

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



VISASter K

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

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf. OMB No 1545-0052

Depa	ırtmen	t of the Treasury	ł .			social security numbers of				00-4		40	IU	
Intern	nal Re	venue Service				m 990-PF and its separat			s.gov/roms	эирт.		Open to Publi	ic Inspec	tion
		dar year 2016	or tax year	r <u>beginning</u>	<del></del>	<del></del>	, and e	mainy	T		**** A'			
		foundation		·~ ~ ~ ~ ~ ~		_			A Employe	riden	tification	number		
		DEVILL			TON THE	•			E0 -	227	4100	•		
		ROMAN			1.1			D			4100	<u>'</u>		
		nd street (or P O						Room/suite	B Telephor					
						23, #100		<u> </u>	1.		<u>1-20</u>			<del></del>
-		own, state or pr		-	IP or foreign p	postal code			C If exemption	n appli	cation is p	ending, check here	a ▶L	
	_	IETTA,	GA J	30067		Lastral vatures of a	former public	abard.					. ∟	
G	neck	all that apply:		Initial retui		Initial return of a	ionner public	CHarity	J. Foreig	ii orga	iiiiZations	s, check here		
			<u> </u>	] Final returi		Amended return			2. Foreign	organi	zations me	eeting the 85% test	t,	
		tune of organic	zotion:	Address cl		Name change xempt private foundation			7				-	
7	_	type of organia ction 4947(a)(			· '——	Other taxable private foun	dation					tus was termina		
		arket value of al				ing method: X Cash	Acc	rual	1			)(A), check here		
		Part II, col. (c)		end of year		ther (specify)	L ACC	luai	1			60-month termi	_	$\neg$
-	•\$	-art II, COI. (C)		B 035		umn (d) must be on cash	hasis)		ulluci se	SHOW	,ו )(מ) יטכ	)(B), check here		_
	art I	Analysis of F					T		(a) Ad	———		(d) Disburs		
<u> </u>	<i>a</i> :	(The total of am necessarily equ	iounts in colu	ımns (b), (c), a	nd (d) may not	(a) Revenue and expenses per books		nvestment ome	(c) Ad	justea come	1166	for charitable (cash basi	purposes	
	1	Contributions,				102,000	<del></del>		<b></b> _	/A		(Casil Dasi	3 Orliy)	
	2			on is not required		102,000	<u>'</u>	<del></del>	1			<del> </del>		
	3	Interest on savin	gs and temp	•		27,064		5,176.	<del>                                     </del>			<del> </del>		
	4	Dividends and		om securitie	ıs	38,512		8,512.	<del>                                     </del>					
	1 -	Gross rents	i intoroot irt	0111 00001100	,,,	30,322	<del></del>	0 / 0 1 2 3	1			<del> </del>		
		Net rental incom	e or (loss)			<del> </del>				T	DE	FIVED	T	
	62	Net gain or (loss)		assets not on	line 10	-21,806			<del> </del>	<del>                                     </del>	T.E.	<del>                                      </del>	7.2	
Ę	b	Gross sales price assets on line 8a	e for all		7,362.		·			181	MOV	2 4 2017	101	
Revenue	7	Capital gain net						0.		8	HUV	2 1 2017	छ	
æ	8	Net short-term					<u> </u>			1	OG	DEN LIT	-=	_
	9	Income modif										<del>1213, U1</del>		
	10a	Gross sales less and allowances	returns											
	i.	Less Cost of go	ods sold											_
	C	Gross profit of	r (loss)											
	11	Other income				-3,581	-	3,581.				STATEME	:NT	<u>1</u>
	12	Total. Add line	es 1 throug	gh <u>11</u>		142,189	. 6	0,107.						
	13	Compensation o	of officers, dire	ectors, trustee	es, etc	0	•	0.	\			<u> </u>		0.
	14	Other employe	ee salaries a	and wages			<u> </u>		<b></b>					
**	15	Pension plans	, employee	e benefits			<u> </u>		<u> </u>			<u> </u>		
Ses	16a	Legal fees					<u> </u>		<u> </u>			<u> </u>		
реп	b	Accounting fe			rmt 2	5,575	•	5,575.	ļ			<b></b>		0.
Ä	C	Other professi	onal fees	Si	rmt 3	1,413	•	1,413.				<del> </del>		0.
<u>i</u> ve	17	Interest					<u> </u>					ļ		
Operating and Administrative Expenses	18	Taxes			rmt 4	31	•	31.	<del> </del>			<del> </del>		0.
4017 inistra	19	Depreciation a	and depletio	on			<del> </del>		<del> </del>			<del> </del>		
Ē	20	Occupancy					<del> </del>		<del> </del>	—-		<del> </del>		
d Adn	21	Travel, confere		-			<del> </del>		ļ			<del> </del>		
- Ę	22	Printing and p					<del> </del>		<del> </del>			<del> </del> -		
ting an	23	Other expense			rmt 5	88	•	58.	<del> </del>			<del> </del>		0.
ra (	24	Total operation	_			7 107		7 077						0
į š		expenses. Ad		_		7,107 47,260	•	7,077.	<del> </del>			A 77	,26	0.
•	25	Contributions,				4/,200	+		<del> </del>			4/	, 40	<u>u .</u>
=	26	Total expense		oursements	•	54,367		7 077	}			AT	26	Λ
	07	Add lines 24 a		. 10:		34,36/	•	7,077.	<del>\</del>			4/	,26	<u>v .</u>
ø	27	Subtract line 2				87,822			1					
	1	Excess of revenu	-			01,044	•	3,030.	<del> </del>			<del></del>		
		Net investmen				<del></del>	+	,,,,,,,,,,	NT.	/A		<del> </del>		
	<u>ت</u> ــــــــــــــــــــــــــــــــــــ	<u>Adjusted net i</u>	INCOME (II L	regative, enter	-0-)				IN			L		

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2016)

Form **990-PF** 

C/O ROMAN DEVILLE 58-2274100 Page 2

Da	rt II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
<u>ra</u>	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
- }	1 Cash - non-interest-bearing			<del></del>
	2 Savings and temporary cash investments	107,808.	16,236.	16,236.
	3 Accounts receivable ► 1,000.			
	Less: allowance for doubtful accounts	1,042.	1,000.	1,000.
	4 Pledges receivable ►			
Ì	Less; allowance for doubtful accounts			
	5 Grants receivable			
ļ	6 Receivables due from officers, directors, trustees, and other			
- {	disqualified persons			
	7 Other notes and loans receivable			<del></del>
	Less: allowance for doubtful accounts		İ	
_ \			<del></del>	
Assets	8 Inventories for sale or use			<del></del>
SS	9 Prepaid expenses and deferred charges		<del></del>	
`	IOa Investments - U.S. and state government obligations			
- }	b Investments - corporate stock			
l	c Investments - corporate bonds			
-	1 investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
	12 Investments - mortgage loans			
-	13 Investments - other STMT 6	841,436.	1,025,270.	1,030,799.
- 1	14 Land, buildings, and equipment; basis			
	Less accumulated depreciation			
	15 Other assets (describe ►		——————————————————————————————————————	<del></del>
	`	<del></del>	<del></del>	
	16 Total assets (to be completed by all filers - see the	050 286	1 040 506	1 040 025
-+	instructions. Also, see page 1, item I)	950,286.	1,042,506.	1,048,035.
- 1	17 Accounts payable and accrued expenses			
'	18 Grants payable			
es .	19 Deferred revenue			
Liabilities	20 Loans from officers, directors, trustees, and other disqualified persons			
<u>e</u>   2	21 Mortgages and other notes payable			
-  ;	22 Other liabilities (describe ► <u>LOAN</u> - <u>RDZ</u> )	5,650.	5,650.	
	23 Total liabilities (add lines 17 through 22)	5,650.	5,650.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
es l	24 Unrestricted			
듩 [	25 Temporarily restricted			
ğ	26 Permanently restricted			
or Fund Balanc				
<u> </u>	·			
- 6	and complete lines 27 through 31.		,	
ည္   ဒီ	27 Capital stock, trust principal, or current funds	0.	0.	
88   S	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets	Retained earnings, accumulated income, endowment, or other funds	944,636.	1,036,856.	
<b>₽</b>   \$	30 Total net assets or fund balances	944,636.	1,036,856.	
:	31 Total liabilities and net assets/fund balances	950,286.	1,042,506.	
Pa	rt III Analysis of Changes in Net Assets or Fund Ba			
	otal net assets or fund balances at beginning of year - Part II, column (a), line 3	30	}	
•	nust agree with end-of-year figure reported on prior year's return)		1	944,636.
2 E	nter amount from Part I, line 27a		2	87,822.
3 0	ther increases not included in line 2 (itemize)   COST BASIS A	ADJUSTMENT	3	4,398.
	dd lines 1, 2, and 3		4	1,036,856.
<b>5</b> D	ecreases not included in line 2 (itemize)		5	0.
	otal net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	1,036,856.
				Form <b>990-PF</b> (2016)

623511 11-23-16

(a) List and descri 2-story brick war	be the kind(s) of property sold (e.g ehouse; or common stock, 200 sh	J., real estate, s. MLC Co.)		( <b>b)</b> How a P - Pur D - Doi	chase I	(c) Date acqu (mo., day,		(d) Date sold (mo., day, yr.)
18 MORGAN STANLEY	#109961				P			
b MORGAN STANLEY	#110003				P			
C			<del>_</del>	<u> </u>				
d				<u> </u>				
_e		<del></del>		<u> </u>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain ( (e) plus (f)	or (loss) minus (g	<del></del>
a 773,247.		<b></b>	825,04					-51,795
b 314,115.	· <del></del>	ļ	284,12	6.				29,989
С								
<u>d</u>		<del> </del>						<del></del>
<u>e</u>		<u> </u>					_	
Complete only for assets showing	gain in column (h) and owned by					) Gains (Col. ( . (k), but not li		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1)	ļ	CO	Losses (fro	m col. (h	-0- <i>)</i> <b>01</b> ))
	as 01 12/3 1/09	Over	COI. (j), II arry					., 
<u>a</u>		<b> </b>						-51,795 29,989
<u>b</u>		<b> </b>						29,989
<u>C</u>		ļ						
d		<del> </del>						
e		<u> </u>		}	т			
2 Capital gain net income or (net cap	ortal loss) { If gain, also ente If (loss), enter -0	r in Part I, line I- in Part I, line	7 7	}   2				-21,806
	•		,	) <del>  =</del> -				
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, c		na (6):		٦ [				
If (loss), enter -0- in Part I, line 8	olumn (c).			) <sub>3</sub>			N/A	
Part V Qualification Ur	nder Section 4940(e) for	Reduced	Tax on Net	Invest	ment Inc	ome		
Was the foundation liable for the section of the section of the foundation does not qualifulated.  1 Enter the appropriate amount in each	y under section 4940(e). Do not co	omplete this pa	ırt.					Yes X No
(a)		non denons de	Tore making any e			<del></del>		d)
Base periód years	(b) Adjusted qualifying dis	stributions	Net value of no	(c) ncharitable	-use assets	(col	Distribu	d) tion ratio
Calendar year (or tax year beginning	9/	9,709.			14,411		(b) divid	ed by col. (c)) • 05717(
2015 2014		6,598.	<del></del>		76,400			.043291
2013		7,224.			22,250			.104454
2012		8,300.	<del></del>	1 08	39,044	•		.016804
2012		6,025.	<del></del>		3,342			.032651
2011		0,025.		<u> </u>	77,742	•		.032031
2 Total of line 1, column (d)						2		.254370
3 Average distribution ratio for the 5	-vear hase period - divide the total	l O b C	or by the number	_		-		. 23-23/0
_	year base period divide the total			of veare		1 1		
the foundation has been in existen-	re if less than 5 years	on line 2 by 5,	or by the namber	of years		3		05087/
the foundation has been in existen	ce if less than 5 years	on line 2 by 5,	or by the namber	of years		3		.050874
	·		or by the number	of years				
	·		or by the number	of years		3 4		
4 Enter the net value of noncharitable	·		or by the names.	of years		4		841,636.
4 Enter the net value of noncharitable	·		or by the number	of years				841,636.
4 Enter the net value of noncharitable 5 Multiply line 4 by line 3	e-use assets for 2016 from Part X,		or by the number	of years		5		841,636. 42,817.
4 Enter the net value of noncharitable 5 Multiply line 4 by line 3	e-use assets for 2016 from Part X,		or by the number	of years		4		841,636. 42,817.
4 Enter the net value of noncharitable 5 Multiply line 4 by line 3 6 Enter 1% of net investment income	e-use assets for 2016 from Part X,		or by the number	of years		5		841,636. 42,817. 530.
4 Enter the net value of noncharitable 5 Multiply line 4 by line 3 6 Enter 1% of net investment income	e-use assets for 2016 from Part X,		or by the number	of years		5		841,636. 42,817. 530.
<ul> <li>4 Enter the net value of noncharitable</li> <li>5 Multiply line 4 by line 3</li> <li>6 Enter 1% of net investment income</li> <li>7 Add lines 5 and 6</li> </ul>	e-use assets for 2016 from Part X, e (1% of Part I, line 27b)		or by the number	of years		5 6 7		841,636. 42,817. 530. 43,347.
<ul> <li>4 Enter the net value of noncharitable</li> <li>5 Multiply line 4 by line 3</li> <li>6 Enter 1% of net investment income</li> <li>7 Add lines 5 and 6</li> <li>8 Enter qualifying distributions from</li> </ul>	e-use assets for 2016 from Part X, e (1% of Part I, line 27b) Part XII, line 4	line 5			rata	5		.050874 841,636. 42,817. 530. 43,347.
4 Enter the net value of noncharitable 5 Multiply line 4 by line 3 6 Enter 1% of net investment income 7 Add lines 5 and 6	e-use assets for 2016 from Part X, e (1% of Part I, line 27b) Part XII, line 4	line 5			rate.	5 6 7		841,636. 42,817. 530. 43,347.

THE DEVILLE FOUNDATION INC. C/O ROMAN DEVILLE Form 990-PF (2016) Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here 
and enter "N/A" on line 1. (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: b Domestic foundations that meet the section 4940(e) requirements in Part V, check here \( \subseteq \textbf{X} \) and enter 1% 530. of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 530. 849. a 2016 estimated tax payments and 2015 overpayment credited to 2016 **b** Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 6d 7 Total credits and payments. Add lines 6a through 6d 849. 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ if Form 2220 is attached 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 319. 10 319. Refunded ▶ 11 Enter the amount of line 10 to be: Credited to 2017 estimated tax 0. Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? X 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? X 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ \_\_\_\_\_ 0 . (2) On foundation managers. ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? Х 2 If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV

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X

8b

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

THE DEVILLE FOUNDATION INC. C/O ROMAN DEVILLE 58-2274100 Form 990-PF (2016) Page 5 Part VII-A Statements Regarding Activities (continued) Yes No 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) 11 X 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) X 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? X 13 Website address ► N/A 14 The books are in care of ► ROMAN DEVILLE Telephone no.  $\triangleright 770 - 951 - 2002$ Located at ▶600 VILLAGE TRACE NE, BLDG 23, SUITE 100600 VILLA ZIP+4 ▶30067 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year N/A 15 16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the 

	foreign country	ļ		
5 <sub>a</sub>	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<b>5</b>	1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	,		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?	,	}	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	´		
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)	,	}	
b	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations	´		
-	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	. 1ь	1	
	Organizations relying on a current notice regarding disaster assistance check here	7		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	_		
Ī	before the first day of the tax year beginning in 2016?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2016? Yes X No	,	1	
	If "Yes," list the years $\blacktriangleright$		i i	
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect		} }	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		} }	
	statement - see instructions.)  N/A	. 2b		
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	<b>&gt;</b>		<b>\</b>	
За	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		ĺĺ	
	during the year?	, ] '	İ	
b	b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2016)  N/A	3b	L [	_
4a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		Х
		Form <b>990</b>	)-PF (	2016)

623541 11-23-16

THE DEVILLE FOUNDATION INC. C/O ROMAN DEVILLE Form 990-PF (2016) 58-2274100 Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No If "Yes," attach the statement required by Regulations section 53 4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b X If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (c) Compensation (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances ROMAN DEVILLE TRUSTEE 600 VILLAGE TRACE NE BLDG 23, MARIETTA, GA 30067 0 0.00 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation **(b)** Title, and average hours per week devoted to position (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 (c) Compensation allowances NONE

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Total number of other employees paid over \$50,000

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. For	eign foun	dations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			<del> </del>
a			1a	793,667.
b			1b	60,786.
C	Fair market value of all other assets	[	1c	
ď	Total (add lines 1a, b, and c)		1d	854,453.
	Reduction claimed for blockage or other factors reported on lines 1a and	Γ		
	1c (attach detailed explanation)	_ 0.	ļ	
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d	{	3	854,453.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	12,817.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		5	841,636.
6	Minimum investment return. Enter 5% of line 5		6	42,082.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found	dations and	d certain	
	foreign organizations check here 🕨 🔃 and do not complete this part.)			
1	Minimum investment return from Part X, line 6		1	42,082.
2a	Tax on investment income for 2016 from Part VI, line 5	530.		
b	Income tax for 2016. (This does not include the tax from Part VI.)		}	
C	Add lines 2a and 2b	Ł	2c	530.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	41,552.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	41,552.
6	Deduction from distributable amount (see instructions)		6	0.
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		7_	41,552.
P	Part XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	Ĺ	1a	47,260.
b	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:	[		
a	Suitability test (prior IRS approval required)	L	3a	
b	Cash distribution test (attach the required schedule)		3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4		4	47,260.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	Γ		
	income. Enter 1% of Part I, line 27b	L	5	530.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	46,730.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the for	undation q	ualifies for the	

Form **990-PF** (2016)

4940(e) reduction of tax in those years.

Form 990-PF (2016) C/O ROMAN DEVILLE Part XIII Undistributed Income (see instructions)

Part Air Chaistribated meetine (see				
•	(a) Corpus	(b) Years prior to 2015	( <b>c)</b> 2015	( <b>d</b> ) 2016
1 Distributable amount for 2016 from Part XI, line 7				41,552.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years:				
, ,		0.		
3 Excess distributions carryover, if any, to 2016:				
<b>a</b> From 2011	Ì			
<b>b</b> From 2012	İ			
c From 2013 4,851.				
<b>d</b> From 2014				
e From 2015 8,190.				
f Total of lines 3a through e	13,041.			
4 Qualifying distributions for 2016 from				- ·
Part XII, line 4: ► \$ 47,260.				
a Applied to 2015, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				41,552.
e Remaining amount distributed out of corpus	5,708.			
Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	1			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	18,749.			
<b>b</b> Prior years' undistributed income. Subtract	10,715.			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line				<del></del>
4a from line 2a. Taxable amount - see instr.	Ì	Ì	0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017	1			0.
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)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	0.	,		
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	18,749.			
10 Analysis of line 9:				
a Excess from 2012				
<b>b</b> Excess from 2013 <b>4</b> ,851.	}			
c Excess from 2014				
d Excess from 2015 8,190.				
e Excess from 2016 5,708.			<u> </u>	5 000 PF 100 10

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a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax

## ROMAN DEVILLE

## NONE

Check here LX if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:
- b The form in which applications should be submitted and information and materials they should include:
- c Any submission deadlines:
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of Amount any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year ATLANTA COMMUNITY FOOD BANK ₽C UNRESTRICTED 732 JOSEPH E LOWERY BLVD NW ATLANTA, GA 30318 50. ATLANTA MISSION PC UNRESTRICTED 2353 BOLTON RD NW ATLANTA, GA 30318 100. ATLANTA SCHOLARS KOLLEL PC UNRESTRICTED 1959 LAVISTA ROAD ATLANTA GA 30329 4,000. BIKUR CHOLIM CHESED ORGANIZATION PC UNRESTRICTED 5216 11TH AVENUE BROOKLYN, NY 11219 36. **EMORY** ÞC UNRESTRICTED 1762 CLIFTON RD SUITE 1400MS ATLANTA GA 30322 2 000 SEE CONTINUATION SHEET(S) Total ▶ 3a 47 260 b Approved for future payment NONE Total **▶** 3b

C/O ROMAN DEVILLE

Part XVI-A	Anal	vsis of	<b>Income-Producing</b>	<b>Activities</b>
I GILATIA	Allai	y SIS OI	moonic i roadomig	, 101, 111, 110,

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	Turiction income
a	ļ			<del></del>	
b	<u> </u>				
C	ļ				
d	L				<del> </del>
e	<b> </b>				
f	<b> </b>	. <del> </del>			
g Fees and contracts from government agencies	<u> </u>				
2 Membership dues and assessments	L				
3 Interest on savings and temporary cash	1 1				
investments	ļ		14	27,064. 38,512.	·
4 Dividends and interest from securities	<u> </u>		14	38,512.	
5 Net rental income or (loss) from real estate:	ļ				
a Debt-financed property	<b></b>				
b Not debt-financed property	ļ				
6 Net rental income or (loss) from personal					
property	<u> </u>				
7 Other investment income	<b>}</b>				
8 Gain or (loss) from sales of assets other	,				
than inventory	ļ		18	-21,806.	
9 Net income or (loss) from special events	ļ				<del></del>
O Gross profit or (loss) from sales of inventory					
1 Other revenue:	}		1 1		
a TARGA RESOURCES PARTNERS	L		14	-133.	
b ENERGY TRANSFER PARTNERS	<del></del>		14	-739.	
c PLAINS MARKETING	<u> </u>		14	-1,349.	
d ENLINK MIDSTREAM PARNERS			14		
e	\ <del>-</del>				
2 Subtotal. Add columns (b), (d), and (e)			0.	40,189.	0
3 Total. Add line 12, columns (b), (d), and (e)				13	40,189
See worksheet in line 13 instructions to verify calculations.)					<del> </del>

Line No.   ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
<del></del> -}	

Form 990	D-PF (2016		OMAN DEV				<del></del>		<u>274100</u>	Page 13
Part 2				nsfers To	and Tran	sactions a	nd Relations	hips With None	charitable	
		Exempt Organ				41				Vaa Na
		zation directly or indi						on 501(c) of		Yes No
		er than section 501(c					zauons			İ
		n the reporting found	ation to a nonchari	nable exempt of	yanızanını o	•			4243	
, ,	Cash	a.t.a							1a(1)	$\frac{X}{X}$
• •	Other ass er transact								1a(2)	X
		ions. Issets to a noncharita	shle evemnt organi	zation					15(1)	
, ,		s of assets from a no	• •						1b(1)	X
٠,		facilities, equipment,	-	e or gumzation					1b(3)	X
٠.		ement arrangements							1b(4)	X
		loan guarantees							1b(5)	X
		nce of services or me	embership or fundr	aising solicitation	ons				1b(6)	X
		ılıtıes, equipment, ma							1c	Х
						n (b) should alw	ays show the fair n	narket value of the go	ods, other asse	
or s	services giv	en by the reporting f	oundation. If the fo	undation receiv	ed less than	fair market value	e in any transaction	or sharing arrangem	ent, show in	
col	umn ( <b>d)</b> the	e value of the goods,	other assets, or se	rvices received.	·					
(a) Line n	o (b)	Amount involved	(c) Name	of noncharitable	e exempt org	anization	(d) Description	of transfers, transactions	, and sharing arra	ngements
			<u> </u>	<u> </u>			ļ	·		
			<u> </u>				<del></del>			
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					<del></del>	<u> </u>				
						*				
2a Ist	he foundat	ion directly or indirec	tly affiliated with, o	r related to, one	e or more tax	exempt organiz	ations described			
ın s	ection 501	(c) of the Code (othe	r than section 501(	(c)(3)) or in sec	tion 527?				Yes	X No
<b>b</b> If "\	es," comp	lete the following sch	edule.				<del></del>			
		(a) Name of org	janization		<b>(b)</b> Type o	f organization		c) Description of relat	ionship	
		N/A	·		<b></b>					
		<del></del>			<del> </del>					
					<del> </del>					
		<del></del>			<del> </del>					
	Under pena	alties of perjury, I declare	that I have examined	this return, includii	ng accompanyi	no schedules and s	statements, and to the	best of my knowledge		
Sign		it is true, correct, and cor							May the IRS di return with the	preparer
Here					1		TRUSTE	ır.	shown below (s	
	Signatur	re of officer or trustee			Date		Title		163	LJ No
		int/Type preparer's na		Preparer's s		<u></u>	Date 2	Check If P	TIN	
	t t	HRISTOPHE				-	nlich	self- employed		
Paid		AVIS, CPA		CHRIST	OPHER	B. DA	11/15/17		P005464	138
Prepa	arer Fir	m's name ► HA+		O LLP			<del></del>	Firm's EIN ► 57		
Use (										
	Fir	m's address 🕨 🗜 🏾	VE CONCO	URSE PA	RKWAY	, SUITE	1000	1		

Form **990-PF** (2016)

Phone no. 404-892-9651

ATLANTA, GA 30328

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

**Employer identification number** Name of the organization THE DEVILLE FOUNDATION INC. C/O ROMAN DEVILLE 58-2274100 Organization type (check one): Filers of: Section: \_\_\_ 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ). Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

THE DEVILLE FOUNDATION INC.

C/O ROMAN DEVILLE

Employer identification number

58-2274100

Part I	Contributors (See instructions). Use duplicate copies of Part I if addit	ional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROMAN DEVILLE  600 VILLAGE TRACE NE 23, SUITE 100  MARIETTA, GA 30067	\$102,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_	Person Payroll Oncash (Complete Part II for noncash contributions.)
623452 10-1	8-16	Schedule B (Form	990, 990-EZ, or 990-PF) (2016)

Name of organization

THE DEVILLE FOUNDATION INC.

C/O ROMAN DEVILLE

Employer identification number 58-2274100

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		<b>\$</b>	
(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. irom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

Employer identification number Name of organization THE DEVILLE FOUNDATION INC. C/O ROMAN DEVILLE 58-2274100 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (c) Use of gift (b) Purpose of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee 623454 10-18-16

FORM 990-PF	OTHER	INCOME		STATEMENT 1
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
TARGA RESOURCES PARTNERS ENERGY TRANSFER PARTNERS PLAINS MARKETING ENLINK MIDSTREAM PARNERS	_	-133. -739. -1,349. -1,360.	-739. -1,349.	
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	-3,581.	-3,581.	
FORM 990-PF	ACCOUNT	TING FEES		STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS			
ACCOUNTING FEES	5,575	5. 5,575	•	0.
TO FORM 990-PF, PG 1, LN 16B	5,575	5,575	·	0.
FORM 990-PF C	THER PROFE	ESSIONAL FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS			
INVESTMENT FEES	1,413	3. 1,413	•	0.
TO FORM 990-PF, PG 1, LN 16C	1,413	3. 1,413	•	0.

FORM 990-PF	TAXES			STATEMENT			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM			
FOREIGN TAXES	31.		31.		· · · · · · · · · · · · · · · · · · ·	0.	
TO FORM 990-PF, PG 1, LN 18	31.		31.			0.	
FORM 990-PF	OTHER EXPENSES			STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM			
MISCELLANEOUS EXPENSE PENALTIES	58. 30.		58.			0.	
TO FORM 990-PF, PG 1, LN 23	88.		58.			0.	
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	6	
DESCRIPTION	VALUATION METHOD		BOOK VALUE		FAIR MARKET VALUE		
MORGAN STANLEY #109961	COST		1,025,270.		1,030,799.		
TOTAL TO FORM 990-PF, PART II, LINE 13			1,025,270.		1,030,7	1,030,799.	