activities | | - 1 | N |
| 1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1 a | Yes | No X |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? | 1 Б | | × |
| 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 | | | |
| c Did the foundation file Form 1120-POL for this year? | 1 c | | X |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | - | | - |
| | 0. | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ►\$ 0 | | | |
| toundation managers | 2 | | |
| If 'Yes,' attach a detailed description of the activities | | | <u> X</u> |
| · | | | |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes | 3 | | |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4 a | | $\frac{\lambda}{X}$ |
| b If 'Yes,' has it filed a tax return on Form 990-T for this year? | 4 b | | $\frac{\Lambda}{\Lambda}$ |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | <u>X</u> |
| If 'Yes,' attach the statement required by General Instruction T | | | |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | | | 1 |
| By language in the governing instrument, or | | | |
| By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | 6 | | |
| 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 | Χ | |
| 8 a Enter the states to which the foundation reports or with which it is registered (see instructions) | | | |
| <u>N/A</u> | | | |
| 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) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i> | 8 b | | |
| | | _^ | |
| for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete Part X | 9 | | X |
| 10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses | 10 | | Х |
| DAA | Form 000 | DE (O | 01C |

| | • • | | | |
|----|---|-----|----------|--------------|
| 01 | rm 990 PF (2016) THE CHU FAMILY FOUNDATION INC. 32-03383 | 39 | Р | age 5 |
| | art 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 meaning of section 512(b)(13)? If 'Yes,' attach schedule (see instructions) | 11 | Yes | No X |
| 12 | 2 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions) | 12 | | х |
| 13 | 3 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х | |
| | Website address ► N/A | | | |
| 14 | The books are in care of ► JEE CHU Telephone no ► | | | |
| | Located at ► 662 GARDEN CIRCLE STATHAM GA ZIP + 4 ► 30666 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | N/A | \ | |
| | and enter the amount of tax-exempt interest received or accrued during the year | | | N/A |
| 16 | | | Yes | No |
| | bank, securities, or other financial account in a foreign country? | 16 | | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country. | | ļ | |
| Pa | art VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. | | Yes | No |
| 7 | a During the year did the foundation (either directly or indirectly) | 1 | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? $\qquad \qquad | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)? Yes X No | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) Yes X No | } | | |
| | b If any answer is 'Yes' to 1a(1)—(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1 b | N | /A_ |
| | Organizations relying on a current notice regarding disaster assistance check here | } | | |
| | c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? | 1 c | | |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | |
| | a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? | | | |
| | If 'Yes,' list the years ► 20 , 20 , 20 , 20 | | | |
| | b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions). c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | 2 b | N | /A |
| | ► 20 , 20 , 20 , 20 | | | |
| 3 | Ba Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No | | | |
| | 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 | | 1 | |
| | (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016) | 3 b | N | /A |
| 4 | la Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4 a | | x |

Form **990-PF** (2016)

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?

BAA

| Form 990-PF (2016) THE CHU FAMILY FOR Part VII-B Statements Regarding Activiti | | 1720 May Be Ben | 32-03: | 38339 | Page 6 |
|--|--|--|---|------------|-------------------------|
| 5a During the year did the foundation pay or incu | | 1 4720 May De Neq | dired (continued) | | - |
| (1) Carry on propaganda, or otherwise attempt | | n (section 4945(e))? | ☐ Yes X | No | |
| (2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra | lic election (see section | 1 4955), or to carry | | No | |
| (3) Provide a grant to an individual for travel, | No | | | | |
| (4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions | a charitable, etc , organi s) | ization described | Yes X | No | |
| (5) Provide for any purpose other than religio educational purposes, or for the prevention | us, charitable, scientific n of cruelty to children | c, literary, or or animals? | Yes X | No | |
| b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in (see instructions)? | the transactions fail to a current notice regard | qualify under the exce ding disaster assistance | ptions | 5 b | N/A |
| Organizations relying on a current notice rega | rding disaster assistand | ce check here | ▶ [| | |
| c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon | the foundation claim ex sibility for the grant? | emption from the | N/A Yes |] No | |
| If 'Yes,' attach the statement required by Reg | ulations section 53 494 | 5—5(d) | | | |
| 6a Did the foundation, during the year, receive an on a personal benefit contract? | | | ∐Yes X |]No | |
| b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870 | iums, directly or indirec | ctly, on a personal bene | fit contract? | 6 b | X |
| 7a At any time during the tax year, was the found | | | |]No | |
| b If 'Yes,' did the foundation receive any procee | | | | N/A 7b | |
| Part VIII Information About Officers, D and Contractors | irectors, Trustees, | Foundation Manag | gers, Highly Paid I | -mployee: | 5, |
| 1 List all officers, directors, trustees, foundation | on managers and their | compensation (see ins | tructions). | | |
| | (b) Title, and average | (c) Compensation | (d) Contributions to | | |
| (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | employee benefit plans and deferred compensation | | e account, llowances |
| JEE H CHU | PRESIDENT | 0. | 0. | | 0. |
| 662 GARDEN CIRCLE | 0 | | | | |
| STATHAM, GA 30666 | | | | | |
| CHUNG K CHU | SECRETARY | 0. | 0. | | 0. |
| _662 GARDEN CIRCLE STATHAM, GA 30666 | 0 | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 2 Compensation of five highest-paid employees (of | ther than those included | on line 1 – see instructio | | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d)Contributions to employee benefit plans and deferred compensation | (e) Expens | e account, llowances |
| NONE | | | compensation | | |
| | | : | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Total number of other employees paid over \$50,000 |) | <u> </u> | <u> </u> | | 0 |

32-0338339

Page 7

Form 990-PF (2016) THE CHU FAMILY FOUNDATION INC

Part X

see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes a Average monthly fair market value of securities. 1 a 6,865,917. 1 b **b** Average of monthly cash balances 492,199. c Fair market value of all other assets (see instructions) 10 d Total (add lines 1a, b, and c) 1 d 7,358,116. e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1 e 2 Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 7.358.116. Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions) 110,372. Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 5 247,744. Minimum investment return. Enter 5% of line 5 6 362,387. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here land do not complete this part.) Minimum investment return from Part X, line 6 362,387. 2a Tax on investment income for 2016 from Part VI, line 5 2 a 1,449 2 b b Income tax for 2016 (This does not include the tax from Part VI) c Add lines 2a and 2b 20 1,449 3 3 Distributable amount before adjustments Subtract line 2c from line 1 360,938. Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 360,938. 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 1 360,938. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26 1 a 368,896. **b** Program-related investments — total from Part IX-B 1 b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3 a 3 b **b** Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b Enter here and on Part V. line 8, and Part XIII, line 4 4 368,896. 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 1,449 6 Adjusted qualifying distributions. Subtract line 5 from line 4 367,447 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years BAA Form 990-PF (2016)

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations,

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2015 | (c) 2015 | (d) 2016 |
|--|----------------------|----------------------------|--------------------|---|
| 1 Distributable amount for 2016 from Part XI, line 7 | | | | 360, 030 |
| 2 Undistributed income, if any, as of the end of 2016: | | | | 360,938. |
| a Enter amount for 2015 only | | | 0. | |
| b Total for prior years. 20 , 20 , 20 | | 0. | - | |
| 3 Excess distributions carryover, if any, to 2016 | | | | |
| a From 2011 28, 077. | | | | |
| b From 2012 57, 300. | | , | | |
| c From 2013 36, 792. | | | | |
| d From 2014 79, 862. | | ' | | |
| e From 2015 41,810. | i | | | |
| f Total of lines 3a through e | 243,841. | | | |
| 4 Qualifying distributions for 2016 from Part | | | | |
| XII, line 4 [.] ► \$ 368,896. | | | | |
| a Applied to 2015, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior years (Election required — see instructions) | | 0. | | |
| | | | | |
| c Treated as distributions out of corpus (Election required – see instructions) | 0. | | | |
| d Applied to 2016 distributable amount | | | | 360,938. |
| e Remaining amount distributed out of corpus | 7,958. | | | |
| 5 Excess distributions carryover applied to 2016 | 0. | | | 0. |
| (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | |
| Same amount must be shown in column (a) | | | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e. Subtract line 5 | 251,799. | | | |
| b Prior years' undistributed income Subtract line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistributed | | | | |
| income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b Taxable amount – see instructions | | 0. | | |
| e Undistributed income for 2015 Subtract line 4a from | | | | |
| line 2a. Taxable amount — see instructions | | | 0. | |
| f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017. | į | | | 0. |
| 7 Amounts treated as distributions out of | | | | , <u>, , , , , , , , , , , , , , , , , , </u> |
| corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2011 not | | | | |
| applied on line 5 or line 7 (see instructions) | 28,077. | | | |
| 9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a | 223,722. | | | |
| 10 Analysis of line 9. | l | İ | | |
| a Excess from 2012 57, 300. | ĺ | İ | | |
| b Excess from 2013 36, 792. | Ì | | | |
| c Excess from 2014 79, 862. | ļ | ļ | ı | |
| d Excess from 2015 41,810. | | İ | • | |
| e Excess from 2016 7,958. | | | | |

| Form 990-PF (2016) THE CHU FAMILY FO | | | | <u>32-0338339</u> | |
|--|---|--|---|------------------------|-------------|
| Part XIV Private Operating Foundat | | | | | N/A |
| 1 a If the foundation has received a ruling or determined is effective for 2016, enter the date of the | ermination letter that ruling | it is a private operat | ting foundation, and the | ` • <u> </u> | |
| b Check box to indicate whether the foundate | | erating foundation of | described in section | 4942(j)(3) or | 4942(j)(5) |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | | Prior 3 years | | (e) Total |
| investment return from Part X for each year listed | (a) 2016 | (b) 2015 | (c) 2014 | (d) 2013 | |
| b 85% of line 2a. | | | | | |
| 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 | | | | | |
| Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon | | | | | |
| a 'Assets' alternative test — enter | | | | ŀ | |
| (1) Value of all assets | | <u> </u> | <u> </u> | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c 'Support' alternative test — enter | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section | | | | | |
| 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | L | | | |
| Part XV Supplementary Information assets at any time during th | (Complete this e vear – see in | part only if the structions.) | foundation had | \$5,000 or more | in |
| 1 Information Regarding Foundation Manag | | | | | |
| List any managers of the foundation who have close of any tax year (but only if they have NONE | e contributed more the contributed more | nan 2% of the total c than \$5,000). (See | ontributions received b section 507(d)(2)) | y the foundation befo | re the |
| b List any managers of the foundation who own | 10% or more of the | stock of a corporation | on (or an equally large | portion of the owners | hip of |
| a partnership or other entity) of which the NONE | foundation has a 1 | 0% or greater inter | est | portion of the owners | TIIP OI |
| 2 Information Regarding Contribution, Grant, C | Sift Loan Scholard | in etc Programs: | | | |
| Check here ► X if the foundation makes granger complete items 2a, b, c, and d. | kes contributions to | preselected charitab | | | |
| a The name, address, and telephone number or | e-mail address of the | ne person to whom a | applications should be a | addressed | |
| , | | , | | | |
| | | | | | |
| | | | | | |
| b The form in which applications should be s | submitted and infor | mation and materia | als they should includ | e | |
| c Any submission deadlines | | | | | |
| | | | | | |
| d Any restrictions or limitations on awards, s | such as by geograp | hıcal areas, charıta | able fields, kinds of in | stitutions, or other f | actors |
| | _ | | | | |

Page 11

| 3 Grants and Contributions Paid During the Y Recipient | If recipient is an individual, | Carradation | | |
|--|---|--------------------------------|----------------------------------|----------|
| | any foundation manager | Foundation status of recipient | Purpose of grant or contribution | Amount |
| | or substantial contributor | recipient | | |
| Name and address (home or business) a Paid during the year SEE STATEMENT 4 | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | recipient | contribution | |
| | | | | |
| Total | | | ► 3a | 350,500. |
| b Approved for future payment Total | | | ► 3b | |

| Enter gross | s amounts unless otherwise indicated | Unrelate | d business income | Excluded by | section 512, 513, or 514 | (e) |
|---|---|--|-----------------------|-----------------------|--------------------------|--|
| 1 D | | (a) Business code | (b) Amount | (c) Exclu- sion | (d) Amount | Related or exempt function income (See instructions) |
| | am service revenue | | | code | | |
| a | | | | ++ | | |
| p | | | | | | |
| g | | | | | | |
| | | - | | ++ | | |
| e | | | | | | |
| a Fees | and contracts from government agencies | | | + | | |
| _ | bership dues and assessments | | | +-+ | - | |
| | t on savings and temporary cash investments | | | | | |
| | ends and interest from securities | | | | | 41 |
| | ental income or (loss) from real estate | | | + | | 120,101 |
| | financed property | | | | | |
| | ebt-financed property | | | - | | - |
| | ntal income or (loss) from personal property | } | | ++ | | |
| | investment income | | | + | | |
| | r (loss) from sales of assets other than inventory | | | ┥ | | 75 475 |
| | ncome or (loss) from special events. | | | | | 75,475 |
| | s profit or (loss) from sales of inventory | ļ | | +-+ | | |
| | revenue. | } | | | | |
| | revenue. | | | | | |
| a | | | | | | |
| b | | ┦ | | | | |
| ç.—- | | | | | | |
| d | | L | | | | |
| _ | | 1 1 | | | | |
| 12 Subt | Add only and (a) | <u> </u> | | +-+ | | |
| 12 Subto | otal Add columns (b), (d), and (e) | | | | 12 | 195,617. |
| 12 Subto | Add line 12, columns (b), (d), and (e) | one) | | | 13 | |
| 12 Subto 13 Total See works | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculated | | chment of Even | at Purpos | | 195,617. 195,617. |
| 12 Subto 13 Total See works Part XVI | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. Relationship of Activities to the | Accompli | | | es | 195,617 |
| 12 Subto 13 Total See works | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617. |
| 12 Subto 13 Total See works Part XVI Line No. | Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation. B Relationship of Activities to the | Accompli | rted in column (e) of | Part XVI-A | es | 195, 617 |

| Form 990-F | PF (2016) THE (| HU FAMILY I | FOUNDATION | INC. | | | 32 | -0338339 | Pa | age 13 |
|---|---|---|---|---|-------------------|--|---|--|-----------|-------------------|
| Part XVII | Information F Exempt Orga | Regarding Tran | isfers To and | d Transaction | is and | l Relationsh | ips With N | oncharitable | | |
| | _ | | | | | | | | Yes | No |
| Did the description | ne organization direction 501(| ctly or indirectly ei c) of the Code (ot | ngage in any of ther than section | the following with 501(c)(3) organ | th any a | other organizati is) or in section | on 527. | | | |
| relatır | ng to political organ | ızatıons? | | | | | , | | | ļ |
| | fers from the report | ing foundation to | a noncharitable | exempt organiz | ation o | f | | 1 4 79 | | |
| (1) C | asn other assets | | | | | | | 1 a (1) | _ | X X |
| | transactions | | | | | | | 1 a (2) | | ^- - |
| | ales of assets to a | noncharitable exe | mpt organization | n | | | | 1 b (1) | | X |
| (2) P | urchases of assets | from a noncharita | ble exempt orga | anization | | | | 1 b (2) | | X |
| (3) R | ental of facilities, e | quipment, or other | r assets | | | | | 1 b (3) | | X |
| • • | eımbursement arraı | - | | | | | | 1 b (4) | L | X |
| ` ' | oans or loan guarar | | 6 | | | | | 1 b (5) | l | X |
| | erformance of servi ng of facilities, equi | | | | 005 | | | 1 b (6) | | X |
| o onam | ng or racinates, equi | princint, mailing its | ts, other assets | , or paid employ | ccs | | | <u> </u> | | <u> </u> |
| d If the the go any tr | answer to any of the ods, other assets, or ransaction or sharin | e above is 'Yes,' services given by t g arrangement, st | complete the fol the reporting four now in column (| llowing schedule ndation If the four d) the value of the | Colurndation | nn (b) should al received less tha ds, other assets | lways show tl an fair market s, or services | he fair market val value in received | ue of | |
| (a) Line no. | (b) Amount involved | | of noncharitable exen | | | | | ons, and sharing arra | ngemen | ts |
| N/A | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | ļ.— | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | <u> </u> | | | | | |
| | | | | | <u> </u> | | | | | |
| | | | | | | | | | | |
| | | | | | <u> </u> | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| descri | foundation directly or ibed in section 501(s,' complete the foll | c) of the Code (ot | with, or related the than section | to, one or more ta n 501(c)(3)) or in | ax-exem sectio | pt organizations n 527? | | Yes | X | No |
| | (a) Name of organiz | zation | (b) Type | e of organization | | | (c) Description | n of relationship | | |
| N/A | | | | | | | | | | |
| | | | | | | | - - | | | |
| | | | | | | + | | | — | |
| | | | | | | | | | | |
| Unde | er penalties of perjury, I de | clare that I have exami | ned this return, include han taxpayer) is base | ding accompanying sci | hedules a | nd statements, and | to the best of my | knowledge and belief, i | t is true | |
| Sign | | 1 | | | | ropara. nas any mis | | May the | RS disc | uss |
| Here | 20×10 | Who - | | 15/8/201 | ₁ ▶ | PRESIDENT | | this retur preparer | shown I | below |
| Sıç | grature of officer or truster | | | Date | / . | Title | | (see inst | Yes | No |
| | Print/Type preparer's | name | Preparer's | signature | | Date -/D/. | Check | If PTIN | | |
| Paid | JOHN E. PA | TAT, JR. | | printales | Y/L_ | <u> 3/8/1</u> | self-emplo | 12 00 000 | 819 | |
| Preparer | Firm's name | TURNER AND | | | <u> </u> | _ | Firm's EIN | 58-1858240 | | |
| Use Only | Firm's address | 1165-A CED ATHENS, GA | 30605-359 | | | | Phone no | 706 254 10 | 12 | |
| | | ATHEMS, GA | 20002-339 | - | | | 1 Horie Ho | 706 354-12 | 14 | |

706 354-1212 Form **990-PF** (2016)

BAA

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, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

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

| Name of the organization | | Employer identification number |
|--|--|--|
| THE CHU FAMILY FOUNDATION INC | | 32-0338339 |
| Organization type (check one) | | |
| Filers of: | Section: | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | |
| | 4947(a)(1) nonexempt charitable trust not treated as a | private foundation |
| | 527 political organization | |
| | | |
| Form 990-PF | X 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treated as a private trust trust treated as a private trust trust treated as a private trus | vate foundation |
| | 501(c)(3) taxable private foundation | |
| | | |
| Check if your organization is covered by the Genera | I Rule or a Special Rule. | |
| Note. Only a section 501(c)(7), (8), or (10) orga | anization can check boxes for both the General Rule and a | Special Rule See instructions |
| General Rule | | |
| X For an organization filing Form 990, 990-E2 property) from any one contributor Comple | Z, or 990-PF that received, during the year, contributions tot te Parts I and II See instructions for determining a contribu- | aling \$5,000 or more (in money or utor's total contributions |
| Special Rules | | |
| under sections 509(a)(1) and 170(b)(1)(A)(vi). | P1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supthat checked Schedule A (Form 990 or 990-EZ), Part II, line 13, he year, total contributions of the greater of (1) \$5,000 or (20-EZ, line 1 Complete Parts I and II | 16a, or 16b, and that |
| For an organization described in section 50 during the year, total contributions of more purposes, or for the prevention of cruelty to | P1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received than \$1,000 <i>exclusively</i> for religious, charitable, scientific, I or children or animals. Complete Parts I, II, and III | from any one contributor, iterary, or educational |
| during the year, contributions exclusively fo \$1,000 If this box is checked, enter here the charitable, etc., purpose Don't complete ar | or (1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received or religious, charitable, etc., purposes, but no such contributione total contributions that were received during the year for many of the parts unless the General Rule applies to this organole, etc., contributions totaling \$5,000 or more during the year | ions totaled more than an <i>exclusively</i> religious, nization becayse |
| Caution. An organization that isn't covered by t 990-PF), but it must answer 'No' on Part IV, In | the General Rule and/or the Special Rules doesn't file Sche ne 2, of its Form 990, or check the box on line H of its Form filing requirements of Schedule B (Form 990, 990-EZ, or 99 | dule B (Form 990, 990-EZ, or 990-EZ or on its Form 990-PF, |

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

| Name of org | | | over identification number |
|---------------|--|-------------------------------|---|
| | HU FAMILY FOUNDATION INC. | | 0338339 |
| Part I | Contributors (see instructions) Use duplicate copies of Part I if additional space | is needed | |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | CHUNG & JEE CHU | | Person Payroll |
| | 662 GARDEN CIRCLE | \$ <u>505,</u> 157 | . Noncash X |
| | STATHAM, GA 30666 | | (Complete Part II for noncash contributions) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Complete Part II for noncash contributions) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Complete Part II for noncash contributions) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions.) |
| BAA | | Caladala B (Farra) | 200 900 F7 oz 900 PE) (2016) |

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

Page

1 of

1 of Part I

Page

1 to

1 of Part II

Name of organization
THE CHU FAMILY FOUNDATION INC.

Employer identification number

32-0338339

| Part II | Noncash Property (see instructions) Use duplicate copies of Part II if additional sp | pace is needed | |
|---------------------------|--|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| 1 | 1,041,561 SHS COCTRYSTAL PHARMA INC. | \$ 505,157. | 10/03/16 |
| | | 505,157. | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | - | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | \$ | |
| BAA | Sche | dule B (Form 990, 990-EZ | , or 990-PF) (2016 |

1 to

of Part III

Name of organization
THE CHU FAMILY FOUNDATION INC.

Employer identification number 32-0338339

| Part III | Exclusively religious, charitable, et or (10) that total more than \$1,000 for t | tc., contributions to organiz | zations d | lescribed in section 501(c)(7), (8), |
|---------------------------|--|---|--------------|--|
| | the following line entry For organizations or contributions of \$1,000 or less for the year. | ompleting Part III, enter the total of (Enter this information once See) | of exclusive | ely religious, charitable, etc , |
| (a) No. from Part I | Use duplicate copies of Part III if additional (b) Purpose of gift | space is needed (c) Use of gift | | (d) Description of how gift is held |
| | N/A | | | |
| | | | | |
| | Transferee's name, addres | (e) Transfer of gift s, and ZIP + 4 | Rela | tionship of transferor to transferee |
| | | | | |
| | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift is held |
| | | | | |
| | | (e) Transfer of gift | | |
| | Transferee's name, addres | Transfer of gift ss, and ZIP + 4 | Rela | tionship of transferor to transferee |
| | | | | |
| (a) No. from | (b) | (c) | | (d) |
| No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift is held |
| | | | | |
| | | (e) | | |
| i | Transferee's name, addres | Transfer of gift | Rela | tionship of transferor to transferee |
| | | | | |
| | 11.5 | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift is held |
| | | | | |
| | | | | |
| ! | Transferee's name, addres | (e) Transfer of gift s, and ZIP + 4 | Rela | tionship of transferor to transferee |
| i | | | | |
| DAA | | | | |

| 2016 | FEDERAL STATEMENTS | PAGE |
|--|--|---|
| | THE CHU FAMILY FOUNDATION INC. | 32-03383 |
| STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES | | |
| TAX PREPARATION | (A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 1,650. \$ 1,650. \$ 0. | (D) CHARITABLE PURPOSES \$ 1,650 \$ 1,650 |
| STATEMENT 2 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES | | |
| BOD APPRECIATION DINNER CORPORATE REGISTRATION INSURANCE INVESTMENT FEES MEETING EXPENSE REGISTRATION FEE TRAVEL | (A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED \$ 202. 30. 1,244. 50,729. \$ 50,729. 95. 750. 14,425. TOTAL \$ 67,475. \$ 50,729. \$ 0. | (D) CHARITABLE PURPOSES \$ 202 30 1,244 95 750 14,425 \$ 16,746 |
| STATEMENT 3 FORM 990-PF, PART III, LINE 5 OTHER DECREASES NET UNREALIZED GAINS OR LOS | SSES ON INVESTMENTS TOTAL | 904,707 904,707 |

STATEMENT 4 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|--|-----------------------|---------------------------|--|---------------|
| THE KOREAN AMERICAN SCHOLARSHIP FUND 330 MILLSTONE CIRCLE ATHENS GA 30605 | | PC | TO PROVIDE SCHOLARSHIPS TO KOREAN STUDENTS IN ATLANTA AREA. | \$ 34,000. |
| UNIVERSITY AT BUFFALO FOUNDATION 3330 HOCHSTETTER HALL BUFFALO NY 14260 | | PC | TO PROVIDE SCHOLARSHIPS TO PHARMACY STUDENTS | 20,000. |

| \sim | ^ | 4 | |
|--------|---|---|---|
| Z | U | ı | b |

FEDERAL STATEMENTS

PAGE 2

THE CHU FAMILY FOUNDATION INC.

32-0338339

STATEMENT 4 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|---|-----------------------|---------------------------|---|------------|
| IDAHO STATE UNIVERSITY FOUNDATION 921 SOUTH 8TH AVENUE POCATELLO ID 83209 | | PC | TO PROVIDE SCHOLARSHIPS TO PHARMACY STUDENTS | \$ 20,000. |
| SEOUL NATIONAL UNIVERSITY FOUNDATION 2F RESEARCH PARK BLDG SEOUL 151-919 SOUTH KOREA | | GOV | TO PROVIDE SCHOLARSHIPS | 30,000. |
| UNIVERSTIY OF GEORGIA FOUNDATION 394 S MILLEDGE AVE, STE 100 ATHENS GA 30602 | | PC | TO PROVIDE SCHOLARSHIPS | 120,000. |
| THE KOREAN AMERICAN SCHOOL OF ATLANTA 467 INDUSTRIAL PARK DR NORCROSS GA 30071 | | PC | TO PROVIDE SCHOLARSHIPS | 10,000. |
| KOREAN CHURCH OF ATLANTA 3205 PLEASANT HILL RD DULUTH GA 30096 | | PC | TO PROVIDE SCHOLARSHIPS | 13,000. |
| THE KOREAN AMERICAN ASSOC OF GREATER ATL 4067 INDUSTRIAL PARK DR, #1 NORCROSS GA 30071 | | PC | TO PROVIDE SCHOLARSHIPS | 5,000. |
| THE GA CLUB FOUNDATION 662 GARDEN CIRCLE STATHAM GA 30666 | | PC | TO PROVIDE SCHOLARSHIPS | 10,000. |
| KYUNGGI UNIVERSITY 154-42, GWANGGYOSAN- 443-760 KOREA, REPUBLIC OF (SOUTH) | | GOV | TO PROVIDE SCHOLARSHIPS | 10,000. |
| THE CHILDREN'S HOSPITAL OF PHILADELPHIA 34TH STREET AND CIVIC CENTER BLVD PHILADELPHIA PA 19104 | | PC | TO PROVIDE SCHOLARSHIPS | 50,000. |
| INTERNATIONAL SOCIETY FOR ANTIVIRAL RESE 7340 EXECUTIVE WAY, SUITE R FREDERICK MD 21704 | | PC | TO PROVIDE SCHOLARSHIPS | 10,000. |
| THE ALTAMONT FUND PO BOX 131429 BIRMINGHAM AL 35213 | | | TO PROVIDE SCHOLARSHIPS | 5,000. |

| 2 | n | 1 | 6 |
|---|---|----|---|
| Z | u | П. | Ю |

FEDERAL STATEMENTS

PAGE 3

THE CHU FAMILY FOUNDATION INC.

32-0338339

STATEMENT 4 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION <u>STATUS</u> | PURPOSE OF GRANT | | AMOUNT |
|---|-----------------------|----------------------------------|----------------------------|-------|----------|
| KOREAN WAR COMMEMORATION FOUDATION PO BOX #82 QUANTICO VA 22134 | | PC | TO PROVIDE SCHOLARSHIPS | \$ | 5,000. |
| THE ASSOCIATION OF KOREAN LANGUAGE SCHOO 2662 THOMPSON MILL RD BUFORD GA 30519 | | PC | TO PROVIDE SCHOLARSHIPS | | 3,000. |
| ATLANTA KOREAN FILM FESTIVAL 3044 CEDAR GLADE LN BUFORD GA 30519 | | PC | TO PROVIDE SCHOLARSHIPS | | 2,000. |
| GEORGIA PUBLIC BROADCASTING 260 14TH STREET NW ATLANTA GA 30318 | | PC | TO PROVIDE SCHOLARSHIPS | | 1,500. |
| KOREAN CHURCH OF HAMILTON MILL UMC 2662 THOMPSON MILL BUFORD GA 30519 | | PC | TO PROVIDE SCHOLARSHIPS | | 2,000. |
| | | | TOT | AL \$ | 350,500. |

The Chu Family Foundation, Inc. 32-0338339 2016 Smith Barney Sch D attachment

| | Short Term | Term | I ond Term | Term | | |
|---------------------------|--------------|--------------|--------------|--------------|-------------|-------------|
| Account # | Proceeds | Cost | Proceeds | Cost | ST G/L | LT G/L |
| 308 113287 | 161,196 64 | 175,949.19 | 397,910.90 | 303,146.63 | (14,752.55) | 94,764.27 |
| 308 113668 | 60,010.87 | 80,880.56 | 308,507.69 | 236,377.93 | (20,869.69) | 72,129.76 |
| 308 165910 | 79,550.28 | 89,105.74 | 260,890.41 | 269,644.87 | (9,555.46) | (8,754.46) |
| 308 165957 | | | | | 1 | • |
| 308 165950 | 1,611,288.29 | 1,624,646 28 | | | (13,357.99) | • |
| 308 165951 | | | | | • | 1 |
| 308-114110 | 1,993,875.80 | 1,991,489.12 | | | 2,386.68 | 1 |
| 308 165917 | 143,448.79 | 159,199.35 | 153,663.48 | 150,152.65 | (15,750.56) | 3,51083 |
| 308 165949 | 13,086.29 | 12,798 55 | 93,631 48 | 77,461.32 | 287.74 | 16,170.16 |
| 308 081472 | 97,064.18 | 115,328.55 | 11,908.94 | 13,673.31 | (18,264.37) | (1,764 37) |
| 308 113659 | | | | | • | • |
| → Skybridge Multi-Advisor | 4,845.93 | 4,926.63 | 227,843.14 | 240,487.95 | (80.70) | (12,644.81) |
| Totals | 4,164,367.07 | 4,254,323.97 | 1,454,356.04 | 1,290,944 66 | (89,956.90) | 163,411.38 |
| | | | • | | | |