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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2016 Open to Public Inspection

A	For th	e 2016 c	alendar year, or tax year beginning , and ending		
В	Check if a	pplicable	C Name of organization D	Employe	r (dentification number
	Address o	hange	SNAPPING SHOALS ELECTRIC TRUST		
$\overline{}$	Name cha	2000	Doing business as ATTN: FRANK ASKEW	58-2	058035
\vdash			Number and street (or P O box if mail is not delivered to street address) Room/suite E	Telephon	e number
	Initial retu			<u> 170-</u>	786-3484
	Final retui		City or town, state or province, country, and ZIP or foreign postal code		
一	Amended			Gross rec	eipts \$ 363,611
믬			F Name and address of principal officer		
	Applicatio	n pending	TOMMY MOSELEY	eturn for s	ubordinates? Yes X No
			14750 BROWN BRIDGE ROAD H(b) Are all subords	nates incl	uded? Yes No
			COVINGTON GA 30015 If "No," atta	ach a list	(see instructions)
$\overline{}$	Tax-exer	npt status	X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527		
J	Website		H(c) Group exempts	on numbe	ar 🕨
· K		organization	X Corporation Trust Association Other ► L Year of formation 195		M State of legal domicile GA
Ť	Part I		immary		in clate of regal dofficile
·	$\overline{}$		scribe the organization's mission or most significant activities.		
- -	1	•	CCUMULATE AND DISTRIBUTE FUNDS FOR CHARITABLE PURPOSES IN THE	SER	VTCR
ဋ	1		OF SNAPPING SHOALS ELECTRIC MEMBERSHIP CORPORATION.		
e					
J §	١ , ,	Chook the	is box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets	_	
ී	2			1 1	10
· /05	3 1		of voting members of the governing body (Part VI, line 1a)	3	10
ق. ۔	4 [of independent voting members of the governing body (Part VI, line 1b)	4	10
Activities & Governance	5		nber of individuals employed in calendar year 2016 (Part V, line 2a)	5	0
Ä	6		nber of volunteers (estimate if necessary)	6	0
بر د پ			elated business revenue from Part VIII, column (C), line 12	7a	0
_	<u> </u>	Net unrel	ated business taxable income from Form 990-T, line 34	7b	0
		^~~***	ions and grants (Part VIII, line 1h)	975	Current Year 363,611
e			ions and grants (Part VIII, line 1h)	3/3 	
Revenue	9 1	•	service revenue (Part VIII, line 2g) AUG 3 1 2017		0
æ	10 1				0
			enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	075	262 611
_			enue – add lines 8 through 11 (must equal Part VIII-, column (A); line, 12) T 317,		363,611
			and similar amounts paid (Part IX, column (A), lines 1–3)	394	391,550
		•	paid to or for members (Part IX, column (A), line 4)		0
xpenses	15 5		other compensation, employee benefits (Part IX, column (A), lines 5–10)	\longrightarrow	0
en S	16a F		nal fundraising fees (Part IX, column (A), line 11e)		0
Ž			draising expenses (Part IX, column (D), line 25) ▶ 0		
Ш		·-		241	1,869
	18 7	Total exp	enses Add lines 13–17 (must equal Part IX, column (A), line 25)		393,419
	19 F	Revenue	less expenses Subtract line 18 from line 12 -60,		-29,808
Net Assets or	<u> </u>		Beginning of Current		End of Year
sset	E 20		ets (Part X, line 16) 103,	848	74,018
¥ g	21		lities (Part X, line 26)	~~	74 070
			s or fund balances. Subtract line 21 from line 20 103,	826	74,018
	Part II		gnature Block		
U	Inder per	nalties of p	perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of	of my kno	owledge and belief, it is
tr	ue, corre	ect, and co	omplete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge		
		▶ ⊻	4. 1/1/1/11	V	8 28 17
Sig	gn	S	andture of officer	Date	
He	ere	1	J. 1. Mosely, Chairman		
_		T	ype or print name and title		
		Print/Type	preparer's name Preparer's signature AUG 0 4	2017	if PTIN
Pai	id	H. TER	RELL MCMICHAEL JR. AUG V 1	self-emp	ployed P01259982
Pre	parer	Firm's nar	MCNAIR, MCLEMORE, MIDDLEBROOKS & CO, LLC Firm's	EIN	58-1094351
Use	e Only	\	POST OFFICE BOX ONE		
		Firm's add	MA GOVE GR 21202 0001	e no	478-746-6277
Ma	v the IR		s this return with the preparer shown above? (see instructions)		X Yes No
			ction Act Notice, see the separate instructions.		Form 990 (2016)
DAA					••• (2010)

orm	990 (2016)	SNAPPING SHOALS	ELECTRIC TRUST	58-2058035	, Page
_	rt III	Statement of Program S	ervice Accomplishments		
			ains a response or note to any	/ line in this Part III	
T	O ACCI				THE SERVICE
2	Did the or	nanization undertake any signific	cant program services during the year	r which were not listed on the	
_		990 or 990-EZ?	and programs continue canning and year		Yes X No
		escribe these new services on S			
3		ganization cease conducting, or	make significant changes in how it co	onducts, any program	Yes X No
	services?	escribe these changes on Scheo	dule O		Yes A NO
4	Describe t expenses.	he organization's program servic Section 501(c)(3) and 501(c)(4)	ce accomplishments for each of its th organizations are required to report	ree largest program services, as measured the amount of grants and allocations to othe	•
	the total e	xpenses, and revenue, if any, fo	r each program service reported		
T			393,419 including grants of PRIBUTE FUNDS FOR COST ELECTRIC MEMBERS	CHARITABLE PURPOSES IN	
4b	(Code:) (Expenses \$	including grants of	f\$) (Revenue	\$
4c	(Code:) (Expenses \$	including grants of	f\$) (Revenue \$	<u> </u>
	,	,, ,		, ,	,
					····
4d	-	ram services (Describe in Sche			
	(Expenses		including grants of \$) (Revenue \$	
4e	ı otal prog	ram service expenses	393,419		Form 990 (2016)

Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	}		l
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	ł		ı
	complete Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9_		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	i		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable		1	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		<u> </u>
b				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С			İ	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	-			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u> </u>
e	g ,	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		·	77
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		<u> </u>
2a		1		
L	Schedule D, Parts XI and XII	12a	<u> </u>	
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If	406	- 1	v
12	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X
13	Did the organization maintain an office, employees, or agents outside of the United States?	13	-+	X
14a	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		
b	fundraising, business, investment, and program service activities outside the United States, or aggregate	1	ſ	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		_
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	-	X
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	-'` -	-+	
. •	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	-	x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	'	-+	
•	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	1	X
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		+	
_	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	- 1	x
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			- -
-	If "Yes," complete Schedule G, Part III	19	ĺ	x

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	T	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X]
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	x	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			İ
	employees? If "Yes," complete Schedule J	23		X
24a		_		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	1		
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	The state of the s			
	to defease any tax-exempt bonds?	24c	1	1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	i	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b	j	X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			1
	disqualified persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	1		
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		_ <u>x</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		_ <u>x</u> _
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		_X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		<u>X</u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		I	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		<u>X</u>
88	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		- 1	
	19? Note, All Form 990 filers are required to complete Schedule O	38	x	

Pa	Int V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			П
	Crieck if Scriedule O contains a response of note to any line in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		163	1,40
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	7		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	7 .		
	reportable gaming (gambling) winnings to prize winners?	_1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	_		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	1 1		1
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	1 1		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country	li		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	- {		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	1-55	-	
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	1 1		
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1 1		
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	┥╻╽		4.5
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	\dashv	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	-+	X
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	 ''' 		- 41
-	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	ľ	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	1	ĺ	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	4	}	
11	Section 501(c)(12) organizations. Enter.			
а	Gross income from members or shareholders	-	ĺ	
ь	Gross income from other sources (Do not net amounts due or paid to other sources]]	1	
	against amounts due or received from them.)	١١		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 2. Alica 501(2)(20) available to a paragin beauty in a para	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	122		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
ь	Enter the amount of reserves the organization is required to maintain by the states in which]		
	the organization is licensed to issue qualified health plans 13b		-	
С	Enter the amount of reserves on hand	-		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	\neg	

58-2058035 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 10 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 10 Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? X 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b X Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. The governing body? X 8a X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code., Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters. affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No." go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done X 12c 13 Did the organization have a written whistleblower policy? 13 X 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ GA 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website X Upon request Own website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: 14750 BROWN BRIDGE ROAD SNAPPING SHOALS EMC

COVINGTON

770-786-6484

GA 30015

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees; officers; key employees; highest compensated employees, and former such persons

 $|\mathbf{X}|$ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for	bo: off	k, unle	Pos check ess pe nd a d	rson i	than o	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(***2 1033 **********************************	organization and related organizations
(1) TOMMY MOSELEY										· · · · · · · · · · · · · · · · · · ·
	0.00	1			1	\				
CHAIRMAN	0.00	X		X			<u> </u>	0	0	0
(2) AARON VARNER										
	0.00				i] [İ			
VICE CHAIRMAN	0.00	X	ļ	X				0	0	0
(3) DON GARRARD		j								
	0.00								_	
SECRETARY/TREASURER	0.00	X		X				0	0	0
(4) MIRIAM AVERY										
	0.00									
DIRECTOR	0.00	X		<u> </u>		\vdash	<u> </u>	0	0	0
(5) PAM VINING	0.00						1			
D-T-EGMOD	0.00	J.,]				•
DIRECTOR	0.00	X					_	0	0	0
(6) JEFF WIGINGTON	0.00					li				
DTDEGMOD	0.00	x				1	1	o	o	•
DIRECTOR (7) BETH MILLER	0.00	 ≏			_	\vdash	 	<u> </u>		0
(/) DEIN MILLER	0.00									
DIRECTOR	0.00	x						o	o	0
(8) RANDALL MEADOWS	0.00	 ^			\vdash	\vdash	\vdash			
(6) KANDALL MEADOND	0.00									
DIRECTOR	0.00	x						0	o	0
(9) BEN MAINOR		==					-			
(0) 2211 1211011	0.00									
DIRECTOR	0.00	x						0	o	0
(10) ALBERT WALKER										
(,	0.00									
DIRECTOR	0.00	x						o	0	0
(11)										<u>_</u>
	<u></u>									

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6609035 Form 990 (2016) SNAPPING SHOALS ELECTRIC TRUST 58-2058035 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) (C) Unrelated (B) Related or (D) Revenue Total revenue exempt function business revenue excluded from tax under sections revenue 512-514 1a Federated campaigns 1a 1b **b** Membership dues c Fundraising events 1c d Related organizations 1d 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 363,611 g Noncash contributions included in lines 1a-1f 363,611 Total. Add lines 1a-1f Program Service Revenue **Busn Code** b d f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6a Gross rents **b** Less rental exps c Rental inc or (loss)

(II) Other

Busn Code

b Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 þ b Less: direct expenses c Net income or (loss) from fundraising events

d Net rental income or (loss)

(i) Securities

b

Gross amount from

sales of assets other than inventor

9a Gross income from gaming activities See Part IV, line 19 b b Less: direct expenses c Net income or (loss) from gaming activities

c Net income or (loss) from sales of inventory Miscellaneous Revenue

10a Gross sales of inventory, less returns and allowances b Less. cost of goods sold

11a ь

> All other revenue Total. Add lines 11a-11d Total revenue. See instructions

363,611

Other Revenue

Part IX Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must on the Check of Schedule O contains a responsition of the Check of Check o			mpiete column (A).	
 Do n	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	Sb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments See Part IV, line 21	193,347	193,347		<u> </u>
2	Grants and other assistance to domestic				
	ındıvıduals. See Part IV, line 22	198,203	198,203		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	l l			
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members			<u> </u>	
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B) Other salaries and wages		·		
7 8	Pension plan accruals and contributions (include				
0	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column			,	
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion			· · · · · · · · · · · · · · · · · · ·	ļ
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17 18	Travel Payments of travel or entertainment expenses	_ 			
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest			· · · · · · · · · · · · · · · · · · ·	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				<u> </u>
	(A) amount, list line 24e expenses on Schedule O)		1 5 5 5		
а	ADMINISTRATIVE EXPENSE	1,869	1,869		
b					
C					
ď	All others are an an				 _
9	All other expenses	393,419	393,419	0	
<u>25</u> 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	333,413	333,413		
40	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

32 Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

Page 11 Form 990 (2016) Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 78,237 48,473 1 Cash-non-interest bearing Savings and temporary cash investments 2 3 Pledges and grants receivable, net 25,589 25,545 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 7 Notes and loans receivable, net Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or 10a other basis. Complete Part VI of Schedule D 10b b Less: accumulated depreciation 10c 11 investments—publicly traded securities 11 12 Investments—other securities See Part IV, line 11 12 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 15 Other assets. See Part IV, line 11 103,826 74,018 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 0 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 103,826 74,018 Unrestricted net assets 27 28 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund

> 74,018 Form 990 (2016)

74,018

32

33

103,826

103,826

orm	990 (2016) SNAPPING SHOALS ELECTRIC TRUST 58-2058035			· Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	63,	611
2	Total expenses (must equal Part IX, column (A), line 25)	2	3:	93,	419
3	Revenue less expenses. Subtract line 2 from line 1	3	- ;	29,	808
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1.0	03,	826
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7		_	
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	•	74,	018
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		_		ļ
	Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both		1 1		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both.				
	X Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			\neg	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Forn	990	(2016)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasusy Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

OMB No 1545-0047

Name of the organization

SNAPPING SHOALS ELECTRIC TRUST

Employer identification number

58-2058035 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions) Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with. its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of listed in your governing organization (described on lines 1-10 support (see other support (see above (see instructions)) document? instructions) instructions) Yes (A) (B) (C) (D) (E)

58-2058035

Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	386,956	405,892	324,639	317,875	363,611	1,798,973
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	386,956	405,892	324,639	317,875	363,611	1,798,973
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						1,798,973
	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	386,956	405,892	324,639	317,875	363,611	1,798,973
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10		. <u></u>				1,798,973
12	Gross receipts from related activities, etc	•				12	
13	First five years. If the Form 990 is for the	•	, second, third, fou	irth, or fifth tax yea	r as a section 501	(c)(3)	
	organization, check this box and stop her						
	tion C. Computation of Public Su						
14	Public support percentage for 2016 (line 6		•	n (f))		14	100.00%
15	Public support percentage from 2015 Scho			10 and line 44 is 01	0.4/00/	15	100.00%
16a	33 1/3% support test—2016. If the organ				3 1/3% or more, c	neck this	▶ 😈
b	box and stop here. The organization quali 33 1/3% support test—2015. If the organi	· · · · · · · · · · · · · · · · · · ·	-		5 to 22 1/29/ or mo	aro obook	▶ [X]
U	this box and stop here . The organization of				7 15 33 1/3 /6 01 1110	ire, check	
17a	10%-facts-and-circumstances test—201				a or 16h and line	14 19	
	10% or more, and if the organization meet	_					
	Part VI how the organization meets the "fa				•		
	organization						▶ □
b	10%-facts-and-circumstances test-201	5. If the organization	on did not check a	box on line 13, 16a	a, 16b, or 17a, and	line	- 🗀
	15 is 10% or more, and if the organization	•					
	Explain in Part VI how the organization me				-	blicly	
	supported organization			-	•	-	
18	Private foundation. If the organization did	d not check a box o	n line 13, 16a, 16t	o, 17a, or 17b, ched	ck this box and se	е	لب
	instructions						▶ □
		<u> </u>				Sabadula A (Farm 00	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to	o qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)	

Sec	tion A. Public Support							
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 20°	16	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")			\- \- \- \- \- \- \- \-	(.,,	(3, 2		(i) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	<u></u>						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
С	Add lines 7a and 7b					<u> </u>		
8	Public support. (Subtract line 7c from line 6.)							
	tion B. Total Support			-				
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 201	6	(f) Total
9	Amounts from line 6	·						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
С	Add lines 10a and 10b							
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)							
13	Total support. (Add lines 9, 10c, 11,						- [
4.4	and 12)	orgonia-tia-ti-ti	t appoint the state of			1(-)(5)		
14	First five years. If the Form 990 is for the organization, check this box and stop here		t, secona, tnira, to	urtn, or tirtn tax yea	ar as a section 50°	1(c)(3)		▶ □
Sec	tion C. Computation of Public Su		tage					
15	Public support percentage for 2016 (line 8,	 		nn (f))			15	%
16	Public support percentage from 2015 Sche	* *	=				16	%
Sec	tion D. Computation of Investme	nt Income Pe	rcentage					
17	Investment income percentage for 2016 (li	ne 10c, column (f)	divided by line 13	s, column (f))		-	17	%
18	Investment income percentage from 2015					l	18	%
19a	33 1/3% support tests—2016. If the organ							_
	17 is not more than 33 1/3%, check this bo		-	•				▶ □
b	33 1/3% support tests—2015. If the organ						and	. □
20	line 18 is not more than 33 1/3%, check th Private foundation . If the organization did			•	•	•		
<u>.</u>	Frivate foundation. If the organization did	HOLCHECK & DOX (on line 14, 19a, or	190, CHECK THIS DO	x and see instruct	ions		

58-2058035

Part IV

Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B, If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section	A. All	Suppo	orting	Organiza	tions

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer За (b) and (c) below
- Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and b satisfied the public support tests under section 509(a)(2)? If "Yes." describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- Was any supported organization not organized in the United States ("foreign supported organization")? If 4a "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 5a answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action: (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- Substitutions only. Was the substitution the result of an event beyond the organization's control? C
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which b the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
- Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	l		
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	1		
	3b		
	3c		
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	4b		_
	4c		
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	10a		
	10b		
A (Fo	rm 990	or 990-E	Z) 2016

	it iv Supporting Organizations (Continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		1	
b		11a		+
c		11b		+
	tion B. Type I Supporting Organizations	11c	<u> </u>	٠
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		1	1
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		Į.	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			1
	controlled the organization's activities If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported		ł	1
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	1		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		ļ	
Cool	supervised, or controlled the supporting organization.	2	<u>_</u> .	<u></u>
Seci	tion C. Type II Supporting Organizations		Γ	_
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	İ		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
Sect	the supported organization(s). tion D. All Type III Supporting Organizations	1	L	L
	non 2.7 Am 1 ypo in oupporting organizations		Yes	Na
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		res	No
-	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			ŀ
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		•
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	1	ŀ	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		L
	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a	The organization satisfied the Activities Test Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruc	tions)		
2	Activities Test. Answer (a) and (b) below.	1		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	$\overline{}$	Yes	No
_	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,]		
	how the organization was responsive to those supported organizations, and how the organization determined	1		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			-
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		Į	
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		
ι Α Α	A			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	<u>janizat</u>	ions	
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on N	lov. 20, 1	970 (explain in Part VI).	See
instructions. All other Type III non-functionally integrated supporting organizations mu	ust comp	lete Sections A through E	<u> </u>
Section A - Adjusted Net Income	I	(A) Pnor Year	(B) Current Year
		(A) I noi Teal	(optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5_		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or	1 1		
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year
		(A) Thor real	(optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year).			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI).	1		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	1 1		
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally integrated	Type III	supporting organization (see

Schedule A (Form 990 or 990-EZ) 2016

instructions).

. Page **7**

<u>Par</u>	t V Type III Non-Functionally Integrated 509(a)(3)	Supporting Organiza	tions (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purp	oses	·	
2	Amounts paid to perform activity that directly furthers exempt purpos	es of supported		<u> </u>
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of sup	ported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organi	zation is responsive		
	(provide details in Part VI). See instructions	·		
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
	,		Pre-2016	Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			
	Underdistributions, if any, for years prior to 2016			
2	(reasonable cause required-explain in Part VI) See			
	instructions.			
3	Excess distributions carryover, if any, to 2016			
а				
b				
С	From 2013	<u> </u>		
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount			
i	Carryover from 2011 not applied (see instructions)			
i	Remainder Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from			
	Section D, line 7 \$			
а	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
С	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2016, if			
	any Subtract lines 3g and 4a from line 2. For result	!		
	greater than zero, explain in Part VI See instructions			
6	Remaining underdistributions for 2016. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in	i		
	Part VI See instructions			
7	Excess distributions carryover to 2017. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а				
b	Excess from 2013			
С	Excess from 2014			
d	Excess from 2015			
е	Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

SNAPPING SHOALS ELECTRIC TRUST

58-2058035

Page 8

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

OMB No 1545-0047

Name of the organization

Employer identification number

Inspection

SI	NAPPING SHOALS ELECTRIC TRUST		58-2	058035
Pa	rt I Organizations Maintaining Donor Advised Fu Complete if the organization answered "Yes" on	unds or Other Similar Funds or Ac Form 990, Part IV, line 6.	count	s.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year			·
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing the	at the assets held in donor advised		
3	funds are the organization's property, subject to the organization's exc			Yes No
6	Did the organization inform all grantees, donors, and donor advisors in			
Ü	only for charitable purposes and not for the benefit of the donor or dor			
	conferring impermissible private benefit?	tor devicer, or for any earlest purposes		Yes No
Pa	rt II Conservation Easements.	5 000 B 11/1 7		
	Complete if the organization answered "Yes" on			
1	Purpose(s) of conservation easements held by the organization (chec			
	Preservation of land for public use (e g , recreation or education)	Preservation of a historically impor		
	Protection of natural habitat	Preservation of a certified historic s	structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified cons	ervation contribution in the form of a conserv		
	easement on the last day of the tax year		1	Held at the End of the Tax Yea
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easements		2b	
С	Number of conservation easements on a certified historic structure in		2c	
d	Number of conservation easements included in (c) acquired after 8/17	7/06, and not on a	1 !	
	historic structure listed in the National Register	A constant and the state of the	2d	A1
3	Number of conservation easements modified, transferred, released, e	extinguished, or terminated by the organization	n auring	the
	tax year	located •		
4	Number of states where property subject to conservation easement is			
5	Does the organization have a written policy regarding the periodic mo violations, and enforcement of the conservation easements it holds?	Titloring, inspection, handling of		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling	of violations, and enforcing conservation eas	ements	
Ü	Stan and volunteer hours devoted to monitoring, inspecting, narranny	or viciations, and ornoroning conservation sac		daming the year
7	Amount of expenses incurred in monitoring, inspecting, handling of vi-	olations, and enforcing conservation easeme	ents durir	ng the year
·	> \$	3		5 ,
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(h)(4)(B)(i)		
	and section 170(h)(4)(B)(II)?			Yes No
9	In Part XIII, describe how the organization reports conservation easer	ments in its revenue and expense statement,	and	
	balance sheet, and include, if applicable, the text of the footnote to the	e organization's financial statements that des	scribes ti	ne
	organization's accounting for conservation easements.			
Pa	rt III Organizations Maintaining Collections of Art Complete if the organization answered "Yes" on	t , Historical Treasures, or Other Si Form 990, Part IV, line 8.	imilar <i>i</i>	Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958),	not to report in its revenue statement and ba	lance sh	neet
	works of art, historical treasures, or other similar assets held for public			
	public service, provide, in Part XIII, the text of the footnote to its financial			
b	If the organization elected, as permitted under SFAS 116 (ASC 958),		ce sheet	
	works of art, historical treasures, or other similar assets held for public			
	public service, provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1		>	\$
	(ii) Assets included in Form 990, Part X		>	\$
2	If the organization received or held works of art, historical treasures, or	or other similar assets for financial gain, provi	ide the	
	following amounts required to be reported under SFAS 116 (ASC 958			
а	Revenue included on Form 990, Part VIII, line 1		•	\$
h	Assets included in Form 990, Part X		•	\$

5.8	- 2	Λ	5	Ω	n	3	5

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Part III Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition Loan or exchange programs Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No **Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table Amount c Beginning balance 1c d Additions during the year 1d Distributions during the year 1e 1f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided on Part XIII Part V **Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV. line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back 1a Beginning of year balance **b** Contributions c Net investment earnings, gains, and losses d Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment Permanent endowment c Temporarily restricted endowment The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by Yes No (i) unrelated organizations 3a(i) (ii) related organizations 3a(ii) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b Describe in Part XIII the intended uses of the organization's endowment funds. Land, Buildings, and Equipment. Part Vi Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value (investment) depreciation (other) 1a Land **b** Buildings c Leasehold improvements d Equipment e Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Part VII	Investments—Other Securities. Complete if the organization answered "Yes	s" on Form 990 Part IV line 1	1b. See Form 990 Part X line 12
	(a) Description of security or category	(b) Book value	(c) Method of valuation
	(including name of security)		Cost or end-of-year market value
(1) Financial	derivatives		
(2) Closely-h	eld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
	nn (b) must equal Form 990, Part X, col. (B) line 12) 🕨		
Part VIII	Investments—Program Related.		
	Complete if the organization answered "Ye	s" on Form 990, Part IV, line 1	11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation
			Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 13) ▶		
Part IX	Other Assets. Complete if the organization answered "Ye	s" on Form 990 Part IV line 1	11d See Form 990 Part X line 15
	(a) Descript		(b) Book value
<u>/1\</u>			
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	nn (b) must equal Form 990, Part X, col (B) line 15)		b
Part X	Other Liabilities.		<u> </u>
i ait X	Complete if the organization answered "Ye	s" on Form 990. Part IV. line	11e or 11f. See Form 990. Part X.
	line 25.		
1	(a) Description of liability	(b) Book value	
	I income taxes		
(2)			
(3)			
(4)			
_(5)			
(6)			
_(7)			
(8)			
(9)			
	nn (b) must equal Form 990, Part X, col. (B) line 25.) ▶		
2 Liability for	r uncertain tax positions. In Part XIII, provide the text of	the footnote to the organization's fina	incial statements that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

sche	dule D (Form 990) 2016 SNAPPING SHOALS ELECTRIC TRUS	Τ΄	36-203803	ס ַ	Page 4
P	rt XI Reconciliation of Revenue per Audited Financial Statemer	nts With	Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Pa	rt IV, line	e 12a.		
1	Total revenue, gains, and other support per audited financial statements			1	381,792
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a		1	
þ	Donated services and use of facilities	2b	18,181		
C	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d		(
e	Add lines 2a through 2d			2e	_ 18,181
3	Subtract line 2e from line 1			3	18,181 363,611
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1	ĺ		
а	Investment expenses not included on Form 990, Part VIII, line 7b	<u>4a</u>		ĺ	
b	Other (Describe in Part XIII)	4b			
C	Add lines 4a and 4b	_		4c	
5_	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	363,611
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents Wit	h Expenses per F	leturn.	
	Complete if the organization answered "Yes" on Form 990, Pa	<u>rt IV, line</u>	e 12a.		
1	Total expenses and losses per audited financial statements			1	411,600
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		ì		
а	Donated services and use of facilities	2a	18,181		
b	Prior year adjustments	2b			
¢	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines 2a through 2d			2e	18,181 393,419
3	Subtract line 2e from line 1	. 1		3	<u>393,419</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	}		•	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
C	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5)	393,419

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Part XIII Supplemental Information (continued)

Page 5

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

Part

Part

SNAPPING SHOALS ELECTRIC TRUST

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection OMB No 1545-0047 2016

Employer identification number

58-2058035

å EMERGENCY RELIEF (h) Purpose of grant Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form or assistance X Yes DONATION DONATION DONATION DONATION DONATION DONATION (g) Description of noncash assistance 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance 18,000 7,500 8,000 10,000 10,000 9,250 8,000 122,597 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant (c) IRC section (if applicable) 58-2534900 58-1960667 51-0195410 58-2070427 58-1660907 61-1522813 90-1032761 General Information on Grants and Assistance (p) EIN the selection criteria used to award the grants or assistance? (6) REACHING & MEETING NEEDS WORLDWIDE (8) OTHER COMMUNITY ASST. (SEE ATTACHED 1700 CENTURY CIRCLE, SUITE 200 GA 30013 GA 30345 GA 30014 30252 GA 30014 30038 GA 30281 (2) COMMUNITY FOOD PANTRY-NEWTON (7) ROCKDALE CO EMERGENCY RELIEF (3) CROSSWALK MINISTRIES, HENRY (a) Name and address of organization

(5) HELPING IN HIS NAME, INC.

COVINGTON

85 BELLAMY PL, SUITE A

STOCKBRIDGE

3743 N. GODDARD RD

LITHONIA

P.O. BOX 80369

7129 TURNER LAKE CIRCLE

(4) FAITHWORKS, INC.

MCDONOUGH

Ą

195 WELLINGTOB DR

(1) ACTION MINISTRIES, INC.

1169 CLARK STREET

ATLANTA

COVINGTON

or government

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table

6

For Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA

Schedule I (Form 990) (2016)

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. 58-2058035 Schedule I (Form 990) (2016) SNAPPING SHOALS ELECTRIC TRUST Part III Grants and Other Assistance to Domestic Individuals Commented in the State of

(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of noncash assistance
	recipients	cash grant	noncash assistance	FMV, appraisal, other)	
1 CHARITY ASSIST-SEE ATTACH 1	122	185,903			
2 CONSTANCE MORISCO		5,500			
3 MICHAEL GRINDLE	П	6,800			
4					
ıo					
9					
7					
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	de the information re	quired in Part I, line 2	; Part III, column (b)	; and any other additional ir	nformation.

- PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS PART I, LINE 2

EACH ORGANIZATION IS REQUIRED TO COMPLETE A GRANTEE REPORT WHICH KEEPS THE

TRUST INFORMED AS TO THE USE OF THE GRANT FUNDS.

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SNAPPING SHOALS ELECTRIC TRUST

Employer identification number 58 - 2058035

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 FORM 990 IS REVIEWED BY THE BOARD WITH ALL SUPPORTING DOCUMENTATION MADE AVAILABLE TO THEM.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THE TRUST REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH

ITS CONFLICT OF INTEREST REQUIREMENTS AS PRESCRIBED BY ARTICLE XVI OF ITS

BYLAWS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE TRUST MAKES ITS BYLAWS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC
AS PART OF ITS FORM 990. THE FORM 990 IS AVAILABLE UPON REQUEST AS
REFLECTED IN PART VI, SECTION C, LINE 18.