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2016

OMB No 1545-0052

Return of Private Foundation

Form 990-PF

Department of the Treasury

Internal Revenue Service

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 instructions is at www.irs.gov/form990pf.

Open to Public Inspection

		ndar year 2016, or tax year beginning 01-01-20)16 , a	nd ending 12-31		
		indation ly Foundation		46-1101805	lentification numbe	er
		ition Source d street (or P O box number if mail is not delivered to street address)	Room/suite			
		on Source 501 Silverside Rd	Noonly suite	(800) 839-175	ımber (see instructio 4	ns)
		n, state or province, country, and ZIP or foreign postal code DE 198091377		C If exemption	application is pendin	ng, check here
G Ch	neck al	I that apply Initial return Initial return of a Final return Address change Name change	former public charity	ere hthe 85% omputation h		
ı Ch	eck ty	where of organization \square Section 501(c)(3) exempt private is	foundation		undation status was on 507(b)(1)(A), chec	
	Section	n 4947(a)(1) nonexempt charitable trust			007 (2)(1)(1),	
of '	year <i>(f</i>	xet value of all assets at end from Part II, col (c),	✓ Cash ☐ Accru		ation is in a 60-mont on 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach	807,248	3		
	2	schedule) Check ▶ ☐ If the foundation is not required to attach				
		Sch B				
	3	Interest on savings and temporary cash investments	341			
	4	Dividends and interest from securities	58,170	58,170	1	
	5a	Gross rents				
e	ь 6-2	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10	25,630	1		
Ξ	6a		,	' 		
Revenue	Б 7	Gross sales price for all assets on line 6a 1,197,948 Capital gain net income (from Part IV, line 2)		25,630	<u> </u>	
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	С	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	891,389	84,141		
	13	Compensation of officers, directors, trustees, etc	С			
	14	Other employee salaries and wages				
ses	15	Pension plans, employee benefits				
ē	16a	Legal fees (attach schedule)				
X	b	Accounting fees (attach schedule)	M.1			
Operating and Administrative Expenses	С	Other professional fees (attach schedule)	4,938	4,938	1	
<u>a</u>	17	Interest	95-1 1.446		 	
<u></u>	18	Taxes (attach schedule) (see instructions)	1,440	,		
Ξ	19	Depreciation (attach schedule) and depletion				
₽ E	20	Occupancy				
ב כ	21	Travel, conferences, and meetings				
ਰ	22	Other expenses (attach schedule)	16,218			16,218
Ē	23 24	Total operating and administrative expenses.	10,216	1	 	10,216
era	24	Add lines 13 through 23	22,596	4,938		16,218
2	25	Contributions, gifts, grants paid	112,389	<u> </u>	 	112,389
	26	Total expenses and disbursements. Add lines 24 and				-
	27	Subtract line 26 from line 12	134,985	4,938	1	128,607
	27	Subtract line 26 from line 12 Excess of revenue over expenses and	756,404			
	а	disbursements	7 30,404			
	b	Net investment income (If negative, enter -0-)		79,203		
	С	Adjusted net income(If negative, enter -0-)				
or	Daner	work Reduction Act Notice, see instructions.		Cat No. 11289	Y ===	rm 000-DF (2016)

3,095,283

3,095,283

3,095,283

3,095,283

3,916,151

3,851,687

3,851,687

3,851,687 3,851,687

2

3 4

5

6

3,095,283

3,851,687

3,851,687 Form 990-PF (2016)

756,404

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow SFAS 117, check here 🕨 🗹

Paid-in or capital surplus, or land, bldg, and equipment fund

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) ▶ _____

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

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

Analysis of Changes in Net Assets or Fund Balances

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -_

Unrestricted Temporarily restricted

Permanently restricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

12

13

14

15

16

17

18

19

20

21

22

23

24

25

28 29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

	2-story brick warehouse	, or common stock, 200 shs MLC C	(o)	D—Donation	(mo , day, yr)	(mo , day, yr)
1 a P	Publicly-traded Securities					
b						
С						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	h) r (loss)) minus (g)
a	1,197,948			1,172,318		25,630
b						
С						
d						
e						
(Complete only for assets show	ng gain in column (h) and owned by	the foundation	on 12/31/69	(I)
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col (ı) (ı), ıf any	Gains (Col (col (k), but not	h) gain minus less than -0-) or om col (h))

а b C d e

If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7

Capital gain net income or (net capital loss) Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

(b)

How acquired

(c)

Date acquired

25,630

25,630

Page 3

(d)

Date sold

If section 4940(d)(2) applies, leave this part blank

Nas	the	four	ndati	on l	able	for	the	section	4942	tax	o
e 1157	19	Alle a	c	4 - 4 -				I.C.			

		` '	`	,							
Was	the	foundation	n	lıa	ble	for	the	section	4942	tax	c

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

(a) Base period years Calendar

year (or tax year beginning in) 2015

2014

2013

2012

2011

2 Total of line 1, column (d)

5 Multiply line 4 by line 3

instructions

7 Add lines 5 and 6 . . .

Enter the appropriate amount in each column for each year, see instructions before making any entries

Adjusted qualifying distributions

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the

number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

146,294

106,664

129,459

5,100

in the distributable amount of any year in the base period?

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. See the Part VI

Net value of noncharitable-use assets

2,363,488

1,664,814

896,020

112,952

2

3

4

5

6

7

Yes V No

(d)

Distribution ratio

(col (b) divided by col (c))

2

3

1		,

0 061898

0 06407

0 144482

0 045152

0 315602

0 078901

3,014,513

237,848

238,640

128,607

Form 990-PF (2016)

792

0 0

Form 990-PF (2016)		Page 7
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly P	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services	<u> </u>	<u> </u>
Part IX-A Summary of Direct Charitable Activities	to be held to be a second to the second to t	
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produ		Expenses
1		
2		
		
3		
4		
Part IX-B Summary of Program-Related Investments (see Describe the two largest program-related investments made by the foundation during the		Amount
1	ile tax year on lines I and 2	Amount
2		
All ables and are walled investments. Can inchinate and		
All other program-related investments See instructions 3		
-		
Total. Add lines 1 through 3		•
		Form 990-PF (2016)

1b

2

За 3b

4

5

128.607

128.607

Form 990-PF (2016)

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

Page 9

149.142

128.607

20,535

Form **990-PF** (2016)

Part XIII	Undistributed Income (see instruc	tions)

(a)

Corpus

143,040

0 20,535

122,505

122,505

68,066 25.079

29.360

3,615 84.986 25,079 29,360 (b)

Years prior to 2015

(c)

2015

1	Distributable	am	nuo	nt f	or 2	201	6 fr	om	Pa	rt >	ΚI, I	line	7
2	Undistributed	lino	on	ne,	ıf a	ny,	as	of t	he	en	d o	f 20	16
а	Enter amoun	t fo	r 2	015	or	ıly.							
b	Total for price	r ye	ear	s	21	014	١,	20	13	,	20	12	
3	Excess distrib	outi	ons	ca	rry	ove	r, ıf	an	у,	to 2	201	6	
а	From 2011.												
b	From 2012.												3,
С	From 2013.												84,
d	From 2014.												25,
е	From 2015.												29,
f	Total of lines	3а	thr	oug	gh e	₽.							
4	Qualifying dis	trıbı	utic	ns	for	20	16	fror	n F	art			
	XII, line 4 🕨	\$							128	3,60	7		
а	Applied to 20	15,	bu	t n	ot n	nor	e th	nan	lın	e 2	a		
ь	Applied to un	dıst	rıb	ute	d ır	cor	ne	of p	oric	r y	ear	s	
	(Election requ	ııre	:—t	see	ıns	tru	ctio	ns)					
С	Treated as di						f co	rpu	1s (Ele	ctic	n	
	required—see					•	•	•	•	٠	٠	٠	٠
d	Applied to 20	16	dis	trıb	uta	ble	am	oui	ηt.				

e Remaining amount distributed out of corpus

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2017.

10 Analysis of line 9 a Excess from 2012. . **b** Excess from 2013. .

c Excess from 2014. . . .

d Excess from 2015. . . e Excess from 2016. .

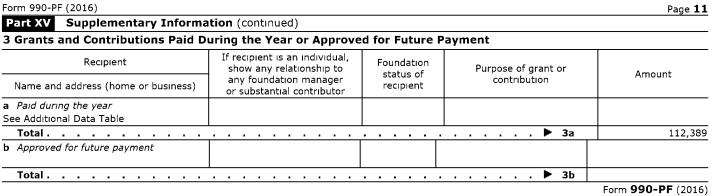
Subtract lines 7 and 8 from line 6a

indicated below:

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

same amount must be shown in column (a))



ter gross	amounts unless otherwise indicated	Unrelated bus	siness income	Excluded by section	512, 513, or 514	(e) Related or exemp
Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
	-					
g Fees	and contracts from government agencies					
	rship dues and assessments					
	st on savings and temporary cash ments			14	341	
	ds and interest from securities			14	58,170	
	tal income or (loss) from real estate					
	financed property					
	ebt-financed property ntal income or (loss) from personal property					
	nvestment income			+		
	or (loss) from sales of assets other than			†		
ınvent	ory			18	25,630	
	ome or (loss) from special events					
Gross p Other r	profit or (loss) from sales of inventory revenue a					
	evenue a					
с						
4						
e						
e	-				84,141	
e Subtota Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	ns)		13	84,141	
Subtota Total. e works	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio Relationship of Activities to th	_{ns)} e Accomplishr	nent of Exem	pt Purposes		
e Subtota Total. ee worksl	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio	ns) e Accomplishr Income is reported	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
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Part	XVII	Information Re Exempt Organi		ransf	ers To	and Transact	tior	ns and R	lelatio	nships With No	ncharita	ible		
		ganization directly or in Code (other than sectio	directly enga								ion 501		Yes	No
a Tran	nsfers f	from the reporting foun	dation to a n	oncha	rıtable ex	empt organizati	on d	of						
(1)	Cash.										. [La(1)		No
(2)	Other	assets									🏻	La(2)		No
b Othe	er tran	sactions												
		of assets to a nonchar		-								lb(1)		No
` '		ases of assets from a r										lb(2)		No
		al of facilities, equipmer	•									lb(3)		No
		bursement arrangemen										lb(4)		No
		s or loan guarantees. mance of services or m										lb(5) lb(6)		No No
٠,		facilities, equipment, n	•		-							1c		No
	-	ver to any of the above			•									NO
of th	ne good ny tran	ds, other assets, or ser nsaction or sharing arra (b) Amount involved	vices given b ngement, sh	y the i	reporting column (d	foundation If the	he f	oundation goods, oth	receive ner asse	d less than fair ma	rket value eved		ngemen	ts
							_							
	_						\vdash							
	-						╁							
	_													
							_							
							-							
	+						\vdash							
desc	ribed	ndation directly or indire in section 501(c) of the complete the following si (a) Name of organization	Code (other chedule	•	section 50	•	ecti	on 527?	-			Yes ship	☑ N	0
Sign	of m whic	er penalties of perjury, y knowledge and belief h preparer has any kno	, it is true, c			plete Declaratio						ll infor	mation	n of
Here		· · · · · · · ·				2017-08-24			****		with the pre			
	7 9	Signature of officer or t	rustee			Date		/ Titl	le		(see instr)	> √ γ	es 🗆 N	ю
Paid		Print/Type preparer's Jeffrey D Haskell	name	Prepa	arer's Sigi	nature		Date		Check if self- employed ▶ □	PTIN P	01345	770	
Prepare (ndation Sourc	ce							Firm's EIN	N >		
	•		ne Hollow Ln	Ste 21	.2									
		La	ke Success,	NY 11	.042						Phone no	(800)	839-1	1754

Form 990PF Part XV Line 3 - Grant	is and Contributions Paid	During the	Year or Approved for Future I	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
AUXILIARY OF THE SHRINERS HOSPITAL OF GREENVILLE S PO BOX 9877 GREENVILLE, SC 29604	N/A	PC	General & Unrestricted	5,000
BIG OAKS RESCUE FARM 2305 KATEWAY GREENWOOD, SC 29646	N/A	PC	General & Unrestricted	1,000
CHRIST CHURCH EPISCOPAL SCHOOL 245 CAVALIER DR GREENVILLE, SC 29607	N/A	PC	Annual Fund	2,500
CHRIST CHURCH EPISCOPAL SCHOOL 245 CAVALIER DR GREENVILLE, SC 29607	N/A	PC	foundation's pledge to the Performing Arts Center	33,333
FURMAN UNIVERSITY 3300 POINSETT HWY GREENVILLE, SC 29613	N/A	PC	Kathryn W Timmons Promenade Project	35,556
Total				112,389

Form 990PF Part XV Line 3 - Grant	ts and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
MEALS ON WHEELS OF GREENVILLE INC 15 OREGON ST GREENVILLE, SC 29605	N/A	PC	General & Unrestricted	2,500
PROJECT HOPE FOUNDATION INC 2131 WOODRUFF RD STE 2100 PMB 358 GREENVILLE, SC 29607	N/A	PC	Capital Campaign	10,000
SOUTH CAROLINA CHILDRENS THEATRE PO BOX 9340 GREENVILLE, SC 29604	N/A	PC	build a Theatre Arts Center Campaign	5,000
UNITED WAY OF GREENVILLE COUNTY INCORPORATED 105 EDINBURGH COURT GREENVILLE, SC 29607	N/A	PC	Annual Campaign	12,000
YMCA OF GREENVILLE 723 CLEVELAND ST GREENVILLE, SC 29601	N/A	PC	the Caine Halter Family YMCA and Camp Greenville	5,500
Total				112,389

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491251004067 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. TY 2016 Depreciation Schedule **Name:** AWT Family Foundation

EIN: 46-1101805

DLN: 93491251004067

TY 2016 Investments Corporate Stock Schedule

Name: AWT Family Foundation

EIN: 46-1101805

Name of Stock	End of Year Book Value	End of Year Fair Market Value
AMG MANAGERS FAIRPOINTE MID CA	87,320	101,315
AQR EQUITY MARKET NEUTRAL FUND	58,025	59,721
BLACKROCK HIGH YIELD BOND PORT	105,453	103,057
DB X TRACKERS MSCI EUROPE HEDG	90,083	90,216
DB X TRACKERS MSCI JAPAN HEDGE	59,444	69,006
DODGE & COX FUNDS INTERNATIONA	158,346	159,869
DODGE & COX INCOME FUND	114,152	114,415
DOUBLELINE TOTAL RETURN BOND	60,273	58,867
EATON VANCE GLOBAL MACRO FD CL	87,037	87,424
EQUINOX CAMPBELL STRATEGY I	48,500	38,885
GATEWAY FUND CLASS Y	86,098	90,639
INVESCO BALANCED RISK ALLOCATI	63,401	57,267
ISHARES BARCLAYS TIPS BOND FUN	90,722	88,612
ISHARES MSCI INDIA ETF	65,755	58,124
ISHARES RUSSELL 2000	28,973	34,252
ISHARES TR S & P MIDCAP 400 IN	110,913	129,792
ISHARES TRUST- ISHARES MSCI AL	61,673	64,762
JP MORGAN CORE BOND FUND	124,744	121,350
JPMORGAN REALTY INCOME FUND	89,212	91,091
MATTHEWS ASIA DIVIDEND FUND IN	61,081	61,861
NEUBERGER BERMAN GREATER CHINA	30,526	28,562
NEUBERGER BERMAN MULTI CAP OPP	144,423	157,011
OAKMARK INTERNATIONAL FUND CL	118,925	108,083
PARNASSUS EQUITY INCOME FUND I	180,674	181,982
PIMCO HIGH-YIELD INSTL	74,955	77,704
PIMCO UNCONSTRAINED BOND FUND	58,659	59,827
PRIMECAP ODYSSEY STOCK FUND	146,602	154,239
PRUDENTIAL GLOBAL REAL ESTATE	25,000	22,374
SPDR GOLD SHARES	60,853	51,297
SPDR S&P 500 ETF TRUST	246,019	270,471

Name of Stock	End of Year Book Value	End of Year Fair Market Value
THE ARBITRAGE FUND CLASS I	58,025	58,468
TORTOISE MLP AND PIPELINE FUND	55,475	61,754
VANGUARD FTSE EMERGING MARKETS	56,996	60,504

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	l: 93491251004067
TY 2016 Other Expenses Sche	dule			
Name:	AWT Family Fou	ındatıon		
EIN: 46-1101805				
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Administrative Fees	16,193			16,193

State or Local Filing Fees

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLI	N: 93491251004067		
TY 2016 Other Professional Fees Schedule						
Name: AWT Family Foundation EIN: 46-1101805						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

4,938

4,938

Investment Management Services

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491251004067
TY 2016 Taxes Schedule				
Name:	: AWT Family	Foundation		
EIN: 46-1101805				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
990-PF Estimated Tax for 2016	800			
990-PF Excise Tax for 2015	640			

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Schedule B Schedule of Contributors			OMB No 1545-0047		
or 990-PF) Department of the Treasury Internal Revenue Service	PF) ► Attach to Form 990, 990-EZ, or 990-PF ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at				
Name of the organizat AWT Family Foundation	ion	Employer ide	ntification number		
-	·	46-1101805			
Organization type (ch	eck one)				
Filers of:	Section:				
Form 990 or 990-EZ					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	on			
	☐ 527 political organization				
Form 990-PF	√ 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	ration filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution r property) from any one contributor. Complete Parts I and II. See instructions for d				
Special Rules					
under sections received from a	tion described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $33^13\%$ si $509(a)(1)$ and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 990-EZ), Painy one contributor, during the year, total contributions of the greater of (1) \$5,000 one 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	art II, line 13, 16	6a, or 16b, and that		
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					
during the year. If this box is che purpose Do no	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recein contributions exclusively for religious, charitable, etc., purposes, but no such contributed, enter here the total contributions that were received during the year for an exclusive any of the parts unless the General Rule applies to this organization be able, etc., contributions totaling \$5,000 or more during the year	ributions totale exclusively relig ecause it receiv	ed more than \$1,000 gious, charitable, etc ,		
990-EZ, or 990-PF), bu	on that is not covered by the General Rule and/or the Special Rules does not file Set it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line Herorm 990PF, Part I, line 2, to certify that it does not meet the filing requirements of	of its			
For Paperwork Reduction for Form 990, 990-EZ, or 9		е В (Form 990, 9	90-EZ, or 990-PF) (2016)		

Schedule B (For	m 990, 990-EZ, or 990-PF) (2016)		Page 2
Name of organi AWT Family Foun	zation dation	Employer identification 46-1101805	number
Part I	Contributors (see instructions) Use duplicate copies of Part I if a	dditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	The KWT Testamentary CLAT Charles Timmons 251 McDaniel Ave	\$ 807,248	Person Payroll Noncash
	Greenville, SC29601		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		<u>\$</u>	Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
-			Payroll
		<u>\$</u>	Noncash
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
•			Payroll
		\$	Noncash
			(Complete Part II for noncash contributions)
		0.1.1.0/5	000 000 EZ 000 DE\ (0040\

Schedule B (Form 99	0, 990-EZ, or 990-PF) (2016)		Page 3	
Name of organization AWT Family Foundation		Employer ident	Employer identification number	
		46-11	01805	
Part II	Noncash Property			
(a) No.from Part I	(see instructions) Use duplicate copies of Part II if additional space is needed (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	
		\$		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		s		
<u></u>		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2016)	

Schedule B (Form	990, 990-EZ, or 990-PF) (2016)		Page 4
Name of organizat AWT Family Foundat			Employer identification number 46-1101805
than \$1, organiza the year	000 for the year from any one contributo	r. Complete columns (a) thro of exclusively religious, chari octions.) ▶ \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 F	Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	L(e) Transfer of gift ZIP 4 F	Relationship of transferor to transferee
			T
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 F	Relationship 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	L
	Transferee's name, address, and	ZIP 4 F	Relationship of transferor to transferee
			Schedule B (Form 990, 990-EZ, or 990-PF) (2016)