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# Form **990-PF**

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EXTENDED TO NOVEMBER 15, 2017

Return of Private Foundation

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

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

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

	nt of the Treasury		social security numbers on m 990-PF and its separate				2010
	evenue Service   ndar year 2016 or tax year		in 990-PF and its separate	and e		.govnorinasopi.	Open to Public Inspection
	f foundation	beginning		, and c	iiuiiy	A Employer identification	number
FRA	NKLIN FAMILY	Y FOUNDATION	Ι			45-5096710	
	and street (or PO box number I		t address)		Room/suite	B Telephone number 314-739-14	14
	town, state or province, con	untry, and ZIP or foreign p	ostal code			C if exemption application is p	ending, check here
	k all that apply:	Initial return	Initial return of a fo	ormer public o	charity	D 1. Foreign organizations	, check here
		Final return  Address change	Amended return  Name change			Foreign organizations me check here and attach co	eting the 85% test, moutation
	k type of organization: ection 4947(a)(1) nonexem	Section 501(c)(3) export charitable trust	xempt private foundation Other taxable private founda	ation		E If private foundation star under section 507(b)(1)	
I Fair m	arket value of all assets at o	end of year J Account	ing method: X Cash	Accr	ual	F If the foundation is in a (	60-month termination
(from		9 , 120 . (Part I, colu	ther (specify) imn (d) must be on cash I	basis)	_ <del></del>	under section 507(b)(1)	(B), check here
Part	Analysis of Revenue and (The total of amounts in colunecessarily equal the amounts)	mns (b), (c), and (d) may not	(a) Revenue and expenses per books		ivestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 2	Contributions, gifts, gran	ts, etc., received	65,500.				
3	Interest on savings and tempor		16.		16.	16	STATEMENT 1
4	cash investments Dividends and interest fro	nm securities	7,486.		$\frac{10.}{7,486.}$		STATEMENT 2
1 '	Gross rents	3111 300di 11103	7, ±000		77400.	7,400.	DINIDITE Z
".	Net rental income or (loss)						
68	Net gain or (loss) from sale of	assets not on line 10	<2,506.	>			
a la	Gross sales price for all assets on line 6a	41,306.	,				
Revenue 7	Capital gain net income (from		-		0.		
<u>ه</u> ايت	Net short-term capital gai	ın				N/A	
9	Income modifications						
10a	Gross sales less returns and allowances						
6	Less Cost of goods sold						
C	Gross profit or (loss)						
11	Other income		2,276.		2,276.	2,276.	STATEMENT 3
12_	Total Add lines 1 throug	ıh 11	72,772.		<u>9,778.</u>	9,778.	
13	Compensation of officers, dire	ectors, trustees, etc	0.		0.	0.	0.
14	Other employee salaries a	•					
μ 15	Pension plans, employee	benefits					
Ø 8 16a	Legal fees						
§ē de	Accounting fees	STMT 4	850.		0.	850.	0.
<b>Z</b> ú 0	Other professional fees	STMT 5	3,183.		3,183.	3,183.	0.
	Interest	CONTRACT	171		171	171	
©E 18	Taxes	STMT 6	171.		171.	171.	0.
	Depreciation and depletic						
S 3	Occupancy F	VED					
D 21	Printing and publications	122					
Sp 22	Other expenses OV 0						
F = 24	Total operating and adm	* 1534				-	
Operating and Administrative Expenses of 21 25 23 24 24 25 25 25 25 25 25 25 25 25 25 25 25 25	expenses Add lines 13 t		4,204.		3,354.	4,204.	_ 0.
Ö 25	Contributions, gifts, gran		11,500.		<u> </u>	= 120 = 1	11,500.
26	Total expenses and disb						
	Add lines 24 and 25		15,704.		3,354.	4,204.	11,500.
27	Subtract line 26 from line	2 12:			<u> </u>		
a	Excess of revenue over expen	ises and disbursements	57,068.	_			
t	Net investment income (	(if negative, enter -0-)			<u>6,424.</u>		
	Adjusted net income (if n	egative, enter -0-)	L.,			5,574.	

823501 11-23-18 LHA For Paperwork Reduction Act Notice, see instructions.

FRANKLIN FAMILY FOUNDATION

45-5096710

Form **990-PF** (2016)

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

Form **990-PF** (2016)

121,422.

11,500.

7

8

7 Add lines 5 and 6

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

	TS90-PF (2010) FRANKLIN FAMILY FOUNDATION			96/10		Page 4
_	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b)		940 - Se	e instri	ICTIO	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line	] [				
	Date of ruling or determination letter: (attach copy of letter if necessary-see inst		}		_	
Þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	er 1%	_1		1	<u> 28.</u>
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 1	2, col. (b). )	ļ			_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		_2			<u> 0.</u>
3	Add lines 1 and 2		3		1	28.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4			0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		5		1	28.
6	Credits/Payments:					
	2016 estimated tax payments and 2015 overpayment credited to 2016					
	Exempt foreign organizations - tax withheld at source		1			
	Tax paid with application for extension of time to file (Form 8868)  6c	100.				
d	Backup withholding erroneously withheld 6d					
	Total credits and payments. Add lines 6a through 6d		7		1	00.
	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached		8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEM	MENT 9 ▶	9			<u> 28.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	. ▶	10			
	Enter the amount of line 10 to be: Credited to 2017 estimated tax	Refunded ▶	11			
Pa	art VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it pa	articipate or intervene	ın		Yes	
	any political campaign?			1a	<u> </u>	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instruct	tions for the definition)	?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of a	ny matenals publish	ed or			
	distributed by the foundation in connection with the activities				1	
C	Did the foundation file Form 1120-POL for this year?			1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$	0.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impose	d on foundation				
	managers. ▶ \$ 0 .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, artic	les of incorporation, o	r			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X_
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4 <u>b</u>		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	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:					
	● 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_		<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, of	col (c), and Part XV		7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	MO	·			İ	
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 General Instruction G? If "No," attach explanation			_8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	or 4942(j)(5) for cale	ndar			
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part X			9_	<u></u>	X
10	Did any persons become substantial contributors during the tax year? If "Yes " attach a schedule listing their name	es and addresses		10		X
	· · <del></del>			Form 99	0-PF	(2016)

<u> </u>	art 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 meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	<b> </b>	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			ĺ
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	1
	Website address ► N/A	20 1	414	
14	The books are in care of MICHAEL FRANKLIN  Telephone no. MICHAEL FRANKLIN  Telephone no. MICHAEL FRANKLIN  Telephone no. MICHAEL FRANKLIN  Telephone no. MICHAEL FRANKLIN			
	Located at ► 19 WINDCASTLE DR, ST CHARLES, MO  ZIP+4 ►6	<u> </u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	18.1	· / 3	0.
40	and enter the amount of tax-exempt interest received or accrued during the year  At any time during selectors 2015, did the foundation have an interest in or a greature or other outback over a healt	IN	/A Yes	No.
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	163	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	10		
	foreign country			
Pé	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.	$\neg$	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?			
	(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?	İ		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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	}		1
	termination of government service, if terminating within 90 days.)			
b	olf any answer is "Yes" to 1a(1)-(6), did <b>any</b> 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		ļ
	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?	1c		X
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)):			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?  Yes X No			
		}		
ь	If "Yes," list the years \( \bigcup_{ \text{int}} \), \( \text{relating to incorrect} \)  Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach			
	statement - see instructions.)  N/A	2b		İ
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	<b>&gt;</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	olf "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of 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)  N/A	3b		<u> </u>
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	o Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		( )	l

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had not been removed from jeopardy before the first day of the tax year beginning in 2016?

Part VII-B Statements Regarding Activities for Which I		Required (contro	45-50967	LU Page 6
5a During the year did the foundation pay or incur any amount to:	OTTI 4720 Way De I	required (contin	ueo)	<del></del>
(i) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4045(n)\Q		es X No	} }
(2) Influence the outcome of any specific public election (see section 4955); or	` ''		ES LAL NU	
any voter registration drive?	in to carry on, uncomy or man		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	2		es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				l i
4945(d)(4)(A)? (see instructions)	n described in section	□ v.	es X No	1 1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or		55 ZX NO	<u> </u>
the prevention of cruelty to children or animals?	or caucational purposes, or		es X No	
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify unit	der the excentions described		55 (22) 100	
section 53.4945 or in a current notice regarding disaster assistance (see instru		iii riogalationo		5b X
Organizations relying on a current notice regarding disaster assistance check h	•			1 11
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ined		
expenditure responsibility for the grant?		I/A 🔲 Ye	es No	1
If "Yes," attach the statement required by Regulations section 53.494.		•/ ••		
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to	* *			
a personal benefit contract?	pay promisino on		es X No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	T Ye	es 🗶 No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			. —	7b
Part VIII Information About Officers, Directors, Trust		nagers, Highly		
Paid Employees, and Contractors	<u> </u>			
1 List all officers, directors, trustees, foundation managers and their	<del> </del>	,		
4.) Negro and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deterred compensation	allowances
MICHAEL FRANKLIN	TRUSTEE			
19 WINDCASTLE DR				
ST CHARLES, MO 63304	0.00	0.	0.	0.
DEBORAH FRANKLIN	TRUSTEE		[	
19 WINDCASTLE DR				
ST CHARLES, MO 63304	0.00	0.	0.	<u> </u>
	landa da an Para 4) de anasa	INCASE II	L.,	
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NONE."	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	account, other
MONTE	devoted to position		compensation	allowances
NONE				
	1			
		<del> </del>		
	1			
	_		-	
	1			
Total number of other employees paid over \$50,000	<del></del>	<u> </u>	<u> </u>	0
			Form	990-PF (2016)

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter '		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	1	
	1	
	_	
	<u> </u>	
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities	- <u>-</u>	<u>▶</u> 0
	<del> </del>	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produ	al information such as the	Expenses
1 N/A	ood, cto.	<del></del>
N/A		
2	-	
<u> </u>		
3		
4		
Part IX-B Summary of Program-Related Investments		<del></del>
Describe the two largest program-related investments made by the foundation during the tax year on lin	nes 1 and 2	Amount
1N/A		
2		
All other program-related investments. See instructions.		<del></del>
3		
<u> </u>		
	· · · · · · · · · · · · · · · · · · ·	
	-	
Total. Add lines 1 through 3	_	0.

0 • Form **990-PF** (2016)

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, 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 328,967. 1a 26,700. Average of monthly cash balances 1b Fair market value of all other assets 1c 355,667. Total (add lines 1a, b, and c) 1d Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 355,667. Subtract line 2 from line 1d 3 5,335. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 350,332. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 17,517. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Part XI foreign organizations check here and do not complete this part.) 17,517. Minimum investment return from Part X, line 6 128. Tax on investment income for 2016 from Part VI, line 5 Income tax for 2016. (This does not include the tax from Part VI.) 2h 128. Add lines 2a and 2b 2c 17,389. Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4  $\overline{17,389}$ . Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 389. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes; 11,500. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 16 2 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: Suitability test (prior IRS approval required) За Cash distribution test (attach the required schedule) 3b 11,500. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income, Enter 1% of Part I, line 27b

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

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6

500.

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	<b>(c)</b> 2015	<b>(d)</b> 2016
1 Distributable amount for 2016 from Part XI, line 7				17,389.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
<b>b</b> Total for prior years:		0.		_
3 Excess distributions carryover, if any, to 2016:				
<b>a</b> From 2011				
<b>b</b> From 2012 10,602.				
c From 2013 19,115.				
d From 2014 29, 447.				
e From 20153, 261.				
f Total of lines 3a through e	62,425.			
4 Qualifying distributions for 2016 from				
Part XII, line 4 <sup>-</sup> ► \$ 11,500.			_	
a Applied to 2015, but not more than line 2a			<u></u>	
<b>b</b> Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.	<u> </u>	
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	<del></del>	· · · · · · · · · · · · · · · · · · ·	
d Applied to 2016 distributable amount				11,500.
e Remaining amount distributed out of corpus	0.		<u> </u>	
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	5,889.			5,889.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	56,536.			
<b>b</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 instr.			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
7 Amounts treated as distributions out of	<b>(</b> -	l		
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	0.			
9 Excess distributions carryover to 2017				
Subtract lines 7 and 8 from line 6a	56,536.	·		
10 Analysis of line 9:				
a Excess from 2012 4,713.				
<b>b</b> Excess from 2013 19,115.				
c Excess from 2014 29,447.				
d Excess from 2015 3, 261.				
e Excess from 2016			<u> </u>	Form 000 PE (0040)

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Part XIV Private Operating F	<u></u>	·	I-A, question 9)	N/A	<del></del>
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating	1		
foundation, and the ruling is effective fo		-	<b>&gt;</b>		
<b>b</b> Check box to indicate whether the found	lation is a private operatir	ng foundation described	in section	4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2016	<b>(b)</b> 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
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					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
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					
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during t	ne year-see instr	Tuctions.)			
1 Information Regarding Foundation	=				
a List any managers of the foundation wh year (but only if they have contributed n			ributions received by the	e foundation before the clo	se of any tax
NONE					
b List any managers of the foundation wh other entity) of which the foundation has			(or an equally large porti	on of the ownership of a p	artnership or
NONE					
2 Information Regarding Contribution Check here  ☐ If the foundation of				not accept unsolicited requ	uests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num FRANKLIN FAMILY FOUN					
19 WINDCASTLE DR, ST			,		
b The form in which applications should be NO SPECIFIC FORMAT			hould include:		
c Any submission deadlines:		·			
NONE  d Any restrictions or limitations on awards	s such as by geographic	al areas, charitable fields	kinds of institutions or	other factors	<del></del>
NONE	o, outin as by geographic	ai ai cas, chai liable lielus,	กแนง 01 แจนเนนเบแ <b>ง</b> , UI	ounci idolois.	

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient or substantial contributor a Paid during the year ELON UNIVERSITY NONE EXEMPT EDUCATIONAL 100 CAMPUS DRIVE 7,000. ELON, NC 27244 IMMANUEL LUTHERAN CHURCH NONE EXEMPT RELIGIOUS 115 S. 6TH ST. ST\_CHARLES\_ MO 63301 3,500. ST JUDE CHILDREN'S HOSPITAL NONE EXEMPT MEDICAL 501 ST JUDE PLACE MEMPHIS, TN 38105 1,000. Total ► 3a 11,500, **b** Approved for future payment NONE **▶** 3b Total

Part XVI-A Analysis of Income-Producing Activitie
---------------------------------------------------

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ed by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	<b>(b)</b> Amount	Exclu- sion code	(d) Amount	Related or exempt function income
<del>-</del>	Code	<del></del>	wde		
·					
c					
Δ	·				
e					
g Fees and contracts from government agencies		<del></del>			
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	16.	
4 Dividends and interest from securities			14	7,486.	
5 Net rental income or (loss) from real estate:			17	7,400.	
a Debt-financed property					<del></del>
b Not debt-financed property					<del></del>
6 Net rental income or (loss) from personal					
, , ,				•	
property 7 Other investment income					
8 Gain or (loss) from sales of assets other			14	-2 506	
than inventory  9 Net income or (loss) from special events			14	<4,500.	<u> </u>
, ,					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			1 1	2 210	
a MISCELLANEOUS INCOME			14 14	2,310.	
b THE BLACKSTONE GROUP K-1			14	17. <51.	
c ENTERPRISE PRODUCTS			14	<51.0	<u> </u>
d					
6		0		7 272	
12 Subtotal. Add columns (b), (d), and (e)		0.		1,414.	<u>0.</u> 7,272.
13 Total. Add line 12, columns (b), (d), and (e)				13	1,212.
(See worksheet in line 13 instructions to verify calculations )					
Part XVI-B Relationship of Activities to	the Acco	omplishment of Ex	empt	Purposes	
Line No. Explain below how each activity for which incom			contribi	uted importantly to the accomp	olishment of
the foundation's exempt purposes (other than b	y providing ful	ilus idi sucii purposes).			
				·	<del></del>
					<del></del>
	<del> </del>	_			

	0-PF (20	16) <b>FRANK</b>	LIN FAMII	Y FOU	NDATION			45-	<u>5096710</u>	Pa	ge <b>13</b>
Part :	XVII	Information Re Exempt Organ		sfers To	and Transaction	ns ar	nd Relations	ships With No	ncharitable	•	
<b>1</b> Dic	the org	anızatıon directly or indi	rectly engage in any	of the follow	ring with any other orga	anızatıor	described in sec	tion 501(c) of		Yes	No
the	Code (c	ther than section 501(c	)(3) organizations) o	or in section 5	527, relating to political	organiz	rations?				
<b>a</b> Tra	ansfers fi	om the reporting found	ation to a noncharita	able exempt o	organization of:						
(1)	Cash								1a(1)		_X
(2)	Other a	issets							1a(2)		X
<b>b</b> Oth	ner trans	actions:									
(1)	Sales	of assets to a noncharita	ble exempt organiza	ition					<u>1b(1)</u>		_X_
(2)	Purcha	ises of assets from a no	ncharitable exempt (	organization					1b(2)		_X_
(3)	Rental	of facilities, equipment,	or other assets						1b(3)		X
(4)	Reimb	ursement arrangements							1b(4)		X
		or loan guarantees							1b(5)		X
		mance of services or me							1b(6)		X
		facilities, equipment, ma							1c		X
		er to any of the above is								ets,	
		given by the reporting for				et value	in any transactio	n or sharing arrange	ement, show in		
	<del>_ , , ,</del>	the value of the goods,  b) Amount involved	,				(4) 5 .				
a) Line n	10 (	a) Amount involveu	(c) Name o		ole exempt organization		(U) Description	n of transfers, transacti	ons, and sharing ar	rangeme	nts
				N/A							
		<del> </del>					-				
-	-						<del> </del>		-		
							-				
					<u> </u>		<del> </del>				
							<del> </del>				
					-		1				
							1				
							1				
		<del> </del>									
		·									
ın s	section 5	dation directly or indirectly or indirectly of the Code (other mplete the following sch	r than section 501(c	•	•	organiza	ations described		Yes	X	No
		(a) Name of org			(b) Type of organiz	ation		(c) Description of r	elationship		
		N/A	·								
-		· · · · · · · · · · · · · · · · · · ·									
			•								
Sign Here		enalties of perjury, 1 declare ef, it is true, correct, and cor				ll informa	·	er has any knowledge	May the IRS return with the shown below X Yes	e prepar (see ins	er
	1	ture of officer or trustee		T-	Date		Title				
		Print/Type preparer's na		Preparer's	signature		Date	Check if	PTIN		
Paid	į	RICHARD F. CPA	WAIGAND,	Richa	I J. Wargen	<i>\\</i>	10/9/17	self- employed	P00545	330	
Prep	arer 📗	Firm's name N CETA		TIC	- ()			Furmin FINE - 1	2 17612	72	

Firm's address ► 1610 DES PERES RD, SUITE 300 SAINT LOUIS, MO 63131-1891

Form **990-PF** (2016)

Phone no. 314-569-3333

**Use Only** 

FRANKLIN FAMILY FOUNDATION
Part IV Capital Sains and Lease for Taylor Investment

Capital Gains and Los	sses for Tax on Investment Income				
	describe the kind(s) of property soluck warehouse; or common stock, 2		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a PNC BANK	<u>-</u> .		P	VARIOUS	VARIOUS
b UMB ST COVERED			P		VARIOUS_
c UMB ST NONCOVE	RED		P		VARIOUS
d UMB LT COVERED			P		VARIOUS
e UMB LT NONCOVE	RED		P		VARIOUS
f BLACKSTONE K-1			P	VARIOUS	VARIOUS
g ENTERPRISE K-1			P	VARIOUS	VARIOUS
h CAPITAL GAINS	DIVIDENDS				
_1					
<u>k</u>		· · · · · · · · · · · · · · · · · · ·	-		
1			_		
m			_		
n					
0	(D) D	1		1	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		) Gain or (loss) plus (f) minus (g)	
a 5,114.		3,629.			1,485.
b 16,389.		16,140.			249.
c 2,840.		2,964.		·	<124.>
d 14,332.		18,018.			<3,686.
e 2,612.		3,060.			<448.
f 9.					9.
g		1.			<u> &lt;1.</u> >
h 10.					10.
ı					
J			***		
k					
I .					
m					
n					
0					
Complete only for assets showin	ng gain in column (h) and owned by			sses (from col. (h)	
(i) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		of col. (h) gain ove lot less than "-0-")	r cor (k),
	as 01 12/3 1/03	Over cor. (j), ii arry		·	1 405
a			**		1,485.
b	· · · · · · · · · · · · · · · · · · ·		**		249. <124.>
C					<3,686.>
<u>d</u>					<3,686.> <448.>
e f			**		<del></del>
			**	• • • • • • • • • • • • • • • • • • • •	<u></u>
g h					10.
1					
·					
k					
m					
n	<del>- ·</del>		· · · · · · · · · · · · · · · · · · ·		
0					
	47	Dod Las 2			
2 Capital gain net income or (net ca	pital loss) { if gain, also enter -(	r in Part I, line 7 )-" in Part I, line 7	2		<2,506.>
3 Net short-term capital gain or (los		<u> </u>			
If gain, also enter in Part I, line 8,	column (c).	}			400
If (toss), enter "-0-" in Part I, line 8	<b>'</b>	J [	2 i		133

## Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### **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

Employer identification number

FRANKLIN FAMILY FOUNDATION 45-5096710 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 foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributors Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% 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 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) filing 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 Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-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)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Employer identification number

### FRANKLIN FAMILY FOUNDATION

45-5096710

Contributors (See instructions) Use duplicate copies of Part I if	additional space is needed	
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
FRANKLIN ELECTRONICS COMPANY 4328 BRIDGETON INDUSTRIAL DR BRIDGETON, MO 63304	\$30,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
FERRO MAGNETICS CORPORATION  4328 BRIDGETON INDUSTRIAL DR  BRIDGETON, MO 63304	\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	\$	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2016)
	(b) Name, address, and ZIP + 4  FRANKLIN ELECTRONICS COMPANY  4328 BRIDGETON INDUSTRIAL DR  BRIDGETON, MO 63304  (b) Name, address, and ZIP + 4  FERRO MAGNETICS CORPORATION  4328 BRIDGETON INDUSTRIAL DR  BRIDGETON, MO 63304  (b) Name, address, and ZIP + 4  (b) Name, address, and ZIP + 4	Name, address, and ZIP + 4   Total contributions

Employer identification number

### FRANKLIN FAMILY FOUNDATION

45-5096710

Part II	Noncash Property (See instructions) Use duplicate copies of Pari	t II if additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(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
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	

Employer identification number

	Use duplicate copies of Part III if addition	ai space is needed	
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
) No. rom art I	(b) Purpose of gift  Transferee's name, address, a	(e) Transfer of gift	(d) Description of how gift is held  Relationship of transferor to transferee
n) No. rom Part I		(e) Transfer of gift	

FORM 990-PF	INTEREST	ON SA	AVINGS	AND	TEMPO	RARY	CASH	IN	VESTMENTS	S'I	PATEMENT	1	
SOURCE					IN	(B) INVESTMENT INCOME I		(C) ADJUSTED NET INCOME					
PNC BANK TOTAL TO PART I, LINE 3				16.									
				16.				16.	16.				
FORM 990-PF		DIVIDE	ENDS A	ND I	NTERES!	r fro	OM SE	CUR:	ITIES	SI	PATEMENT	2	
SOURCE		GROSS AMOUN		GA	ITAL INS DENDS		(A) EVENUI R BOOF		(B) NET INVES MENT INCO				
PNC BANK UMB BANK	-		345. L51.	-	3. 7.		2,342. 5,144.			2,342. 5,144.			
TO PART I, LINE 4 7,496.			10.	7,486.		7,48	6.	7,486.					
FORM 990-PF				ОТН	ER INC	OME				នា	TATEMENT	3	
DESCRIPTION						(A) EVENU R BOO			(B) ET INVEST- ENT INCOME	(C) ADJUSTED			
MISCELLANEOUS INCOME THE BLACKSTONE GROUP K-1 ENTERPRISE PRODUCTS					2,310 1° <53			17		17			
TOTAL TO FORM 990-PF, PART I, LI				NE 1	1	2,276.			2,2	76.			

FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
TAX PREPARATION	850.	0.	850.	0.	
TO FORM 990-PF, PG 1, LN 16B	850.	0.	850.	0.	
FORM 990-PF	OTHER PROFES	SIONAL FEES	S	STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT FEES - PNC INVESTMENT FEES - UMB	1,147. 2,036.		1,147. 2,036.		
TO FORM 990-PF, PG 1, LN 16C	3,183.	3,183.	3,183.	0.	
FORM 990-PF	TAX	ES	S	STATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAXES - PNC FOREIGN TAXES - UMB	2. 169.	2. 169.	2. 169.		
TO FORM 990-PF, PG 1, LN 18	171.	171.	171.	0.	
FORM 990-PF	CORPORAT	E STOCK	S	TATEMENT 7	
DESCRIPTION		вос	F OK VALUE	AIR MARKET VALUE	
INVESTMENT ACCOUNT-EQUITIES			294,683.	332,215.	
TOTAL TO FORM 990-PF, PART I		294,683. 332,215			

FORM 990-PF		THER INVES	TMENTS			STAT	EMENT	
DESCRIPTION		VALUATION METHOD			VALUE	FAIR MARKET VALUE		
INVESTMENT ACCOUNT-I	FIXED INCOME	CO	ST		20,000.		19,6	79.
TOTAL TO FORM 990-PH	F, PART II, L	INE 13	- -		20,000.		19,6	79.
FORM 990-PF	INTERE	ST AND PEN	ALTIES		<u> </u>	STAT	EMENT	9
TAX DUE FROM FORM S LATE PAYMENT INTE LATE PAYMENT PENA	EREST	VI						28. 1. 1.
TOTAL AMOUNT DUE								30.
FORM 990-PF	LA	TE PAYMENT	PENALT	Y		STAT	EMENT	10
DESCRIPTION	DAT	E AMO	JNT	BALAN	CE M	ONTHS	PENAL	ΤY
TAX DUE EXTENSION PAYMENT DATE FILED	05/15 05/15 11/15	/17	128. <100.>		128. 28. 28.	6		1.
TOTAL LATE PAYMENT I	PENALTY							1.
FORM 990-PF	LA	TE PAYMENT	INTERES	ST		STAT	EMENT	11
DESCRIPTION	DATE	AMOUNT	BAL	ANCE	RATE	DAYS	INTER	EST
TAX DUE EXTENSION PAYMENT DATE FILED	05/15/17 05/15/17 11/15/17	128 <100		128. 28. 29.	.0400			1.