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OMB No 1545-0052

Return of Private Foundation

2016 Department of the Treasury or Section 4947(a)(1) Trust Treated as Private Foundation Internal Revenue Service Do not enter social security numbers on this form as it may be made public. Open to Public ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf. For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016 A Employer identification number LOOMIS FOUNDATION INC 56-1849009 Number and street (or P O box number if mail is not delivered to street address) 3400 COLLEGE BLVD B Telephone number (see instructions) (913) 742-2727 City or town, state or province, country, and ZIP or foreign postal code LEAWOOD, KS 66211 ${f C}$ If exemption application is pending, check here ☐ Initial return G Check all that apply ☐ Initial return of a former public charity D 1. Foreign organizations, check here Amended return ☐ Final return 2. Foreign organizations meeting the 85% test, check here and attach computation ☐ Name change Address change **E** If private foundation status was terminated under section 507(b)(1)(A), check here ☑ Section 501(c)(3) exempt private foundation H Check type of organization \square Section 4947(a)(1) nonexempt charitable trust \square Other taxable private foundation I Fair market value of all assets at end **J** Accounting method ✓ Cash ☐ Accrual If the foundation is in a 60-month termination of year (from Part II, col (c), under section 507(b)(1)(B), check here Other (specify) line 16) \$ 4,405,707 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total Disbursements for charitable Revenue and (b) Net investment Adjusted net (c) of amounts in columns (b), (c), and (d) may not necessarily expenses per books equal the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc , received (attach 250.000 schedule) Check ▶ ☐ If the foundation is **not** required to attach 2 3 Interest on savings and temporary cash investments Dividends and interest from securities 135,194 131,512 Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 628 Net short-term capital gain Income modifications . 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) c Other income (attach schedule) 344 344 11 **Total.** Add lines 1 through 11 386,166 132,484 13 Compensation of officers, directors, trustees, etc 36.000 36.000 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees (attach schedule) . . . Accounting fees (attach schedule) Other professional fees (attach schedule) رچە 27,589 20,691 6,897 275 275 [چە 2,977 2,977 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 8,768 21 8,768 Travel, conferences, and meetings 22 Printing and publications . . 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 75,618 23,943 51,674 153,450 153,450 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 229,068 23,943 205,124 27 Subtract line 26 from line 12 Excess of revenue over expenses and 157,098 disbursements

Net investment income (If negative, enter -0-) **Adjusted net income**(If negative, enter -0-)

108 541

177,210 **%** 1,304,719 **%**

2,617,360

1,895

4,140,195

4 140 195

4,140,195

4,140,195

ارج

1,366,857

2,901,899

4,323,938

4 323 938

4,323,938

4,323,938

1

2

3

4

5

6

4,140,195

4,324,147

4,323,938

Form **990-PF** (2016)

157,098

26,854

209

1,966

1,542,885

2,807,640

1,966

4,405,707

	3	Accounts receivable
		Less allowance for doubtful accounts ▶
	4	Pledges receivable ▶
		Less allowance for doubtful accounts ▶
	5	Grants receivable
	6	Receivables due from officers, directors, trustees, and other
		disqualified persons (attach schedule) (see instructions)
	7	Other notes and loans receivable (attach schedule)
5		Less allowance for doubtful accounts ▶
	8	Inventories for sale or use
Assets	9	Prepaid expenses and deferred charges
As	10a	Investments—U S $$ and state government obligations (attach schedule)
	ь	Investments—corporate stock (attach schedule)
	С	Investments—corporate bonds (attach schedule)
	11	Investments—land, buildings, and equipment basis ▶
		Less accumulated depreciation (attach schedule) ▶
	12	Investments—mortgage loans
	13	Investments—other (attach schedule)
	14	Land, buildings, and equipment basis ▶
		Less accumulated depreciation (attach schedule) ▶
	15	Other assets (describe ▶)

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.

Foundations that do not follow SFAS 117, check here ▶

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

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

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).....

Total liabilities(add lines 17 through 22)

instructions Also, see page 1, item I)

Other liabilities (describe ▶_

Unrestricted

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

Accounts payable and accrued expenses .

Deferred revenue

16

17

18

19 20

21 22

23

24

25 26

27

28 29

30

31

Part III

2

3

4

5

Liabilities

Fund Balances

ŏ

Net Assets

Page **3**

	(a) the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1aSee Additional Data Tabl	e				
b					
c					
d					
e					
(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 See Additional Data Tabl	e ,	' '			, (3)
b					
С					
d					
e					
Complete only for assets	s showing gain in column (h) and ow	ned 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) (j), ıf any	Gains (Col (col (k), but not	h) gain minus less than -0-) or om col (h))
a See Additional Data Tabl		over cor	()), ii aliy	200505 (114	5111 CO1 (11))
b	-				
С .					
d					
e					
·	gain or (loss) as defined in sections rt I, line 8, column (c) (see instructi	ons) If (loss), enter -0	,	3	628
Part V Qualification U	Jnder Section 4940(e) for Re	educed Tax on Net	Investment In	come	
_	rivate foundations subject to the se				
f section 4940(d)(2) applies, le	eave this part blank				
	e section 4942 tax on the distributa ot qualify under section 4940(e) Do		ın the base period	7 Y	es 🗌 No
1 Enter the appropriate an	nount in each column for each year,	see instructions before	making any entrie	s	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rati (col (b) divided by c	
2015					
2014					
2013					
2012					
2011	12			Г	
2 Total of line 1, column (•		· · · · 2		
number of years the four	o for the 5-year base period—divide adation has been in existence if less ncharitable-use assets for 2016 fror	than 5 years	· · · · ·		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
	ons from Part XII, line 4 , eater than line 7, check the box in P			ng a 1% tax rate Se	e the Part VI
				Ea	rm QQN-DF (2016

5a During the year did the foundation pay or incur any amount to

Page **6**

	(1) Carry on propaganda, or otherw(2) Influence the outcome of any sp	pecific public election (see sect	cion 4955), or to carry	☐ Yes ✓	No		
	on, directly or indirectly, any void (3) Provide a grant to an individual	=		· · Yes 🛂	No		
	(4) Provide a grant to an individual	**		∐ Yes ⊻	No		
	ın section 4945(d)(4)(A)? (see ii		· •		No		
	(5) Provide for any purpose other th						
	educational purposes, or for the			∟ Yes 💌	No		
D	If any answer is "Yes" to 5a(1)–(5), Regulations section 53 4945 or in a					ь	
	Organizations relying on a current n	• •	•	•		-	
С	If the answer is "Yes" to question 5a						
	tax because it maintained expenditu			· · □ Yes □	No		
	If "Yes," attach the statement requir	red by Regulations section 53	4945-5(d)	□ les □	10		
6а	Did the foundation, during the year,	receive any funds, directly or	indirectly, to pay premit	ıms on			
	a personal benefit contract?			· 🗌 Yes 🗸			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be	nefit contract?	6	ь	No
7 _	If "Yes" to 6b, file Form 8870	- 4b - 5-, , , d-4, , , , , , , , , , , , , , , , , , ,					
7a h	At any time during the tax year, was If yes, did the foundation receive an			∟ tes 💌		ь	
		Officers, Directors, Trust					
Pa	and Contractors	incers, Directors, Trust	ices, roundation ric	magers, mgmy raid Er	прюус	-3,	
1	List all officers, directors, trustee	es, foundation managers an	nd their compensation	(see instructions).			
	(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred		pense ac her allow	
See /	Additional Data Table	(B) devoted to position		compensation			
2	Compensation of five highest-pai	d employees (other than th	hose included on line 1	L—see instructions). If no	ne, ente	r "NONE	."
Na	(a) ame and address of each employee pa more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred		ense acc er allowa	,
IONI	· '	(-,		(d) compensation			
ION	<u> </u>						
	I number of allers are also as						_
ota	I number of other employees paid over	er \$50,000			Fa 4	000 PF	(2016)

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	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
NONE		
Total number of others receiving over \$50,000 for professional services		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rel		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	ucea, etc	
1		
2		
2		
3		
4		
4		
Part IX-B Summary of Program-Related Investments (see	· · · · · · · · · · · · · · · · · · ·	
Describe the two largest program-related investments made by the foundation during t	ne tax year on lines 1 and 2	Amount
1		
2		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		▶ 0
<u> </u>		Form 990-PF (2016)

1a

1b

2

3a 3b

4

5

205,124

205.124

205.124

Form 990-PF (2016)

Part XII

1

2

3

4

5

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

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.

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

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

income Enter 1% of Part I, line 27b (see instructions).

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

Page 9

207.043

4.984

202,059

Form **990-PF** (2016)

Form 990-PF (2)	υI
Part XIII	

90-PF (2	016)
t XIII	Undi

From 2011. . . . **b** From 2012. . . . c From 2013. . **d** From 2014. . . . e From 2015.

XII, line 4 ▶ \$

indicated below:

e Remaining amount distributed out of corpus

6 Enter the net total of each column as

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. Subtract lines 7 and 8 from line 6a

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. . .

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 **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 —see instructions 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

same amount must be shown in column (a))

Part XIII		Undistributed Income (see instructions)					
1	Distributable	e amount for 2016 from Part XI, line 7					
2	Undistribute	d income, if any, as of the end of 2016					

om Part XI, line 7 a Enter amount for 2015 only. **b** Total for prior years

of the end of 2016 Excess distributions carryover, if any, to 2016

f Total of lines 3a through e.

4 Qualifying distributions for 2016 from Part

a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election

required—see instructions).

d Applied to 2016 distributable amount.

(a)

Corpus

0

(چ

(b)

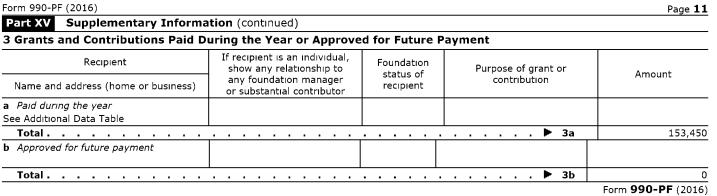
Years prior to 2015

(c)

2015

200,140

200.140



Part XVI-A Analysis of Income-Producin	ng Activities				rage 12
Enter gross amounts unless otherwise indicated		usiness income	Excluded by section		(e) Related or exempt
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a b					
c					
e					
f g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities5 Net rental income or (loss) from real estate			14	135,194	
a Debt-financed property					
b Not debt-financed property6 Net rental income or (loss) from personal propert	ty				
7 Other investment income			14	38	
8 Gain or (loss) from sales of assets other than inventory			18	628	
Net income or (loss) from special events Gross profit or (loss) from sales of inventory					
11 Other revenue					
PASS THROUGH BLACK STONE GROUP PASS THROUGH ENERGY TRANSFER PARTNERS				294 12	
c					
d e					
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0		136,166	
See worksheet in line 13 instructions to verify calculate	tions)			B	136,166
Part XVI-B Relationship of Activities to				ted importantly to	
the accomplishment of the foundation's instructions)					

. ,	/		
	Information Regarding Transfers To and Transactions and Relationships With Noncharit Exempt Organizations	able	

Par	t XVI	Information Re Exempt Organi		ransi	fers To a	and Transac	tio	ns and I	Relatio	nships With No	ncharit	able		
1 Dı (c	d the o	rganization directly or in Code (other than section	directly enga	ge in organi	any of the	following with	any 7, re	other or	ganızatıo political	n described in secti organizations?	ion 501		Yes	No
a Tr	ansfers	from the reporting four	dation to a no	oncha	ritable ex	empt organizat	ion	of						
(1	.) Cas	h										1a(1)		No
(2	2) Oth	er assets										1a(2)		No
b Ot	her tra	insactions												
	-	es of assets to a nonchar	•	_								1b(1)		No
(2	?) Purd	chases of assets from a r	noncharitable	exem	npt organiz	zation						1b(2)		No
(3) Ren	tal of facilities, equipme	nt, or other as	ssets.								1b(3)		No
(4	Reir	nbursement arrangemer	nts									1b(4)		No
•	•	ns or loan guarantees.										1b(5)		No
•	-	ormance of services or m	•		_						•	1b(6)		No
	_	of facilities, equipment, r			•						•	1c		No
of	the go any tra	swer to any of the above ods, other assets, or ser ansaction or sharing arra	vices given by ingement, sho	y the ow in	reporting column (c	foundation If	the f the	foundatio goods, ot	n receive ther asset	d less than fair mai ts, or services rece	rket valu ıved	e		.
(a) LII	ie ivo	(b) Amount involved	(C) Name of	попспа	aritable exe	mpt organization	+	(d) Desi	сприон ог	transfers, transactions	s, and Snai	ing arra	ngemen	LS
							-							
							+							
							4							
							+							
							+							
							_							
							+							
							+							
2a Is	the for	undation directly or indir	ectly affiliated	with	, or relate	d to, one or me	ore t	tax-exem	pt organi	zations				
		in section 501(c) of the	•			•					[Yes	✓ N	0
		complete the following s	•			()())								
		(a) Name of organization	on		(1	ל) Type of organı	zatio	n		(c) Description	n of relatio	nship		
Sigr	of	der penalties of perjury, my knowledge and belief ich preparer has any kno	f, it is true, co											
Her	e 👠	*****				2017-05-12		_*	****		May the If with the p			
		Signature of officer or t	rustee			Date		Tı	tle		see ınstr) ² 🗹 Y	es 🗆 N	lo
		Print/Type preparer's		Prep	arer's Sıgr	nature		Date		Check if self- employed ▶ □	PTIN	P01270)403	
Paid	_	BENJAMIN M HAKE	- CFM											
_	pare Onl	THIT S HATTICE CINE	ATIVE PLANN	ING T	AX LLC						Firm's E	IN ▶47	-10199	42
	_: - 		100 COLLEGE	BLVD)									
		LE	AWOOD, KS	6621	.1						Phone n	0 (913	338-2	2727

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation TD AMERITRADE - AVAILABLE UPON REQUEST 2015-01-01 2016-12-31 2016-12-31 TD AMERITRADE - AVAILABLE UPON REQUEST 2015-01-01 PASSTHROUGH FROM ETP 2015-01-01 2016-12-31 PASSTHROUGH FROM BPL 2015-01-01 2016-12-31 PASSTHROUGH FROM BX 2015-01-01 2016-12-31 PASSTHROUGH FROM BX 2016-12-31 2016-01-01 2016-12-31 PASSTHROUGH FROM PAA 2015-01-01 PASSTHROUGH FROM MMP 2015-01-01 2016-12-31 PASSTHROUGH FROM MMP 2016-01-01 2016-12-31 CAPITAL GAINS DIVIDENDS Ρ Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h Cost or other basis (e) Gross sales price Depreciation allowed Gain or (loss) (g) plus expense of sale (f) (or allowable) (h) (e) plus (f) minus (g) 150,021 145,800 4,221 170,000 177,210 -7,2101,356 1,356 97 97 557 557 8 -8 134 134 99 99 3 -3 1,385 1,385 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (k) over col (j), if any (j) as of 12/31/69 4,221 -7,210 1,356 97 557 -8 134 99 -3 1,385

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation CHARLTON BURNS 0 TREASURER 12,000 10 00 402 SANDFIDDLER COURT MOREHEAD CITY, NC 28557 JOSEPH BURNS 0 PRESIDENT 12,000 3 00 5 LAKE FOREST COURT GREENSBORO, NC 27408 WILLIAM BURNS 0 SECRETARY 12,000 3 00 2451 CUMBERLAND PKWY SUITE 3611 ATLANTA, GA 30339 KAREN BURNS ASSOCIATE O O 1 00 2451 CUMBERLAND PKWY SUITE 3611 ATLANTA, GA 30339 WILLIAM BURNS IV ASSOCIATE 0 0 1 00 110 HEADY DRIVE NASHVILLE, TN 37205 SALLY BURNS ASSOCIATE 0 0 1 00 2451 CUMBERLAND PKWY SUITE 3611 ATLANTA, GA 30339 MOLLY BURNS 0 ASSOCIATE 0 1 00 5 LAKE FOREST COURT GREENSBORO, NC 27408 MAGGIE BURNS ASSOCIATE 0 1 00 5 LAKE FOREST COURT GREENSBORO, NC 27408 BEAU BURNS ASSOCIATE 0 0 1 00 5 LAKE FOREST COURT GREENSBORO, NC 27408 JAKE BURNS ASSOCIATE 0 0 1 00 5 LAKE FOREST COURT GREENSBORO, NC 27408 PEGGY BURNS ASSOCIATE 0 0 1 00 402 SANDFIDDLER COURT MOREHEAD CITY, NC 28557

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor	Геограни					
a Paid during the year							
FRIENDS OF SPOONERS CREEK ASSOICATION 408 SANDFIDDLER CT MOREHEAD CITY, NC 28557	NONE	PC	GENERAL CHARITABLE PURPOSE	250			
JAMES 123 INC 402 SANDFIDDLER MOREHEAD CITY, NC 28557	NONE	PC	GENERAL CHARITABLE PURPOSE	5,000			
WAKE FOREST UNIVERSITY 1834 WAKE FOREST RD WINSTONSALEM, NC 27106	NONE	PC	GENERAL CHARITABLE PURPOSE	4,000			
W F U DEACON CLUB 499 DEACON BLVD WINSTONSALEM, NC 27105	NONE	PC	GENERAL CHARITABLE PURPOSE	3,200			
HIGH MOUNTAIN INSTITUTE 531 COUNTY RD 5A LEADVILLE, CO 80461	NONE	PC	GENERAL CHARITABLE PURPOSE	1,000			
EPISCOPAL HIGH SCHOOL 1200 N QUAKER LANE GREENBORO, NC 22302	NONE	PC	GENERAL CHARITABLE PURPOSE	2,750			
CHURCH OF THE INCARNATION 530 MAIN ST HIGHLANDS, NC 28741	NONE	PC	GENERAL CHARITABLE PURPOSE	1,000			
GDS ANNUAL FUND 5401 LAWNDALE DRIVE GREENBORO, NC 27455	NONE	PC	GENERAL CHARITABLE PURPOSE	1,500			
WASHINGTON & LEE UNIVERSITY 204 W WASHINGTON ST LEXINGTON, VA 24450	NONE	PC	GENERAL CHARITABLE PURPOSE	1,000			
GDS CAPITAL CAMPAIGN 5401 LAWNDALE DRIVE GREENBORO, NC 27455	NONE	PC	GENERAL CHARITABLE PURPOSE	2,300			
CRYSTAL COAST HOSPICE HOUSE 100 BIG ROCK WEIGH PO BOX 640 NEWPORT, NC 28570	NONE	PC	GENERAL CHARITABLE PURPOSE	5,000			
SPIRIT FOR MISSION 292 MCCABE ROAD NEWPORT, NC 28570	NONE	PC	GENERAL CHARITABLE PURPOSE	3,000			
CRYSTAL COAST HOSPICE HOUSE 100 BIG ROCK WEIGH PO BOX 640 NEWPORT, NC 28570	NONE	PC	GENERAL CHARITABLE PURPOSE	5,000			
MILLENNIUM RELIEF AND DEVELOPMENT 5116 BISSONNET 358 BELLAIRE, TX 77401	NONE	PC	GENERAL CHARITABLE PURPOSE	1,100			
UNCG FRIENDS OF THE LIBRARY PO BOX 26170 GREENSBORO, NC 27402	NONE	PC	GENERAL CHARITABLE PURPOSE	1,250			

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Pay						
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount		
a Paid during the year	or substantial contributor					
ENGINEERING MINISTRIES INTERNATIONAL 130 E KIOWA ST 200 COLORADO SPRINGS, CO 80903	NONE	PC	GENERAL CHARITABLE PURPOSE	750		
WAKE FOREST UNIVERSITY 1834 WAKE FOREST RD WINSTONSALEM, NC 27106	NONE	PC	GENERAL CHARITABLE PURPOSE	750		
CRU 100 LAKE HART DRIVE ORLANDO, FL 32832	NONE	PC	GENERAL CHARITABLE PURPOSE	500		
NOLS ANNUAL FUND 284 LINCOLN ST LANDER, WY 82520	NONE	PC	GENERAL CHARITABLE PURPOSE	400		
GREENSBORO DOWNTOWN GREENWAY CHURCH 203 S CHURCH ST GREENSBORO, NC 27401	NONE	PC	GENERAL CHARITABLE PURPOSE	2,000		
CRYSTAL COAST TEEN CBS 790 STOUT ROAD COLORADO SPRINGS, CO 80921	NONE	PC	GENERAL CHARITABLE PURPOSE	3,000		
FIRST STEP TO FREEDOM MINISTRIES 11434 HIGHWAY 27 SUMMERVILLE, GA 30747	NONE	PC	GENERAL CHARITABLE PURPOSE	5,000		
PEACHTREE ROAD UMC 3180 PEACHTREE ROAD ATLANTA, GA 30305	NONE	PC	GENERAL CHARITABLE PURPOSE	5,000		
VIRGINIA EPISCOPAL DEVELOPMENT 400 VES RD LYNCHBURG, VA 24503	NONE	PC	GENERAL CHARITABLE PURPOSE	5,000		
SIGMA NU EDUCATIONAL FOUNDATION 9 NORTH LEWIS ST LEXINGTON, VA 24450	NONE	PC	GENERAL CHARITABLE PURPOSE	3,000		
PEACHTREE ROAD UMC 3180 PEACHTREE ROAD ATLANTA, GA 30305	NONE	PC	GENERAL CHARITABLE PURPOSE	1,000		
NASHVILLE GO RED FOR WOMEN 1818 PATTERSON ST NASHVILLE, TN 37203	NONE	PC	GENERAL CHARITABLE PURPOSE	1,000		
WOODWARD ACADEMY 1662 W RUGBY AVE COLLEGE PARK, GA 30337	NONE	PC	GENERAL CHARITABLE PURPOSE	1,000		
CALIFORNIA FIRE FUND PO BOX 944246 SACRAMENTO, CA 94244	NONE	PC	GENERAL CHARITABLE PURPOSE	2,000		
COLUMBIA ACADEMY 1101 W 7TH ST COLUMBIA, TN 38401	NONE	PC	GENERAL CHARITABLE PURPOSE	2,500		
Total				153,450		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				Payment
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
BRIDGEVILLE COMMUNITY CENTER 38717 KNEELAND ROAD BRIDGEVILLE, CA 95526	NONE	PC	GENERAL CHARITABLE PURPOSE	1,000
MARC FOUNDATION 2701 S LINDBERGH ST LOUIS, MS 63131	NONE	PC	GENERAL CHARITABLE PURPOSE	9,000
CANINE CELLMATES 901 RICE STREET NW ATLANTA, GA 30318	NONE	PC	GENERAL CHARITABLE PURPOSE	1,000
UNIVERSITY OF THE SOUTH 735 UNIVERSITY AVE SEWANEE, TN 37383	NONE	PC	GENERAL CHARITABLE PURPOSE	1,000
UNIVERSITY OF THE SOUTH 735 UNIVERSITY AVE SEWANEE, TN 37383	NONE	PC	GENERAL CHARITABLE PURPOSE	1,000
CAROLINAEAST FOUNDATION 233 MIDDLE ST NEW BERN, NC 28560	NONE	PC	GENERAL CHARITABLE PURPOSE	5,000
JAMES 123 INC 402 SANDFIDDLER MOREHEAD CITY, NC 28557	NONE	PC	GENERAL CHARITABLE PURPOSE	5,000
NC AQUARIUM SOCIETY 374 AIRPORT ROAD MANTEO, NC 27954	NONE	PC	GENERAL CHARITABLE PURPOSE	5,000
WESTOVER CHURCH 505 MUIRS CHAPEL ROAD GREENSBORO, NC 27410	NONE	PC	GENERAL CHARITABLE PURPOSE	9,000
YOUNG LIFE GREENSBORO 4713 KINGSWOOD DR GREENSBORO, NC 27410	NONE	PC	GENERAL CHARITABLE PURPOSE	7,500
CAPERNAUM MINISTRIES 3500 CANAL RD LAKE WALES, FL 33898	NONE	PC	GENERAL CHARITABLE PURPOSE	3,200
WESTOVER CHURCH 505 MUIRS CHAPEL ROAD GREENSBORO, NC 27410	NONE	PC	GENERAL CHARITABLE PURPOSE	3,000
THE MCCALLIE SCHOOL 500 DODDS AVE CHATTANOOGA, TN 37404	NONE	PC	GENERAL CHARITABLE PURPOSE	3,000
X3 FOUNDATION INC 1870 THE EXCHANGE SUITE 240 ATLANTA, GA 30339	NONE	PC	GENERAL CHARITABLE PURPOSE	5,000
FEED MY LAMBS INC 560 FAIRGROUNDS ST N MARIETTA, GA 30060	NONE	PC	GENERAL CHARITABLE PURPOSE	2,500

Total . 3a

Form 990PF Part XV Line 3 - Grants 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				
JAMES 123 INC 402 SANDFIDDLER MOREHEAD CITY, NC 28557	NONE	PC	GENERAL CHARITABLE PURPOSE	3,000
UNITED WAY OF COASTAL CAROLINA 601 BROAD STREET NEW BERN, NC 28563	NONE	PC	GENERAL CHARITABLE PURPOSE	2,000
ALL SAINTS CHURCH 4124 FARRINGTON RD DURHAM, NC 27707	NONE	PC	GENERAL CHARITABLE PURPOSE	2,000
CRU 100 LAKE HART DRIVE ORLANDO, FL 32832	NONE	PC	GENERAL CHARITABLE PURPOSE	1,500
BROAD STREET CLINIC 534 N 35TH STREET SUITE K MOREHEAD CITY, NC 28557	NONE	PC	GENERAL CHARITABLE PURPOSE	1,000
CANINE CELLMATES 901 RICE STREET NW ATLANTA, GA 30318	NONE	PC	GENERAL CHARITABLE PURPOSE	3,500
FIRST STEP TO FREEDOM MINISTRIES 11434 HIGHWAY 27 SUMMERVILLE, GA 30747	NONE	PC	GENERAL CHARITABLE PURPOSE	1,000
WESTSIDE COMMUNITY IMPROVEMENT ASSOCIATION 1000 B STREET EUREKA, CA 95501	NONE	PC	GENERAL CHARITABLE PURPOSE	2,000
YOUNG LIFE INTERNATIONAL PO BOX 520 COLORADO SPRINGS, CO 80901	NONE	PC	GENERAL CHARITABLE PURPOSE	1,000
HOPE ACADEMY 7655 BRUTON SMITH BLVD CONCORD, NC 28027	NONE	PC	GENERAL CHARITABLE PURPOSE	2,000
SINGLE PURPOSE MINISTRIES PO BOX 261 JAMESTOWN, NC 27282	NONE	PC	GENERAL CHARITABLE PURPOSE	1,000
THE CROSSNORE SCHOOL 100 D A R DR CROSSNORE, NC 28616	NONE	PC	GENERAL CHARITABLE PURPOSE	2,000

Total . 3a

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491135044137 TY 2016 Applied to Prior Year Election Name: LOOMIS FOUNDATION INC **EIN:** 56-1849009 Election: THE FOUNDATION HEREBY ELECTIONS TO APPLY \$12,083 OF THE EXCESS DISTRIBUTION AGAINST THE UNDISTRIBUTED INCOME FROM THE TAX YEAR ENDING DECEMBER 31, 2012.

Y 2016 Investments (Corporate Stock Sched	ule
	•	

Name: LOOMIS FOUNDATION INC

ETN: 56 1940000

 EIN: 30-1649009	
Name of Stock	En

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

1,366,857

1,542,885

CORPORATE STOCKS

nd of Year Book Value

End of Year Fair Market Value

DLN: 93491135044137

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491135044137		
TY 2016 Investments Government Obligations Schedule					
Name:	LOOMIS FOUN	IDATION INC			
EIN:	56-1849009				
US Government Securities - End of Year Book Value:		0			
US Government Securities - End of Year Fair Market Value:		0			
State & Local Government Securities - End of Year Book Value:		0			
State & Local Government Securities - End of Year Fair Market Value:		0			

TY 2016 Investments - Other Schedule	
Name: LOOMIS FOUNDATION INC	

DLN: 93491135044137

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

EIN: 56-1849009				
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
EXCHANGE TRADED FUNDS	AT COST	2 901 899	2 807 640	

EC 404000

Description

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

Name: LOOMIS FOUNDATION INC.

DIVIDENDS RECEIVABLE

EIN: 56-1849009

Other Assets Schedule

Beginning of Year -

Book Value

1.895

End of Year - Book

Value

End of Year - Fair

DLN: 93491135044137

1,966

Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 934911350441	37
TY 2016 Other Decreases Scho	edule		
Name:	LOOMIS FOUNDATION INC		
EIN:	56-1849009		
De	escription	Amount	
COST BASIS ADJUSTMENT		20)9

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	,	DLN	: 93491135044137
TY 2016 Other Expenses Schedule				
Name:	: LOOMIS FOUND	DATION INC		
EIN:	: 56-1849009			
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PASS THROUGH FROM ENERGY TRANSFER PARTNERS	4	0		4
PASS THROUGH FROM BUCKEYE	4	0		4
PASS THROUGH FROM PLAINS ALL AMERICAN	1	0		1

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491135044137

TY 2016 Other Income Schedule

Name: LOOMIS FOUNDATION INC

EIN: 56-1849009

Other Income Schedule				
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income	
ROYALTY INCOME	7	7	7	
OTHER INCOME	31	31	31	
PASS THROUGH BLACK STONE GROUP	294	294	294	
DASS THROUGH ENERGY TRANSFER DARTNERS	12	1.2	1.2	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 934911350441
TY 2016 Other Increases School	edule	
Namo	LOOMIS FOUNDATION INC	
Name:	LOOMIS FOUNDATION INC	
EIN:	56-1849009	
De	escription	Amount
BOOK TO TAX DIFFERENCE ON MLP'S		26,85

efile GRAPHIC print - DO NOT PROCI	ESS As Filed Data	-	DL	N: 93491135044137
TY 2016 Other Professional Fees Schedule				
Name: LOOMIS FOUNDATION INC				
EIN: 56-1849009				
Category	Amount	Net Investment	Adjusted Net	Disbursements
Category	Ainount	Met Investment	Aujusteu Net	Disbuisements

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
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20,691

6,897

27,589

MANAGEMENT & ADVISORY FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491135044137
TY 2016 Taxes Schedule				_
	: LOOMIS FOUR: 56-1849009	JNDATION INC		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES	2,977	2,977		0

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491135044137				
Schedule B (Form 990, 990-EZ,	Schedule of Contributors	OMB No 1545-0047		
or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions i www.irs.gov/form990 .	2016		
Name of the organizat		ployer identification number		
	56-	-1849009		
Organization type (che	eck 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	501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation			
•	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions r property) from any one contributor Complete Parts I and II See instructions for dete	• • • • • • • • • • • • • • • • • • • •		
Special Rules				
under sections : received from a	tion described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $33^13\%$ supp $509(a)(1)$ and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 990-EZ), Part II may one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) are 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II	I, line 13, 16a, or 16b, and that		
during the year,	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received total contributions of more than \$1,000 exclusively for religious, charitable, scientific, 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 received contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions that were received during the year for an <i>exclusive</i> complete any of the parts unless the General Rule applies to this organization becauselie, etc., contributions totaling \$5,000 or more during the year	itions totaled more than \$1,000 usively religious, charitable, etc, use it received nonexclusively		
990-EZ, or 990-PF), bu	on that is not covered by the General Rule and/or the Special Rules does not file Sche t it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Sch	its		
For Paperwork Reduction for Form 990, 990-EZ, or 9		(Form 990, 990-EZ, or 990-PF) (2016)		

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Page 2 Name of organization Employer identification number LOOMIS FOUNDATION INC 56-1849009 Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (d) (a) (c) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution DOROTHY BURNS Person **Payroll** 402 SANDFIDDLER COURT \$ 250,000 Noncash MOREHEAD CITY, NC 28557 (Complete Part II for noncash contributions) (b) (c) (d) (a) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (c) (d) (a) (b) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (c) (a) (b) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (c) (d) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **Payroll**

(Complete Part II for noncash

Noncash

\$

Schedule B (Form 99	0, 990-EZ, or 990-PF) (2016)		Page 3	
Name of organization LOOMIS FOUNDATION INC		Employer identification number		
LOGINISTOONDATION	INC	56-18	349009	
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 LOOMIS FOUNDATIO			Employer identification number 56-1849009
than \$1, organiz the year	,000 for the year from any one contributor	r. Complete columns (a) thro of exclusively religious, chari ctions.) ▶ \$	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	t Relationship of transferor to transferee
(a)	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
No.from Part I			
	Transferee's name, address, and	(e) Transfer of gift	t 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	(e) Transfer of gift	t 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	(e) Transfer of gift	t Relationship of transferor to transferee
			Schedule B (Form 990, 990-EZ, or 990-PF) (2016)