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Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

Do not enter social security numbers on this form as it may be made public. Information about Form 990-PF and its separate instructions is at www.irs gov/form990pf.

| Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public. | | | | | | | |
|--|-----------|---|-------------------|-------------------|---|--|---|
| Fo | r caler | ndar year 2016 or tax year beginning | · | ¹, and | ending | , , | |
| | | undation | | | A Employer | r identification numbe | , |
| | | LANIER FAMILY FDN I street (or P O box number if mail is not delivered to street address) | 1 | D/ | 4 | 50.0045050 | |
| | | |] ' | Room/suite | B Telephon | 58-6045056 e number (see instruction | |
| | | (1908 , state or province, country, and ZIP or foreign postal code | | | - reteption | e number (see instruction | 115) |
| | LAND | | 32802 | 2-1908 | | (404) 230-547 | 'a |
| | | intry name Foreign province/state/county | | postal code | C. If evemnt | tion application is pendir | |
| | | | 3 | | - Il exempt | non application is penal | ig, oneon note i |
| G | Check | call that apply Initial return Initial return | of a former pu | blic charity | D 1 Foreig | n organizations, check t | nere ► |
| | | ☐ Final return ☐ Amended ret | | one onanty | 2 Foreig | n organizations meeting | the 85% test. |
| | | Address change | е | | | here and attach comput | |
| Н | Check | type of organization 💢 Section 501(c)(3) exempt pr | ivate foundation | n | | foundation status was to | erminated under |
| | Section | on 4947(a)(1) nonexempt charitable trust 🔲 Other taxa | able private foi | undation | section 5 | 07(b)(1)(A), check here | ► |
| I | Fair m | narket value of all assets at J Accounting method | X Cash | Accrual | E If the four | ndation is in a 60-month | termination |
| | end o | f year (from Part II, col. (c), | | | | ction 507(b)(1)(B), check | |
| | line 1 | 6) ► \$ 90,993,681 (Part I, column (d) must be | on cash basis , |) | | | |
| P | art l | Analysis of Revenue and Expenses (The total of | (a) Revenue a | nd (1) L | | 4.3.4.1 | (d) Disbursements |
| | | amounts in columns (b), (c), and (d) may not necessarily | expenses pe | r ' ' | et investment ncome | (c) Adjusted net income | for charitable purposes |
| | | equal the amounts in column (a) (see instructions)) | books | | | | (cash basis only) |
| | 1 | Contributions, gifts, grants, etc , received (attach schedule) | 3,500, | 000 | | | * *** |
| | 2 | Check ▶☐ if the foundation is not required to attach Sch. B | |). (W) | ******** | | |
| | 3 | Interest on savings and temporary cash investments | | | <u>' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' </u> | , 11 (| 7 2 1 |
| | 4 | Dividends and interest from securities | 984, | 399. | 914,525 | | |
| ø. | 5a | Gross rents | 'analistate' | 1 - 5 1 1 1 1 1 1 | coma li n. ++ girana | V | |
| | b 6a | Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 | l a RC | STWAF | ЭK | DCCC.VC | 300 X X X X X X X X X X X X X X X X X X |
| Revenue | b | Gross sales price for all assets on line 6a 9,710,252 | -2,023 | 303 1011 11 | <u>((</u> | RECEIVED | |
| Ve | 7 | Capital gain net income (from Part IV, line 2) | | | | | |
| Re | 8 | Net short-term capital gain | 76 1 | 1 15 201 | 7 | 1 1 2 0 2017 | |
| | 9 | Income modifications | | | | * * E U | |
| | 10a | Gross sales less returns and allowances | | Mar - CTV . | OGDE | NIES . | K 3000 (3) |
| | b | Less [*] Cost of goods sold | | SFR | VICEC | - Nizeo | |
| | С | Gross profit or (loss) (attach schedule) | | | 1105 01 | MIER | |
| | 11 | Other income (attach schedule) | -652, | | | ` | |
| | 12 | Total. Add lines 1 through 11 | 1,208, | | 914,525 | 0 | 201 |
| es | 13 | Compensation of officers, directors, trustees, etc. | 236, | 115 | 118,057 | | 118,058 |
| us | 14 | Other employee salaries and wages | | - | | | |
| be | 15 16a | Pension plans, employee benefits Legal fees (attach schedule) | | | | | |
| ũ | b | Accounting fees (attach schedule) | 2 | 500 | | | 2,500 |
| Υe | C | Other professional fees (attach schedule) | 514, | | 514,597 | - | 2,300 |
| ati | 17 | Interest | 317, | 907 | 014,007 | | |
| str | 18 | Taxes (attach schedule) (see instructions) | 10 | 371 | 10,371 | | |
| Ξ | 19 | Depreciation (attach schedule) and depletion . | , | | , | | * |
| ᇤ | 20 | Occupancy | | | | | |
| Ž | 21 | Travel, conferences, and meetings | | | • | 1 1 | 1 1 |
| Operating and Administrative Expenses | 22 | Printing and publications | | | | | 1, 1, 1, |
| g | 23 | Other expenses (attach schedule) | 464, | 644 | 464,644 | | |
| ţ | 24 | Total operating and administrative expenses. | | | • | | |
| ra | - | Add lines 13 through 23 | 1,228, | | 1,107,669 | <u> </u> | _ |
| þę | 25 | Contributions, gifts, grants paid | 5,405, | | L | | 5,405,185 |
| <u></u> | 26 | Total expenses and disbursements Add lines 24 and 25 | 6,633, | 412 | 1,107,669 | 0 | 5,525,743 |
| | 27 | Subtract line 26 from line 12 | | | | | 1 |
| | a | Excess of revenue over expenses and disbursements | -5,424, | /42 | | | |
| | b c | Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-) | | | 0 | | |
| | ٠ . | Adjusted het moonte (il negative, enter -0-) . | I | l l | | 0 | } |

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2016)

| Ð | art II | Balance Sheets Attached schedules and amounts in the description column | Beginning of year | | of year |
|--------------|--------|--|--|--|-------------------------|
| | | should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash—non-interest-bearing | - | · 16 | 1 1/2 1 1/2 1/2 1/2 1/2 |
| | 2 | Savings and temporary cash investments | :- 1,679,712 | 3,615,990 | 3,615,990 |
| | 3 | Accounts receivable > | | | Service National |
| | | Less allowance for doubtful accounts | | , | |
| I | 4 | Pledges receivable ▶ | (1) 10 10 10 10 10 10 10 10 10 10 10 10 10 | | 33.34.4 L TAKE |
| | | Less allowance for doubtful accounts | agalaste saddanas accordina iddi. | te with the contract of the co | C |
| | 5 | Grants receivable | · · · · · · · · · · · · · · · · · · · | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | | disqualified persons (attach schedule) (see instructions) . | | | |
| | 7 | Other notes and loans receivable (attach schedule) | | | \$ 60 mg (50) |
| | • | Less allowance for doubtful accounts | Jan Mille South I Wall and a suit and a suit of the su | | Mak inchining |
| S | 8 - | Inventories for sale or use | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | |
| 1S | 10a | Investments—U.S. and state government obligations (attach schedule) | | | |
| • | b | Investments—corporate stock (attach schedule) | | 7,053,784 | 32,748,731 |
| | C | | | 1,000,704 | 32,740,731 |
| | 11 | · · · · · · · · · · · · · · · · · · · | | Maria Salah da Asia da | A |
| | ' ' ' | | Arbeit Carron III and | | and Malaman, 23 |
| | 40 | Less accumulated depreciation (attach schedule) | | | |
| | 12 | Investments—mortgage loans , | 00.007.470 | 50 400 400 | 54 600 000 |
| | 13 | Investments—other (attach schedule) | 68,997,170 | 56,129,423 | 54,628,960 |
| | 14 | Land, buildings, and equipment basis | | ، نسلان شید اگریک شرایطه | and the second second |
| | 4= | Less accumulated depreciation (attach schedule) | | | |
| | 15 | Other assets (describe) | | | <u> </u> |
| | 16 | Total assets (to be completed by all filers—see the | | بالمريخ والما | |
| | | instructions. Also, see page 1, item I) | 70,676,882 | 66,799,197 | 90,993,681 |
| | 17 | Accounts payable and accrued expenses | | , , | |
| Se | 18 | Grants payable | | | |
| Liabilities | 19 | Deferred revenue | | | |
| ig | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| Ľ | 21 | Mortgages and other notes payable (attach schedule) . | | | |
| | 22 | Other liabilities (describe) | | | |
| | 23 | Total liabilities (add lines 17 through 22) . | 0 | 0 | |
| S. | | Foundations that follow SFAS 117, check here | | | |
| Balances | 2.4 | and complete lines 24 through 26 and lines 30 and 31. | | | |
| a | 24 | Unrestricted | | | |
| Ba | 25 | Temporarily restricted | | | |
| pun. | 26 | Permanently restricted | | | |
| ٦ | | Foundations that do not follow SFAS 117, check here | | | |
| or | 27 | and complete lines 27 through 31. | 70.070.000 | 00 700 407 | |
| S | 27 | Capital stock, trust principal, or current funds | 70,676,882 | 66,799,197 | |
| set | 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | | | |
| AS! | 29 | Retained earnings, accumulated income, endowment, or other funds | 70.070.000 | 00 700 407 | |
| Net Assets | 30 | Total net assets or fund balances (see instructions) | 70,676,882 | 66,799,197 | |
| ž | 31 | Total liabilities and net assets/fund balances (see | | | . 1 |
| Da | -9111 | Instructions) | 70,676,882 | 66,799,197 | 1 |
| | Total | Analysis of Changes in Net Assets or Fund Balances net assets or fund balances at beginning of year—Part II, column (a | a) line 20 (m:+ = | oo wath | |
| • | | of year figure reported on prior year's return) | a), ime ou (must agr | | 70.676.992 |
| 2 | | | • • | 1 2 | 70;676,882 |
| _ | | r amount from Part I, line 27a | | 2 | -5,424,742 |
| 3 | | r increases not included in line 2 (itemize) See Attached State | rnent | 3; | 3,518,785 |
| 4 | | lines 1, 2, and 3 | | 4_ | 68,770,925 |
| 5 | | eases not included in line 2 (itemize) See Attached Statement | net II aguar (h) | 5 | 1,971,728 |
| - | roldi | net assets or fund balances at end of year (line 4 minus line 5)—Pa | art II, column (b), line | e 30 . 6 | 66,799,197 |

6

Add lines 5 and 6

Part VI instructions

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

Enter qualifying distributions from Part XII, line 4 . . .

58-6045056 Form 990-PF (2016) SARTAIN LANIER FAMILY FDN Page 3 Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P—Purchase (a) List and describe the kind(s) of property sold (e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse, or common stock, 200 shs MLC Co) (mo , day, yr) .; (mo , day, yr) -Donation 1a See Attached Statement b C d е (h) Gain or (loss) (g) Cost or other basis (f) Depreciation allowed (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale а b C d е Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus col (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col (i) (i) F M V as of 12/31/69 Losses (from col (h)) as of 12/31/69 over col (j), if any а b С d е If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income) If section 4940(d)(2) applies, leave this part blank. ☐ Yes ☒ No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part. Enter the appropriate amount in each column for each year, see the instructions before making any entries (d) (c) (b) Base period years Distribution ratio Adjusted qualifying distributions Net value of nonchantable-use assets Calendar year (or tax year beginning in) (b) divided by col (c)) 2015 5,665,337 109,559,013 0 051710 2014 118,185,068 0 037430 4,423,648 2013 4,444,855 92,227,508 0 048194 2012 0 043929 4,042,562 92,025,292 2011 82,417,434 0.043665 3,598,796 2 Total of line 1, column (d) 0 224928 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . 3 0 044986 96,727,739 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 Multiply line 4 by line 3 .

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

0

4:351,394

5,525,743

6

7

| Form 99 | 0-PF (2016) SARTAIN LANIER FAMILY FDN | | 58- | 6045056 | P | age 4 | |
|---------|---|----------------|-------------|----------------------|----------|----------|--|
| Part \ | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940(c) | 8see | instruc | tions) | | 1 | |
| | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line Date of ruling or determination letter (attach copy of letter if necessary—see instruction Domestic foundations that meet the section 4940(e) requirements in Part V, check, ' | | 1 | | | | |
| С | here ► X and enter 1% of Part I, line 27b | | | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0 | -) | 2 | <u>' '</u> | O | 1. | |
| 3 | Add lines 1 and 2 | | 3 | | 0 | | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -t | - -) | 4 | _ | | | |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- | | 5 | "8" F.M. | 0 | (K + _5a | |
| 6 | Credits/Payments | 1 | | | l.ž:`' | | |
| a | 2016 estimated tax payments and 2015 overpayment credited to 2016 | | 1.34 | | | | |
| b | Exempt foreign organizations—tax withheld at source 6b | 000 | | | | | |
| c d | Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld 6d | 100 | 11 | | 4 3 | 3: 4 | |
| 7 | Total credits and payments. Add lines 6a through 6d | | 7 | د تحدة عنظانات !2 | 5,000 | iii | |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack | ned | 8 | | ,,,,,,,, | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | . ▶ | 9 | | 0 | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | . ▶ | 10 | 25 | 5,000 | | |
| 11 | Enter the amount of line 10 to be Credited to 2017 estimated tax Refun | ded ▶ | 11 | 25 | 5,000 | | |
| Part | VII-A Statements Regarding Activities | | | F 2. | 1 | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legisl | ation or c | did it | * 1 | Yes | | |
| | 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 purpose | s (see | | 1 | | | |
| | Instructions for the definition)? | | atawala | 1b | sign . | X | |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies published or distributed by the foundation in connection with the activities | ו any וה יי | ateriais | | | | |
| ^ | Did the foundation file Form 1120-POL for this year? | | . ' | 1c | 2027 | X | |
| c d | | | | | | | |
| ď | (1) On the foundation \blacktriangleright \$ (2) On foundation managers. \blacktriangleright \$ | | | | | | |
| е | | | | | | | |
| | on foundation managers >\$ | | | | | <u> </u> | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities 2 | | | | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles | | | | | X | |
| | 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 | X | |
| p | If "Yes," has it filed a tax return on Form 990-T for this year? | | | . 4b | IN/A | × | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T | | | J. 3 | | Aid | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith | er | | ř., | | | |
| Ū | By language in the governing instrument, or | | | , `; | | - | |
| | By state legislation that effectively amends the governing instrument so that no mandatory | direction | ns that | ** | * * | | |
| | conflict with the state law remain in the governing instrument? | • | | 6 | 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 X | ν | 7 | Х | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instruction | | > | ^ | | | |
| b | GA If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A | torney C | Seneral | | | | |
| - | (or designate) of each state as required by General Instruction G? If "No," attach explanation | | | . 8b | , X | | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of sec | | 2(j)(3) | , , 🗀 | | | |
| | or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions f | | | ' ' | | | |
| | "Yes," complete Part XIV | | ´ : · | <u>9',</u> | ' ' | X | |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schonames and addresses | dule listi | ing theii | . 10 | | × | |

| Form 99 | 0-PF (2016) SARTAIN LANIER FAMILY FDN 58-60 | 45056 | F | age 5 |
|---------|---|-----------|--|----------------|
| Part | VII-A Statements Regarding Activities (continued) | | | |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | | Yes | . No |
| | meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | . 11 | | Х |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified | 1 1 | | ľ. <i>"</i> |
| | person had advisory privileges? If "Yes," attach statement (see instructions) | 12 | ,' | · 'X ' |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | |
| | Website address ► N/A | | | , ' <u></u> |
| 14 | The books are in care of ► SUNTRUST BANK Telephone no ► (404) 2 | 30-547 | 9 | ' |
| | Located at ► 25 PARK PLACE ATLANTA GA ZIP+4 ► 30303 | ' | | · |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here | | • | ▶ ∟ |
| 16 | and enter the amount of tax-exempt interest received or accrued during the year ► 15 N/A | | Yes | No |
| 16 | At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | 16 | res | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If | 16 |) | *** |
| | "Yes," enter the name of the foreign country | 2 649 | r×e" | |
| Part | VII-B Statements Regarding Activities for Which Form 4720 May Be Required | 1 | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | 1 6 | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly) | | agonger v | 8 7.7.8 |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | | | 5 |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | | | |
| | disqualified person? Yes X No | 134.8 | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | 13.3 | 103 | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . X Yes No | 9 2 3 | count. | 1,00 |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for | 100 | · . | . zitte |
| | the benefit or use of a disqualified person)? Yes 💢 No | | 🦥 | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the | | | |
| | foundation agreed to make a grant to or to employ the official for a period after | | 1. 1. 1. modelin | |
| | termination of government service, if terminating within 90 days.) | | 1. 6.3 | |
| b | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in | × . | s., - | , T-1 |
| | Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | N/A | |
| | Organizations relying on a current notice regarding disaster assistance check here | | ^រ ង្គប់ ្ត | |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that | \$ 330. Y | | : <i>::::</i> |
| _ | were not corrected before the first day of the tax year beginning in 2016? | 1c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | 11.3 | | . : |
| _ | operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | हैं दे |
| 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? | | | <i>"</i> |
| | | | -30 | 1.34 |
| ь | If "Yes," list the years 20, 20 | , · | ~ _{7 %} | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to | 1 ; . | . 49 | |
| | all years listed, answer "No" and attach statement—see instructions.) | 2b | N/A | |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | 1 1 1 1 1 | 1 · | 3 8 |
| | ► 20, 20, 20, 20 | | ************************************** | ×. |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise | | ž | g yak |
| | at any time during the year? Yes X No | ` ' | , | |
| b | If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or | | , " | ľ ["] |
| | 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 | <u></u> | | |
| | foundation had excess business holdings in 2016) | 3b | N/A | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | 7,1 | 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 | 1 1 1 | ' X' |

Form **990-PF** (2016)

| Form 9 | 90-PF (2016) | SARTAIN LANIER FAMILY FD | 1 | | | | | | 58-60 | 45056 | Page 6 |
|---------|--------------|--|---|--|----------|--------------------------------------|--------------|--|---------------------|--------|-----------------------------|
| Par | t VII-B | Statements Regarding Activities for | or Wh | ich Form 47 | '20 Ma | y Be Req | uired (| continue | d) | | |
| 5a | | e year did the foundation pay or incur an on propaganda, or otherwise attempt to | | | (section | ρη 4945(e)) | ?', . | Yes | X No | | |
| | dırectl | nce the outcome of any specific public el y or indirectly, any voter registration drive | e? | | | | on, | Yes | X No | 2400 3 | |
| | | le a grant to an individual for travel, stud | | | | | | √ Yes | X No | | |
| | sectio | le a grant to an organization other than an 4945(d)(4)(A)? (see instructions) | | | | | | Yes | X No | | |
| | purpo | le for any purpose other than religious, c ses, or for the prevention of cruelty to ch | ıldren d | or animals? | | | • | Yes | X No | | |
| b | - | swer is "Yes" to 5a(1)–(5), did any of the ns section 53.4945 or in a current notice | | | | | - | | bed in | 5b | N/A |
| С | If the ans | tions relying on a current notice regardin wer is "Yes" to question 5a(4), does the it maintained expenditure responsibility f | founda | oundation claim exemption from the tax or the grant? N/A Yes | | | ► □ □ No | | | | |
| 6a | Did the fo | Yes," attach the statement required by Regulations section 53 4945–5(d) the foundation, during the year, receive any funds, directly or indirectly, to pay premiums a personal benefit contract? | | | | | ⊠ No | | | | |
| b | | undation, during the year, pay premiums o 6b, file Form 8870 | n, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . Form 8870 | | | | • | 6b | X | | |
| 7a b | If "Yes," o | e during the tax year, was the foundation a pa hid the foundation receive any proceeds | or have | any net inco | me att | ributable to | the tra | | | 7b | N/A |
| ∂Par | | nformation About Officers, Directo | ors, Tr | ustees, Fo | undati | ion Manag | jers, F | lighly Pa | aid Em | ploye | es, |
| | | nd Contractors fficers, directors, trustees, foundation | mana | gore and the | ir com | noncation | /soo ir | etruction | nc) | , | |
| | List an o | (a) Name and address | (b) Titl | e and average irs per week led to position | (c) Co | mpensation not paid, nter -0-) | (d) emple | Contribution oyee benefit erred compe | s to plans | | nse account |
| See A | Attached St | atement | 437 | .00 | | 0 | ; I | 1, | <i>i'</i> s | * . |) i ; ; ; ; |
| | | | | .00. | | 0 | | | , | | · · · · · |
| | | | | 00 | | 0 | | | | | |
| | | | | .00 | | 0 | | | | | |
| | "NONE." | sation of five highest-paid employees | (other | than those | include | ed on line | 1see | | | none, | enter ——— |
| | | d address of each employee paid more than \$50,000 |) | (b) Title, and a hours per v devoted to po | veek | (c) Comper | nsation | (d) Contrib employee plans and compen | benefit deferred | | ense account, allowances |
| NON | E | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | _ | | |
| | | | | | | | | | | | |
| | | | | | | | 1 | 1 | . į į . | | |
| Total | number of | other employees paid over \$50,000 | <u> </u> | <u> </u> | | | 1 | <u> i .</u> | <u> </u> | | , , , , , , , , , , , , , |

| Form | 990-PF (2016) SARTAIN LANIER FAMILY FUN | 58-604 | 45056 Page / |
|------|---|---------------------------------------|------------------|
| Pa | Information About Officers, Directors, Trustees, Foundation and Contractors (continued) | ation Managers, Highly Paid En | nployees, |
| 3 | Five highest-paid independent contractors for professional services | (see instructions). If none, enter "N | IONE." |
| | (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| пои | E | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Tota | I number of others receiving over \$50,000 for professional services | $\underline{\hspace{1cm}}$ | - 1, |
| Pa | rt IX-A Summary of Direct Charitable Activities | | |
| | t the foundation's four largest direct charitable activities during the tax year. Include relevant statisti anizations and other beneficianes served, conferences convened, research papers produced, etc. | cal information such as the number of | Expenses |
| 1 | NONE | | |
| | | | |
| 2 | | | |
| • | | | |
| 3 | | | |
| | | | |
| 4 | | | |
| | | | |
| | rt IX-B Summary of Program-Related Investments (see instru | | r |
| 1 | scribe the two largest program-related investments made by the foundation during the tax year on NONE | ines 1 and 2 | Amount |
| , | | | |
| | | | |
| 2 | •••••• | | |
| | | | |
| | other program-related investments. See instructions | | |
| 3 | NONE | | |
| | | | |
| Tota | i. Add lines 1 through 3 | | 0 |
| | | | 000 DE |

Adjusted qualifying distributions. Subtract line 5 from line 4

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

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

Form 990-PF (2016)

6

| Form 9 | 90-PF (2016) SARTAIN LANIER FAMILY FDN | | 1.4 | 58-6 | 045056 Page 9 |
|--------|---|--|--|-----------|---|
| Part | XIII Undistributed Income (see instructions) |) | | 10 11 | |
| | | (a) | 1 (b) | (c) | (d) |
| 1 | Distributable amount for 2016 from Part XI, | Corpus | Years prior to 2015 | , 2015 | 2016 |
| | line 7 | | | | 4,832,356 |
| 2 | Undistributed income, if any, as of the end of 2016 | | | 5.040.500 | |
| a | Enter amount for 2015 only | 200 300 300 300 300 400 400 400 400 400 4 | | 5,348,563 | |
| _ | Total for prior years 20 , 20 , 20 | Mar 10 1 10 10 10 10 10 10 10 10 10 10 10 1 | A STATE OF THE STA | | |
| 3 a | Excess distributions carryover, if any, to 2016 From 2011 | | | | |
| b | From 2012 | | | | |
| c | From 2013 | | | | |
| d | From 2014 | N. A. Walley | | | |
| е | From 2015 | | | | |
| f | Total of lines 3a through e | 0 | | | |
| 4 | Qualifying distributions for 2016 from Part XII, | | | | |
| | line 4 ▶ \$5,525,743 | | | | |
| а | Applied to 2015, but not more than line 2a . | | | 5,348,563 | |
| b | Applied to undistributed income of prior years | | | | |
| | (Election required—see instructions) | STATE OF THE STATE | 100 × 50 (0) 100 × 50 (0) | | |
| С | Treated as distributions out of corpus (Election | | | | |
| | required—see instructions) | M Sarte Same M V 257 | | | 477.400 |
| | Applied to 2016 distributable amount | | * . * | | 177,180 |
| е 5 | Remaining amount distributed out of corpus Excess distributions carryover applied to 2016. | <u></u> | | | *************************************** |
| 3 | (If an amount appears in column (d), the same | | | | |
| | amount must be shown in column (a).) | | | | |
| 6 | Enter the net total of each column as | | | | |
| | indicated below: | | | | |
| а | Corpus Add lines 3f, 4c, and 4e. Subtract line 5 | 0 | | | |
| b | Prior years' undistributed income. Subtract | | | | |
| | line 4b from line 2b | | 0 | | |
| C | Enter the amount of prior years' undistributed | | | | |
| | income for which a notice of deficiency has | | | | |
| | been issued, or on which the section 4942(a) | | | | |
| A | tax has been previously assessed Subtract line 6c from line 6b Taxable | | | | |
| u | amount—see instructions | | | | |
| ۵ | Undistributed income for 2015 Subtract line | | W. Markey V. J. C. | *** | |
| Ū | 4a from line 2a Taxable amount—see | | | | |
| | instructions | | | 0 | |
| f | Undistributed income for 2016, Subtract lines | V | | | |
| | 4d and 5 from line 1. This amount must be | | | | |
| | distributed in 2017 | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 30. W | | 4,655,176 |
| 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) | | | <u> </u> | |
| 8 | Excess distributions carryover from 2011 not | 1 | | ' | |
| _ | applied on line 5 or line 7 (see instructions) . | | · | | 1 |
| 9 | Excess distributions carryover to 2017. | | | | |
| 40 | Subtract lines 7 and 8 from line 6a | | ļ | ļ | |
| 10 | Analysis of line 9 Excess from 2012 | 1 | | | |
| a h | Excess from 2012 | 1 | | | |
| p | Excess from 2014 | 1 | | | |
| ď | Excess from 2015 | 1 | 1 |] | |
| | Excess from 2016 | † | 1 | Ì | |

| Form 9 | 90-PF (2016) SARTAIN LANIER FAI | MILY FDN | | | 58-604 | 15056 Page 10 |
|--------|--|---------------------------------------|-----------------------|-------------------------------------|-----------------------|---------------------------------------|
| Part | XIV Private Operating Foundation | ns (see instru | ctions and Part V | II-A, question 9) | | N/A |
| 1a | If the foundation has received a ruling of | | | | | |
| | foundation, and the ruling is effective for | | | | | |
| b | Check box to indicate whether the foundation | | _ | | 4942(j)(| 3) or 4942(J)(5) |
| 2a | Enter the lesser of the adjusted net | Tax year | T | Prior 3 years | | |
| | income from Part I or the minimum | (a) 2016 | (b) 2015 | (c) 2014 | (d) 2013 | (e) Total |
| | investment return from Part X for | (4) 2010 | 127 2010 | + (0, 2011 | (4) 2010 | 0 |
| ь | each year listed | | | | | 0 |
| | | | | | | |
| С | Qualifying distributions from Part XII, | | | | | 0 |
| _ | line 4 for each year listed | | | | | 0 |
| d | Amounts included in line 2c not used directly | | | | | |
| | for active conduct of exempt activities | | ļ | | | 0 |
| е | Qualifying distributions made directly | | | | ' | . 1 |
| | for active conduct of exempt activities. | | | 1 . | | 1 |
| | Subtract line 2d from line 2c | · · · · · · · · · · · · · · · · · · · | | | | · , , , O |
| 3 | Complete 3a, b, or c for the | | | | ال المرادي | |
| | alternative test relied upon. | | | 1 | | 医环节溶液色谱 |
| а | "Assets" alternative test—enter | | | 111 | | |
| | (1) Value of all assets | | · | ` | | · · · · · · · · · · · · · · · · · · · |
| | (2) Value of assets qualifying under | | | | 1 | |
| | section 4942(j)(3)(B)(i) | | | | , | 0 |
| b | "Endowment" alternative test—enter 2/3 | | | · · · · · · · · · · · · · · · · · · | | |
| | of minimum investment return shown in | | | | ' | ٠٥ |
| С | Part X, line 6 for each year listed . "Support" alternative test—enter | | - | | | |
| · | (1) Total support other than gross | | | | | |
| | investment income (interest, | | | | | |
| | dividends, rents, payments on | | | | | |
| | securities loans (section | | | | | |
| | 512(a)(5)), or royalties) (2) Support from general public | | | <u></u> | | 0 |
| | and 5 or more exempt | | | | | |
| | organizations as provided in | | | | | _ |
| | section 4942(j)(3)(B)(iii) . | | | · | | 0 |
| | (3) Largest amount of support from | | | | | |
| | an exempt organization | | | | | 0 |
| | (4) Gross investment income | | <u> </u> | | · | 0 |
| Part | XV Supplementary Information | (Complete th | is part only if th | e foundation had | d \$5,000 or mor | e in assets at |
| | any time during the year—s | see instruction | ns.) | | | |
| 1 | Information Regarding Foundation N | lanagers: | | | | |
| а | List any managers of the foundation wh | no have contribu | ted more than 2% of | of the total contribut | ions received by t | he foundation 💢 |
| | before the close of any tax year (but on | ly if they have c | ontributed more tha | an \$5,000). (See se | ction,507(d)(2)) | |
| NON | Ē | | | 1 1 | | Part of the state of |
| b | List any managers of the foundation wh | o own 10% or n | nore of the stock of | a corporation (or a | n equally large por | tion of the |
| | ownership of a partnership or other ent | | | | | |
| NON | • | ,, | | , | , , | |
| 2 | Information Regarding Contribution, | Grant Gift Lo | an Scholarshin e | etc Programs | | |
| - | Check here ▶ ☐ if the foundation or | | | _ | izations and doos | not accent |
| | unsolicited requests for funds. If the fou | | | | | |
| | under other conditions, complete items | | girio, gramo, oto. (a | | individuals of organ | 1120110110 |
| | | | | | | 1 |
| а | The name, address, and telephone nur | nber or e-mail a | daress of the perso | on to whom applicat | ions snould be add | aressea |
| | | | | | | |
| | Sartain Lanier Family Foundation c/o Sur | | | | | <u></u> |
| b | The form in which applications should t | oe submitted and | d information and n | naterials they should | d include | |
| | | | | | | |
| N/A | | | | | | |
| c | Any submission deadlines | | | | | |
| N/A | • | | | | | |
| d | Any restrictions or limitations on award | s, such as by ge | ographical areas | charitable fields, kin | ds of institutions of | or other |
| | factors | -, ac c, go | - J P | | | |
| Ν/Δ | - | | | | | |

Form 990-PF (2016)

SARTAIN LANIER FAMILY FDN

58-6045056

Page 11

| Recipient Is an individual show any relationship to any foundation manager or substantial contributor See Attached Statement Purpose of grant or contribution any foundation manager or substantial contributor Recipient Purpose of grant or contribution Status of recipient Recip | Part XV Supplementary Information (conting) 3 Grants and Contributions Paid During t | nued) he Year or Approve | ed for Fut | ure Payment | |
|--|--|---|------------|--------------|---------------|
| Name and address (home or business) a Paid during the year See Attached Statement Total b Approved for future payment | | If recipient is an individual, show any relationship to | Foundation | | Amount |
| a Paid during the year See Attached Statement Total b Approved for future payment | Name and address (home or business) | any foundation manager | | contribution | Amount |
| Total b Approved for future payment Sa 15,40 | | | | , | , |
| b Approved for future payment | | | | | |
| | b Approved for future payment | | | 7 1 | 5,405,185, |
| Total | Total | | | 20 | 0 |
| Total | lotal | | | | 990-PF (2016) |

Form 990-PF (2016)

SARTAIN LANIER FAMILY FDN

58-6045056 Page **12**

| Рa | rt X\ | I-A Analysis of Income-Producing Ac | tivities | | | | |
|--------|---------|---|---------------------------------------|---------------------------------------|-----------------------|---|--|
| | | ss amounts unless otherwise indicated | | isiness income | Excluded by sect | on 512 513, or 514 | (e) |
| | | | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income (See instructions) |
| 1 | | gram service revenue | | | | | (GCG MISTREMENT) |
| | a | | | | | | |
| | b. | | | | | | |
| | c. d | | | | | | |
| | e. | | | | | | |
| | f | | - | | | | |
| | g . | Fees and contracts from government agencies | | | | | |
| 2 | - | mbership dues and assessments . | | | | | |
| 3 | | rest on savings and temporary cash investments | | | | | , , |
| 4 | Dıvı | dends and interest from securities . | | | 14 | 984,399 | |
| 5 | | rental income or (loss) from real estate | | 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 | | \$12°\$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | |
| | | Debt-financed property | | 1. | 1111 | - 1 | |
| _ | | Not debt-financed property | | | , | t ₁ , , , , | |
| 6 | | rental income or (loss) from personal property er investment income | | | | , , | 1 1 |
| 7 8 | | or (loss) from sales of assets other than inventory | | | 18 | -2,623,503 | |
| 9 | | Income or (loss) from special events | | | 70 | -2,023,303 | <u> </u> |
| 10 | | ss profit or (loss) from sales of inventory | | | | | |
| 11 | | er revenue a PARTNERSHIP INCOME | 900001 | 32,230 | 01 | -684,456 | |
| | b | | | | | | |
| | С | | | | | | |
| | d . | | | | ļ | | |
| | e | | | | | | |
| | | ototal. Add columns (b), (d), and (e) | | | | -2,323,560 | |
| | | al. Add line 12, columns (b), (d), and (e) | | | • | 13 | -2,291,330 |
| | | /I-B Relationship of Activities to the A | | ent of Evemnt | Purnoses | | |
| _ | ie No. | | · · · · · · · · · · · · · · · · · · · | | | 1 importantly to the | |
| | ▼ | accomplishment of the foundation's exempt pur | poses (other than | by providing fund | s for such purpo | ses) (See instructi | ons) |
| | | Not Applicable | | | | | |
| | | | | | <u></u> | | , |
| | | | | | | | |
| | | | | | , , | 1 h 1 h 1 h | |
| | | | | | , 1 | · · · · · · · · · · · · · · · · · · · | eri je i sjir ji |
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complet, and complete. Declaration of preparer (other than taxpayer) is based on all infor

Print/Type preparer's nar

SHAWN P. HANLON

Sign

Here

Paid

Preparer

Use Only

Form 990-PF (2016) SARTAIN LANIER FAMILY FDN 58-6045056 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1 (2) Other assets 1a(2) Other transactions: (1) Sales of assets to a noncharitable exempt organization . . . 1b(1 (2) Purchases of assets from a noncharitable exempt organization 1b(2) 1b(3) 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 16(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees : If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements Not Applicable Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true

Preparer's signature

15 61KL

PRICEWATERHOUSECOOPERS, LLP

Firm's address ▶ 600 GRANT STREET, PITTSBURGH PA 15219

Form 990-PF (2016)

May the IRS discuss this return with the preparer shown below

P00965923

13-4008324

412-355-6000

Check X rf

self-employed

Firm's EIN 🕨

11/14/2017

| SARTAIN LANIER FAMILY FON | | | | 58-604 | |
|--|-------------------|----------|---------------------------------------|---------------------------------------|--|
| Continuation of Part XV, Lin | ie 3a (990-PF) - | Gran | ts and Contri | butions Paid | During the Year |
| Recipient(s) paid during the year | | ~ | | | |
| Name | | | | | |
| EAST LAKE FOUNDATION | | | | , | |
| Street | | | | | |
| | | | I | | , |
| City | | State | Zip Code | Foreign Count | i ry |
| Relationship | Foundation Status | [| | | (a 1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| NONE | PC | | 1 | | |
| Purpose of grant/contribution GENERAL CHARITABLE OPERATING | | | ı | | Amount 60,000 |
| Name | | | | | , , , , , , |
| JUNIOR ACHIEVEMENT OF GEORGIA | 4 | | | | |
| Street | | | | | |
| 014 | | | I=. | | |
| City | | State | Zip Code | Foreign Count | :ry |
| Relationship | Foundation Status | <u> </u> | | | |
| NONE | PC | | | | |
| Purpose of grant/contribution | | | | ····· | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 25,000 |
| Name | | | | ' | |
| EAGLE RANCH | | | | | |
| Street | | | | | |
| Cit. | | 04-4- | | le: 6 | |
| City | | State | Zip Code | Foreign Count | iry |
| Relationship | Foundation Status | L | J | | |
| NONE | PC | | | | |
| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | · · · · · · · · · · · · · · · · · · · | | 25,000 |
| Name | | | | · · · · · · · · · · · · · · · · · · · | |
| SOUTHEASTERN COUNCIL OF FOUN | IDATIONS | | | | <u>: 14/1 (4) </u> |
| Street | | | 1 7 | | |
| City | | State | Zip Code | Foreign Count | tme. |
| City | | State | Zip Code | roleigh Count | 'y |
| Relationship | Foundation Status | l | | | |
| NONE | PC | | | | _ |
| Purpose of grant/contribution | | - | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 9,600 |
| Name | | | | | |
| PHILANTHROPY ROUNDTABLE | ······ | | | | |
| Street | | | | | |
| City | | State | Zip Code | Foreign Coun | |
| City | | State | Zip Code | Poreign Coun | пу |
| Relationship | Foundation Status | <u> </u> | L | | |
| NONE | PC | | | | |
| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | <u> </u> | | 2,000 |
| Name | | | | | |
| GEORGIA LIONS LIGHTHOUSE FOUN | NDATION | | | , | |
| Street | | | | | |
| | | | I | | |
| City | | State | Zip Code | Foreign Coun | iry |
| Relationship | Foundation Status | L | L | | <u> </u> |
| NONE | PC | | | , | |
| Purpose of grant/contribution | <u> 1. 2</u> | | | 1 | Amount |
| GENERAL CHARITARI E ODERATING | | | 1 | . h | 2.500 |

| SARTAIN LANIER FAMILY FDN | | | | 58-604 | |
|---|-------------------|--------------|--|----------------|---------------------------------------|
| Continuation of Part XV, Lin | e 3a (990-PF) - | Gran | ts and Cont | ributions Paic | During the Year |
| Recipient(s) paid during the year | | | | | |
| Name | | | | | |
| KIPP METRO ATLANTA SCHOOLS | | | | | |
| Street | | | | | |
| City | | State | Zıp Code | Foreign Coun | try |
| Relationship | Foundation Status | l | <u> </u> | | |
| NONE | PC | | 1 | 1 1 | |
| Purpose of grant/contribution GENERAL CHARITABLE OPERATING | | | 1 - 1 | | Amount 2,500 |
| Name | | | · | Ç | |
| THE COMMUNITY FOUNDATION FOR Street | GREATERATLANTA | Α | | | |
| City | | State | Zip Code | Foreign Cour | try |
| Relationship | Foundation Status | <u> </u> | | | |
| NONE | [PC | | | | [A |
| Purpose of grant/contribution GENERAL CHARITABLE OPERATING | | | | | Amount 7,500 |
| Name | | | | | |
| AGAPE COMMUNITY CENTER | | | | | |
| Street | | | | | |
| City | • | State | Zip Code | Foreign Cour | try |
| Relationship | Foundation Status | | | | ****** |
| NONE | PC | | | , | A |
| Purpose of grant/contribution GENERAL CHARITABLE OPERATING | | | The same of the sa | | Amount 33,334 |
| Name | | | 3 | , . | 1 r _ 1 |
| Street | | | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| Sireet | | | , | | |
| City | | State | Zıp Code | Foreign Cour | itry (1) |
| Relationship | Foundation Status | | | | ' ' , ' |
| NONE | PC | | | | · · · · · · · · · · · · · · · · · · · |
| Purpose of grant/contribution GENERAL CHARITABLE OPERATING | | | | | Amount 50,000 |
| | | | | | 1 |
| Name BEN FRANKLIN ACADEMY | | | | | |
| Street | | | | | |
| City | | State | Zip Code | Foreign Cour | ntry |
| Relationship | Foundation Status | <u> </u> | 1 | | |
| NONE | PC | | | | |
| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 25,000 |
| Name C5 YOUTH FOUNDATION OF GEORG | IA INC | | | | |
| Street | | | | | |
| City | | State | Zip Code | Foreign Cour | ntry |
| Relationship | Foundation Status | | | | State of the state of |
| NONE | PC | | | 3, 1 | 1 Amount |
| Purpose of grant/contribution | | | e ' | -446 | Amount |

| SARTAIN LANIER FAMILY FDN | | | | | 8-6045 | | | 3 of 25 |
|--|--|---|--------------------|----------------|---------------------------------------|------------|---------------------------------------|----------|
| Continuation of Part XV, Lin | e 3a (990-PF) - | Gran | ts and Contri | <u>butions</u> | Paid | Durin | g the | Year |
| Recipient(s) paid during the year | | | | | | | | |
| Name | | | | | r | | | |
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| Continuation of Part XV, Lin | e 3a (990-PF) - | Gran | ts and Co | ontribut | ions Paid | During the Yea | r |
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| Continuation of Part XV, Lir | ne 3a (990-PF) - | Gran | ts and Con | tributions Paid | During the Year |
| Recipient(s) paid during the year | | | | | |
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| SARTAIN LANIER FAMILY FUN | | | | | 5056 Page 6 01 25 |
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| Continuation of Part XV, Lin | e 3a (990-PF) - | Grant | ts and Conti | ributions Paid | I During the Year |
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| SARTAIN LANIER FAMILY FDN | | | | 58-604 | 5056 Page 7 of 25 |
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| Continuation of Part XV, Lir | ie 3a (990-PF) - | Gran | ts and Cont | ributions Paid | During the Year |
| Recipient(s) paid during the year | | | | | |
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| SARTAIN LANIER FAMILY FON | · | | | 58-604 | 5056 Page 9 of 25 |
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| Continuation of Part XV, Lin | e 3a (990-PF) - | Gran | ts and Contri | butions Paid | During the Year |
| Recipient(s) paid during the year | | | | | |
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| Name | | | | | |
| GOOD SAMARITAN HEALTH CENTER | <u> </u> | | | | |
| Street | | | | | |
| City | | State | Zip Code | Foreign Coun | tm. |
| City | | State | Zip Code | Foreign Coun | ч |
| Relationship | Foundation Status | L | | | |
| NONE | PC | | | | |
| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 25,000 |
| Name | | | | | |
| HANDS ON ATLANTA | | | | | |
| Street | | | | | |
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| City | | State | Zip Code | Foreign Coun | try |
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| NONE Purpose of grant/contribution | PC | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | 1 , | | 10,000 |
| | | | | | 0,000 |
| Name | | | | | |
| HEARTBOUND MINISTRIES Street | | | | | · · · · · · · · · · · · · · · · · · · |
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| City | | State | Zip Code | Foreign Coun | itrv |
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| Relationship | Foundation Status | | | | |
| NONE | PC | - | | | |
| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 20,000 |
| Name | | | | | |
| HORIZONS ATLANTA | · | | | | |
| Street | | | | | |
| | | | | | |
| City | | State | Zip Code | Foreign Coun | try |
| Relationship | Foundation Status | i | | | |
| NONE | PC PC | | | | |
| Purpose of grant/contribution | <u> </u> | | _ | | Amount |
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| GENERAL CHARITABLE OPERATING | | | | r | 20,000 |

| Continuation of Part XV, Lin | e 3a (990-PF) - | Gran | ts and Contr | | During the Year |
|------------------------------------|---------------------------------------|-------------|---------------|---------------------------------------|--------------------------|
| Recipient(s) paid during the year | | | | | |
| Name | | | | | |
| INTERNATIONAL COMMUNITY SCHO | OL | | | | |
| Street | | **** | | | |
| City | | C4-4- | 7: 0 | F | |
| City | | State | Zip Code | Foreign Count | ry |
| Relationship | Foundation Status | L | .J. <u></u> . | | |
| NONE | PC | | | | |
| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 20,000 |
| Name | | | | | |
| KINDEZI CHARTER SCHOOL Street | | | | | |
| ource: | | | | | |
| City | | State | Zip Code | Foreign Count | ry .' |
| | T | L | | | |
| Relationship NONE | Foundation Status | | | i i i | ووالحارات أروان والواران |
| Purpose of grant/contribution | JPC | ····· | | 1 J. | Amount |
| GENERAL CHARITABLE OPERATING | | , | 1 ' | | 50,000 |
| Name | | | ł | 1, | |
| KIPP METRO ATLANTA COLLABORAT | TIVE | | | , ' | |
| Street | | | | | |
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| City | | State | Zip Code | Foreign Count | ry |
| Relationship | Foundation Status | L | <u>]</u> | | |
| NONE | PC | | | | |
| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 80,000 |
| Name | | | | | |
| THE LOVETT SCHOOL | | | | | |
| Street | | | | | |
| City | · · · · · · · · · · · · · · · · · · · | State | Zip Code | Foreign Count | |
| City | | State | Zip Code | roreign Count | гу |
| Relationship | Foundation Status | | | <u>l.</u> | |
| NONE | PC | | | | |
| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 20,000 |
| Name | | | | | |
| MILL SPRINGS ACADEMY Street | | | | · · · · · · · · · · · · · · · · · · · | |
| Street | | | • | 6 | |
| City | | State | Zıp Code | Foreign Count | rv ** |
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| Relationship | Foundation Status | | | ı | 1 1 1 1 |
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| Relationship NONE | Foundation Status | | | | |
| Purpose of grant/contribution | ₁ , 0 | | | ·· - | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 30,000 |

| SARTAIN LANIER FAMILY FDN | | | | 58-604 | | e 11 of 2 <u>5</u> |
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| Continuation of Part XV, Lin | e 3a (990-PF) - | Gran | ts and Cor | ntributions Paid | During 1 | the Year_ |
| Recipient(s) paid during the year | | | | | | |
| Name PIEDMONT HEALTHCARE FOUNDAT | ON | | | | | |
| Street | ON | | | | | |
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| NONE Purpose of grant/contribution | IPC | | ······································ | | Amount | |
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| RAINBOW VILLAGE INC Street | | | | * · · · · · · · · · · · · · · · · · · · | <u>, , , , , , , , , , , , , , , , , , , </u> | |
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| GENERAL CHARITABLE OPERATING | | | | | Amount | 20,000 |
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| RONALD MCDONALD HOUSEICHARI | TIES ATLANTA | | | | | |
| Street | | | | | | |
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| Relationship | Foundation Status | | <u> </u> | | | <u></u> |
| NONE | PC | | | | | |
| Purpose of grant/contribution | | | | | Amount | 40.000 |
| GENERAL CHARITABLE OPERATING | | | | | | 16,666 |
| Name SKYLAND TRAIL | | | | | | |
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| City | | State | Zip Code | Foreign Coun | try | ٠, |
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| Purpose of grant/contribution | | | | | Amount | |
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| Name | | | | | | |
| SOUTHFACE Street | | | | | | |
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| Relationship | Foundation Status | l | L | | | |
| NONE | PC | | | | | |
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| Continuation of Part XV, Lin | e 3a (990-PF) - | Gran | ts and Cor | ntributions Pa | id During the Year |
| Recipient(s) paid during the year | ., , | | | | |
| Name | | | | | |
| ST. JUDE"S RECOVERY CENTER INC | • | | | | , |
| Street | / <u>.</u> | | 1 | | 1 |
| | | | | 1 4 | |
| City | | State | Zip Code | Foreign Cou | intry (|
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| Relationship | Foundation Status | | 1.4 | . () | 一个,还在哪一个战场的是 |
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| Purpose of grant/contribution | | | | • | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 20,000 |
| Name | | | | | |
| STATE YMCA OF GEORGIA INC | | | | | |
| Street | | | | | |
| O:4- | | | | ls : 0 | <u>-</u> |
| City | | State | Zip Code | Foreign Cou | intry |
| Relationship | Foundation Status | l | L | | |
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| Purpose of grant/contribution | 1.0 | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 5,000 |
| Name | | | | | |
| TREES ATLANTA | | | | | |
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| City | · · | State | Zıp Code | Foreign Cou | intry |
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| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 40,000 |
| Name | | | | | |
| TRUANCY INTERVENTION PROJECT | GEORGIA INC | | | | |
| Street | | | | | |
| City | | 04-4- | 7:- 0-4- | [F 0a- | |
| City | | State | Zip Code | Foreign Cou | untry |
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| Purpose of grant/contribution | <u> 1 </u> | | | | Amount |
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| Name | | | | | |
| THE TRUST FOR PUBLIC LAND | | | | | • |
| Street | | | | | |
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| City | | State | Zip Code | Foreign Cou | untry |
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| Relationship | Foundation Status | | | | |
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| Purpose of grant/contribution | | | | • | Amount |

| SARTAIN LANIER FAMILY FUN | | | | 58-604 | 5056 Page 13 of 25 |
|-----------------------------------|-------------------|-------------|---------------------------------------|-----------------|---|
| Continuation of Part XV, Lir | ne 3a (990-PF) - | Gran | ts and Con | tributions Paid | During the Year |
| Recipient(s) paid during the year | | | | | |
| Name | | | | , | |
| WELLSPRING LIVING INC | | | | | 1 |
| Street | | | | | |
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| City | | State | Zip Code | Foreign Coun | trv |
| | | 01210 | | | |
| Relationship | Foundation Status | | L | | |
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| Purpose of grant/contribution | | | | | Amount |
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| WESLEYAN SCHOOL Street | | | | | · · · · · · · · · · · · · · · · · · · |
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| WHITEFIELD ACADEMY | | | | <u> </u> | |
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| Relationship | Foundation Status | | | | |
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| Purpose of grant/contribution | • | | | | Amount |
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| Relationship | Foundation Status | | • | | 医工事作用 的复数结局 |
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| Purpose of grant/contribution | | | 1.4 | | Amount |
| GENERAL CHARITABLE OPERATING | } | | | | 30,000 |
| Name | | | | | |
| YOUNG WOMEN'S CHRISTIANIASSO | OCIATION OF GREAT | ER ATI | _ANTA | | |
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| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | 3 | | | | 10,000 |

| SARTAIN LANIER FAMILY FDN | | | | | 5056 Page 14 of 25 |
|--|-------------------|----------|----------|---------------------|--|
| Continuation of Part XV, Lin Recipient(s) paid during the year | e 3a (990-PF) - | Gran | | <u>butions Paid</u> | During the Year |
| . ,,, | | | ' 1 | | |
| Name CANINE ASSISTANTS | | | ' | 1 | |
| Street | | | | | • |
| City | | State | Zip Code | Foreign Count | ry |
| Relationship NONE | Foundation Status | | | | |
| Purpose of grant/contribution GENERAL CHARITABLE OPERATING | JFC | | | | Amount 30,000 |
| Name BEN FRANKLIN ACADEMY | | | | | |
| Street | | | | | |
| City | | State | Zip Code | Foreign Count | ry |
| Relationship NONE | Foundation Status | <u> </u> | | , | |
| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 10,000 |
| Name ATLANTA FAMILIES' AWARDS FORE | XCELLENCE IN EDU | ICATIO | N. INC | 1 4 | |
| Street | | - | | | |
| City | | State | Zip Code | Foreign Count | ry |
| Relationship NONE | Foundation Status | | L | | |
| Purpose of grant/contribution GENERAL CHARITABLE OPERATING | | | | | Amount 25 000 |
| Name VANDERBILT UNIVERSITY | | | | | |
| Street | | | | | |
| City | | State | Zip Code | Foreign Count | try |
| Relationship NONE | Foundation Status | | | | - |
| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 2,750 |
| Name THE COMMUNITY FOUNDATION FOR Street | GREATER (ATLANT | Α | | | |
| Sileet | | | | | |
| City | | State | Zip Code | Foreign Coun | try |
| Relationship NONE | Foundation Status | <u> </u> | | | A STATE OF THE STA |
| Purpose of grant/contribution GENERAL CHARITABLE OPERATING | | i | | | Amount 33,000 |
| Name ATLANTA BOTANICAL GARDEN | | | | | |
| Street | | | | | |
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| SARTAIN LAINER FAIVILT FUN | 0 (000 DE) | | | | 0000 Page 10 01 25 |
|-----------------------------------|-------------------|-------------|----------------|---------------|--|
| Continuation of Part XV, Lin | ie 3a (990-PF) - | <u>Gran</u> | ts and Contrib | outions Paid | i, During the Year |
| Recipient(s) paid during the year | | , | `}., | | 医骨骨髓 流 海市 |
| Name | | | i . | | |
| EMORY BRAIN HEALTH CENTER | | | | . ' | |
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| Purpose of grant/contribution | <u> </u> | | | | Amount |
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| NATIONAL CENTER FOR FAMILY PHI | | | | | |
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| Purpose of grant/contribution | | | | , | Amount |
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| Name | | | | | |
| NEXT GENERATION MEN INC | | | <u> </u> | · | |
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| City | | State | Zip Code | Foreign Coun | try 🎨 🔒 🚎 🖽 |
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| Relationship | Foundation Status | | | | |
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| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 10 000 |
| Name | | | | | |
| AMERICAN RED CROSS | | | | | |
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| City | | State | Zip Code | Foreign Coun | try |
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| THE EMPTY STOCKING FUND | | | | | |
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| FEED MY LAMBS INC | | | , | i ji | |
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| Purpose of grant/contribution | | | | | Amount |
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| SARTAIN LANIER FAMILY FUN | 0- (000 5-1) | | 4 | 4!! | 36-604 | | 10 01 23 |
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| Continuation of Part XV, Lin | <u> 1e 3a (990-PF) -</u> | Gran | ts and Co | ntribul | ions Paic | uring t | ne year |
| Recipient(s) paid during the year | | , | | | | 4 - 1 3 | 445 C. (19) |
| Name | , | | .] 4 | | | | |
| FRIENDS OF ENGLISH AVENUE | | | 1 | | 1 1 | | 1 2 1 1 1 |
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| Purpose of grant/contribution | <u> </u> | | | | | Amount | |
| GENERAL CHARITABLE OPERATING | 3 | | | | | <u>L</u> | 15,000 |
| Name | | | | | | | |
| GEORGIA CONSERVANCY | | | | | | | |
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| Purpose of grant/contribution | | | | | | Amount | 45.000 |
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| Purpose of grant/contribution | <u> </u> | | | | | Amount | |
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| Purpose of grant/contribution | | | | | | Amount | |
| GENERAL CHARITABLE OPERATING | · | | | | | <u> </u> | 25,000 |
| Name | | | | | | | |
| GREENHOUSE SCHOLARS | | | | | | | |
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| City | | State | Zip Code | F | oreign Coun | try | |
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| Purpose of grant/contribution | | | | | | Amount | _ _ |
| GENERAL CHARITABLE OPERATING | 3 | | | | | | 20,000 |

| SARTAIN LANIER FAMILY FUN | | | | 58-604 | ouoo Page | 17 OF 23 |
|-----------------------------------|---------------------------------------|-------------|--------------|---------------------------------------|-------------------|-----------------|
| Continuation of Part XV, L | ine 3a (990-PF) - | Gran | ts and Conti | ributions Paic | During t | he Year |
| Recipient(s) paid during the year | | | | | 1 1 1 1 1 1 | 11,1 5, 13 |
| Name | | | | | | Completel : |
| NATIONAL CENTER FOR CIVIL AND | HIMANIRIGHTS | 1 | 1 | | | |
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| Purpose of grant/contribution | 10 | | | | Amount | 40.000 |
| GENERAL CHARITABLE OPERATIN | IG | | | | 1 | 10,000 |
| Name | | | | | | |
| NEW AMERICAN PATHWAYS INC. | | | | · · · · · · · · · · · · · · · · · · · | | |
| Street | | | | | | |
| City | | State | Zip Code | Foreign Coun | tn/ | |
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| Name ATLANTA BOTANICAL GARDEN Street City Relationship NONE Purpose of grant/contribution 10,000 10,000 Amount | | li O | | | | Amount |
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| Street City State Zip Code Foreign Country Relationship Foundation Status PC Purpose of grant/contribution Amount | | | | | | • |
| City State Zip Code Foreign Country Relationship Foundation Status PC Purpose of grant/contribution Amount | | | | | | |
| Relationship NONE Purpose of grant/contribution Relation Status PC Amount | | | | | | |
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| NONE PC Purpose of grant/contribution Amount | | | | | | • |
| Purpose of grant/contribution Amount | Relationship | Foundation Status | | | | |
| | | PC | | | | |
| | B | | | | | 14 |

| SARTAIN LANIER FAMILY FDN | | | | 58-604 | 5056 Page 20 of 25 |
|---|-------------------|--|--|---|---|
| Continuation of Part XV, Lin | e 3a (990-PF) - | Gran | ts and Cont | tributions Paid | During the Year |
| Recipient(s) paid during the year | • | | | , 1 | |
| Name | | | | | |
| ATLANTA MEMORIAL PARK CONSER | VANCY | | | · ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' | Complete the first of the |
| Street | | | ! | | |
| City | | State | Zıp Code | Foreign Coun | try , , , , , , , , , , , , , , , , , , , |
| Relationship | Foundation Status | L | 1 | <u></u> | |
| NONE | PC | | | | |
| Purpose of grant/contribution GENERAL CHARITABLE OPERATING | | | | | Amount 15,000 |
| Name | | | | | |
| ATLANTA NEIGHBORHOOD CHARTE Street | R SCHOOL | ······ | · · · · · · · · · · · · · · · · · · · | | |
| City | | State | Zip Code | Foreign Coun | try |
| | | | • | | <u> </u> |
| Relationship NONE | Foundation Status | | | | |
| Purpose of grant/contribution | 1 | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 15,000 |
| Name | | | | | |
| ATLANTA POLICE FOUNDATION Street | | | | . | |
| Street | | | | , | 1 |
| City | | State | Zip Code | Foreign Coun | try |
| Relationship | Foundation Status | ' | | 1 | 化 国际 高级特别 |
| NONE Purpose of grant/contribution GENERAL CHARITABLE OPERATING | PC | ······································ | 1 | | Amount 50,000 |
| | | | ······································ | | 30,000 |
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| Street | | | | | |
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| City | | State | Zip Code | Foreign Coun | try |
| Relationship | Foundation Status | L | L | J., | |
| NONE | PC | | | | |
| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 25,000 |
| Name | | | | | |
| GATEWAY CENTER Street | | | | | |
| on cor | | | | | |
| City | | State | Zip Code | Foreign Coun | try |
| Relationship | Foundation Status | | <u> </u> | <u> </u> | |
| NONE | PC | | | | |
| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 25,000 |
| Name KINDEZI SCHOOLS | | | ı | - Part of the | 5 事業款 流腾 |
| Street | | 1 | , ť. <i>'</i> | 14 6 1 1 1 1 | |
| City | | State | Zip Code | Foreign Coun | try |
| Relationship | Foundation Status | <u> </u> | 1 | I | .' |
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| Purpose of grant/contribution | | | | | Amount |

| SARTAIN LANIER FAMILY FUN | - 2- (000 DE) | Cront | to and Con | | During the Year |
|---|--|--|------------|------------------|---|
| Continuation of Part XV, Line Recipient(s) paid during the year | e 3a (990-PF) - | Gram | is and Con | tributions Faiu | During the Teal |
| | | | , , | | |
| Name | | | | 1 | |
| LAAMISTAD INC Street | | | | | |
| Street | | | | | |
| City | | State | Zip Code | Foreign Count | ry |
| | | | <u> </u> | | _ |
| Relationship NONE | Foundation Status | | | | |
| Purpose of grant/contribution | ILC | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 25,000 |
| Name | | | | | |
| NO LONGER BOUND | | | | | |
| Street | | | | | |
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| Relationship | Foundation Status | | .1 | | |
| NONE | PC | | _ | | |
| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 33,334 |
| Name | | | | 4 1 | 1, |
| OUR HOUSE INC | | | | | 1 |
| Street | | | . 1 . 7 | and the state of | |
| City | | State | Zip Code | Foreign Count | <u>rv</u> |
| City | | State | Zip Code | l oreign count | |
| Relationship | Foundation Status | | | | , |
| NONE | PC | | | | T |
| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | | | | | 25,000 |
| Name | | | | | |
| PATH FOUNDATION | | | | | |
| Street | | | | | |
| City | | State | Zip Code | Foreign Count | ry |
| | | | ļ · | | |
| Relationship | Foundation Status | | | | |
| NONE | <u> PC </u> | | | | Amount |
| Purpose of grant/contribution GENERAL CHARITABLE OPERATING | | | | | 33,334 |
| | | | | | |
| Name | | | | | |
| UTOPIAN ACADEMY FOR THE ARTS Street | | | | | |
| | | | | | |
| City | | State | Zip Code | Foreign Count | ry , |
| | 1 | l | <u></u> | | |
| Relationship | Foundation Status | | 1 | | 新国主义 经无方流 |
| NONE Purpose of grant/contribution | PC | 1 | | | Amount |
| GENERAL CHARITABLE OPERATING | | | 11 | | 20,000 |
| Name | | | | | |
| VOICES FOR GEORGIA'S CHILDREN | | | | 1 | |
| Street | | | | | |
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| City | | State | Zip Code | Foreign Count | ıry |
| Dalationabia | Faundation Status | | | L | |
| Relationship NONE | Foundation Status | | | | |
| Purpose of grant/contribution | <u> 1</u> | | | | Amount |
| GENERAL CHARITABLE OPERATING | | <u>. </u> | | | 15,000 |

| SARTAIN LANIER FAMILY FON | | | | 58-604 | |
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| Continuation of Part XV, Lir | ne 3a (990-PF) - | Gran | ts and Contri | butions Paid | During the Year |
| Recipient(s) paid during the year | | | | | |
| Name YEAR UP ATLANTA | | | | | |
| Street | | | | | |
| | | | | | |
| City | | State | Zip Code | Foreign Coun | try |
| Relationship | Foundation Status | L | <u> </u> | | , 1 |
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| Purpose of grant/contribution GENERAL CHARITABLE OPERATING | ; | | | | Amount 100,000 |
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| ATLANTA CENTER FOR SELF-SUFFI | CIENCY | | | | |
| Street | | | | i ' | |
| City | | State | Zip Code | Foreign Coun | trv |
| City | | State | Zip Code | l oreign coun | y |
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| NONE | PC | | | | |
| Purpose of grant/contribution | | | | | Amount 20,000 |
| GENERAL CHARITABLE OPERATING | · · · · · · · · · · · · · · · · · · · | | ··· | | 20,000 |
| Name | | | | | |
| ATLANTA HABITAT FOR HUMANITY Street | | | | | · · · · · · · · · · · · · · · · · · · |
| Street | | | | | |
| City | | State | Zip Code | Foreign Coun | try |
| | | | | | |
| Relationship | Foundation Status | | | | |
| NONE | PC | | | | |
| Purpose of grant/contribution | | | | | Amount |
| GENERAL CHARITABLE OPERATING | <u> </u> | | | | <u> </u> |
| Name | | | | | |
| ATLANTA LEGAL AID SOCIETY INC | | | | | |
| Street | | | | | 1 1 |
| City | | State | Zip Code | Foreign Coun | try (1) |
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| Relationship | Foundation Status | | | 3 1 | |
| NONE | PC | | | | |
| Purpose of grant/contribution | • | | | | Amount 25.000 |
| GENERAL CHARITABLE OPERATING | · · · · · · · · · · · · · · · · · · · | | · · · · · · · · · · · · · · · · · · · | | |
| Name | | | | | |
| BIG BROTHERS/BIG SISTERS OF ME Street | TRO ATLANTA | | | | |
| Street | | | | | |
| City | | State | Zip Code | Foreign Coun | itry |
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| Purpose of grant/contribution | 、 | | | | Amount |
| GENERAL CHARITABLE OPERATING |) | | | | 20,000 |
| Name | | | | | |
| BUCKHEAD CHRISTIAN MINISTRY | | | | · · · · · · · · · · · · · · · · · · · | |
| Street | | | | | |
| City | | State | Zip Code | Foreign Coun | itry |
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| Relationship | Foundation Status | | | | |
| NONE | PC | | 1 | | |
| Purpose of grant/contribution | | | | 1 1 | Amount |
| GENERAL CHARITABLE OPERATING | 3 | | | <u> </u> | 12,000 |

| SARTAIN LANIER FAMILY FDN | | | | | 58-6045 | 0056 Page | 23 01 25 |
|--|--|-------|---------------------------------------|-------------|---------------------------------------|--|-------------------|
| Continuation of Part XV, Lin | e 3a (990-PF) - | Grant | ts and C | ontrib | utions Paid | During t | he Year |
| Recipient(s) paid during the year | · · · · · · · · · · · · · · · · · · · | ***** | | | | | |
| Name | | | | | | | |
| CENTENNIAL ACADEMY | | | | | | | |
| Street | | | | | | | |
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| City | | State | Zip Code | | Foreign Count | rv | |
| , | | | | | | . , | |
| Relationship | Foundation Status | | L | | | | |
| NONE | PC | | | | | | |
| Purpose of grant/contribution | | | | | | Amount | |
| GENERAL CHARITABLE OPERATING | | | | | | <u> </u> | 16,666 |
| Name | | | | | | | |
| ATLANTA HISTORY CENTER | | | | | | | |
| Street | | | · · · · · · · · · · · · · · · · · · · | | | | 1, , |
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| City | × ···· · | State | Zip Code | | Foreign Count | try 5'''' | 135,000,000 |
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| Relationship | Foundation Status | | 1 | | | | 7 7 7 |
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| Purpose of grant/contribution | | | | | | Amount | , , , ' |
| GENERAL CHARITABLE OPERATING | | | | | | 1 | 15,000 |
| Name | | | | | | | |
| CHILDREN'S HEALTHCARE OF ATLA | NTAIEOUNDATION | | | | | | |
| Street | TTT TELL COLLEGE TO THE | | | | | | |
| | | | | | | | |
| City | | State | Zip Code | | Foreign Count | trv | |
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| GENERAL CHARITABLE OPERATING | | | | | | | 40,000 |
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| Name | NATEO. | | | | | | |
| COURT APPOINTED SPECIAL ADVOC | JAIES | | | | | | |
| Street | | | | | | | |
| City | | State | Zip Code | | Foreign Coun | try | |
| Olly | | Clate | Lip Couc | | l oreign ocum | , | , |
| Relationship | Foundation Status | | l | | | | |
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| Purpose of grant/contribution | 1: | | | ••• | | Amount | 1 5, 10 |
| GENERAL CHARITABLE OPERATING | | | | 1 | 1 3 to 1 - 7 | 1 15 1 | 25,000 |
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| Name | LINA OF SATI ANITA | | | | , , | · ', } · | |
| IMAGINE IT! THE CHILDREN'S MUSE Street | UM OF ATLANTA | | | | , , | | |
| Street | | | | | | | 1 |
| City | | State | Zip Code | | Foreign Coun | tn, | |
| City | | State | Zip Code | | l oreign coun | ч | |
| Relationship | Foundation Status | L | J | | .l | | |
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| Purpose of grant/contribution | IFC | | | | | Amount | |
| GENERAL CHARITABLE OPERATING | | | | | | Amount | 16,666 |
| | | | | | | | 10,000 |
| Name | | | | | | | |
| NEXT GENERATION MEN | | | | | | | |
| Street | | | | | | | |
| | | | (<u> </u> | | | | |
| City | | State | Zip Code | | Foreign Coun | try | |
| Datationality | F | L | <u> </u> | | | | |
| Relationship | Foundation Status | | | | | | |
| NONE | PC | | | | | A == == == == == == == == == == == == == | |
| Purpose of grant/contribution | | | | | | Amount | 15,000 |

| SARTAIN LANIER FAMILY FON | | | | | 5056 Page 24 of | |
|------------------------------------|-------------------|----------|---|---|---------------------------------------|----------------------|
| Continuation of Part XV, Lin | e 3a (990-PF) - | Gran | ts and Co | ntributions Paid | I During the Yea | ar. |
| Recipient(s) paid during the year | | | | | | , (°, ₁ , |
| Name | | | , | , , , , | | |
| UAB SCHOOL OF MEDICINE, DEPART | MENT OF NEUROL | OGY | | | | |
| Street | | | | | | |
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| City | | State | Zıp Code | Foreign Coun | try | |
| Relationship | Foundation Status | | L | | | |
| NONE | PC | | | | | |
| Purpose of grant/contribution | <u> </u> | | | | Amount | |
| GENERAL CHARITABLE OPERATING | | | | | 500, | ,000 |
| Name | | | | | | |
| ROBERT W WOODRUFF ARTS CENTE | ER INC | | | | | |
| Street | | | | | | |
| | | | | | | |
| City | | State | Zip Code | Foreign Coun | try | |
| | | L | <u>l </u> | | | |
| Relationship | Foundation Status | | | | | |
| NONE Purpose of grant/contribution | JPC | | | | Amount | |
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| | | | | | , , , , | ,000 |
| Name | | | | | | |
| THE COMMUNITY FOUNDATION FOR | GREATER ATLANT | Α | | | | . |
| Street | | | , | | | 1.13 |
| City | | State | Zip Code | Foreign Coun | itry | |
| Oity | | State | Zip Code, | i oreign ocan | | . 1 |
| Relationship | Foundation Status | L | . | | | |
| NONE | PC | | | | , , , , , , , , , , , , , , , , , , , | |
| Purpose of grant/contribution | | | | | Amount | |
| GENERAL CHARITABLE OPERATING | | | | | 300, | ,000 |
| Name | | | | | | |
| UNITED WAY | | | | | | |
| Street | | | | | | |
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| City | | State | Zıp Code | Foreign Cour | itry | |
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| GENERAL CHARITABLE OPERATING | | | | | | ,000 |
| | | | | | | ,000 |
| Name | | | | | | |
| EMORY UNIVERSITY Street | | | | | | |
| Street | | | | | | , |
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| Relationship | Foundation Status | · | | 1 1 | | 1 |
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| Purpose of grant/contribution | | 1 | s! | | Amount | 1,11 |
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| VANDERBILT UNIVERSITY | | | | | · · · · · · · · · · · · · · · · · · · | |
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| City | | State | Zip Code | Foreign Cour | itry | |
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| Relationship | Foundation Status | | | | | |
| NONE Purpose of grant/contribution | IPC | | | | Amount | |
| GENERAL CHARITABLE OPERATING | | | | | 1,020 | .500 |
| CENTRAL CONTRACTOR CONTRACTOR | | | | | | 1220 |

| SARTAIN LANIER FAMILY FUN | | | | 56-6045 | |
|---|---------------------|-----------|--------------|--|-----------------|
| Continuation of Part XV, L | ine 3a (990-PF) - (| Grant | s and Contri | butions Paid | During the Year |
| Recipient(s) paid during the year | | | | | |
| Name TEACH FOR AMERICA | | | | | |
| Street | | | | | |
| | | | | | |
| City | | State | Zip Code | Foreign Count | ry |
| Relationship | Foundation Status | | | | |
| NONE | PC | | | | A |
| Purpose of grant/contribution GENERAL CHARITABLE OPERATIN | IG | | | | Amount 125,000 |
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| City | | State | Zip Code | Foreign Count | ry |
| Relationship | Foundation Status | | | | |
| Purpose of grant/contribution | | | | | Amount |
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| Street | | | | | |
| City | | State | Zıp Code | Foreign Count | ry |
| Relationship | Foundation Status | | <u> </u> | | - |
| Purpose of grant/contribution | | | | | Amount |
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| Relationship | Foundation Status | · · · · · | J., | , | |
| Purpose of grant/contribution | | | | · | Amount |
| Name | | | , | The state of the s | |
| Street | | | 1. | 416 13 | |
| City | | State | Zip Code | Foreign Count | rý . |
| Relationship | Foundation Status | | • | | |
| Purpose of grant/contribution | | | | | Amount |
| Name | | | | | |
| Street | | | | | |
| City | | State | Zip Code | Foreign Count | ry |
| Relationship | Foundation Status | | | 1 | |
| Purpose of grant/contribution | | | | | Amount |

Schedule B

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

Schedule of Contributors

2016

Department of the Treasury Internal Revenue Service 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.

Employer identification number Name of the organization 58-6045056 SARTAIN LANIER FAMILY FON Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. General Rule 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 1, 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

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).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

| Name of org | ganization _ANIER FAMILY FDN | | Employer identification number 58-6045056 |
|-------------|--|-------------------------------------|---|
| Part I | Contributors (See instructions). Use duplicate copie | es of Part I if additional space is | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | SARTAIN LANIER Foreign State or Province Foreign Country | \$ 3,500,000 | Person X Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | Foreign State or Province Foreign Country | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | Foreign State or Province Foreign Country | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | Foreign State or Province Foreign Country | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | Foreign State or Province Foreign Country | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| • | Foreign State or Province Foreign Country | \$ | Person Payroll Oncash (Complete Part II for noncash contributions) |

(b)

Description of noncash property given

(b)
Description of noncash property given

(a) No. from

Part I

(a) No.

from

Part I

| Schedule B (F | orm 990, 990-EZ, or 990-PF) (2016) | | Page 3 |
|---------------------------|--|--|---|
| Name of or | ganization LANIER FAMILY FDN | | Employer identification number ' 58-6045056 |
| Part II | Noncash Property (See instructions) Use duplicate co | pies of Part II if additiona | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
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(c) FMV (or estimate)

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FMV (or estimate)
(See instructions)

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For Prov

Country

| Schedule B (F | Form 990, 990-EZ, or 990-PF) (2016) | | Page 4 |
|---------------------------|---|--|---|
| Name of org | - | | Employer identification number |
| Part III | LANIER FAMILY FDN Exclusively religious, charitable, etc., co (10) that total more than \$1,000 for the ye | ntributions to organizations of ar from any one contributor. | 58-6045056 described in section 501(c)(7), (8), or Complete columns (a) through (e) and |
| | the following line entry. For organizations co- contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional s | (Enter this information once Se | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| | | (e) Transfer of gift | to the work Abrah Abrah Abrah |
| | Transferee's name, address, and ZII | P + 4 Relation | onship of transferor to transferee |
| | | | |
| | For Prov. Country | | · |
| (a) No. from Part I | For Prov Country (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| raiti | | | |
| | | | |
| | | (e) Transfer of gift | |
| | Transferee's name, address, and ZII | D ± 4 Polatic | onship of transferor to transferee |
| | Transferee's name, address, and Zh | | on simple of transferor to transferoe |
| | | | |
| (a) No. | For Prov Country | | |
| 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 ZII | P + 4 Relati | onship of transferor to transferee |
| | | | |
| | For Day | | |
| (a) No. from | For Prov Country (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| Part I | (a) i aipase oi giii | (b) Osc or girt | (a) besorption of note give note |
| | | | |
| | | | |
| | | (e) Transfer of gift | |
| | Transferee's name, address, and ZI | P + 4 Relati | onship of transferor to transferee |
| | | | |

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Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

| 7 | | | | | | | | | | | | | | |
|------------------------------|-----------|------------|-----------|--------------|-------------|------------|------------|----------------------|-------------|-----------|--|---|---------------------|------------|
| | Amount | | | | | | | Totals | Gross | SSC Sel | Cost or Other Basis Expenses Depreciation and Adjustments | Sost or Other Basis Expenses Depreciation and Adjustments | Net Gain or Loss | Sain SS |
| Long Term CG Distributions | 71,968 | | | | | | Ö | Capital Gains/Losses | | 9,710,252 | | 12,333,755 | | -2,623,503 |
| Shart Term CG Distributions | 0 | | | | | | i | Other sales | | 0 | | 0 | | 0 |
| | | Chock "Y" | | Check "X" II | | | | | | | ol O to occorre | | | |
| | | to include | | IS a | Acquisition | Date | Date | Gross Sales | Cost or | Valuation | and Cost of | | | Net Gain |
| Description | CUSIP # | in Part IV | Purchaser | Business | Method | Acquired | Sold | Price | Other Basis | Method | Improvements | Depreciation | Adjustments | or Loss |
| 1 BROWN ADV GROWTH EQTY | 115233702 | × | | | | 2/19/2014 | 12/15/2016 | 1,737,074 | - | | | | 0 | 37,074 |
| 2 BROWN ADV GROWTH EQTY | 115233702 | × | | | | 3/13/2014 | 12/15/2016 | 812,398 | | | | | 0 | 16,493 |
| 3 BROWN ADV GROWTH EQTY | 115233702 | × | • | | | 12/23/2014 | 12/15/2016 | 103 441 | | | | | 0 | -1,939 |
| 4 BROWN ADV GROWTH EQTY | 115233702 | × | | | | 12/21/2015 | 12/15/2016 | 175 856 | | | | | 0 | 550 |
| 5 BROWN ADV GROWTH EQTY | 115233702 | × | | | | 6/17/2016 | 12/15/2016 | 502,354 | | | | | 0 | 2 354 |
| 6 COLUMBIA ACORN EMG MKT | 197199581 | × | | | | 6/4/2014 | 6/17/2016 | 836 | | | | | 0 | -286 |
| 7 COLUMBIA ACORN EMG MKT | 197199581 | × | | | | 3/13/2014 | 6/17/2016 | 299,164 | | | | | 0 | -84, 130 |
| 8 COLUMBIA ACORN EMG MKT | 197199581 | × | , | | | 2/20/2014 | 12/15/2016 | 653,745 | 000,038 | | 1 | | 0 | -196,255 |
| 9 COLUMBIA ACORN EMG MKT | 197199581 | × | | | | 3/13/2014 | 12/15/2016 | 356,745 | • | , | | , | 0 | 109,961 |
| 10 COLUMBIA ACORN EMG MKT | 197199581 | × | | | _ | 12/9/2014 | 12/15/2016 | 10,199 | | | | | 0 | -2,765 |
| 11 COLUMBIA ACORN EMG MKT | 197199581 | × | | | j | 12/9/2015 | 12/15/2016 | 24,299 | | | | | 0 | -585 |
| 12 COLUMBIA ACORN EMG MKT | 197199581 | × | | | | 12/7/2016 | 12/15/2016 | 10,431 | | | | | 0 | -73 |
| 13 DODGE & COX INTL STOCK R | 256206103 | × | | | | 2/19/2014 | 6/17/2016 | 400,000 | | | | | 0 | -92,281 |
| 14 MFS INTL GROWTH-I | 55273E848 | × | 100 | | | 2/19/2014 | 6/17/2016 | 450,000 | | | , | | Ō | -28,341 |
| 15 COHO REL VALUE EQUITY-A | 56166Y636 | × | | | | 2/19/2014 | 12/15/2016 | 2,072 821 | - | , | | | 6 | 372,821 |
| 16 COHO REL VALUE EQUITY-A | 56166Y636 | × | | | | 3/13/2014 | 12/15/2016 | 1,023,570 | | | | | 0 | 173,087 |
| 17 COHO REL VALUE EQUITY-A | 56166Y636 | × | | | | 12/23/2014 | 12/15/2016 | 53 063 | 50,371 | | | | 0 | 2,692 |
| 18 COHO REL VALUE EQUITY-A | 56166Y636 | × | | | | 12/23/2015 | 12/15/2016 | 85,746 | | | | | 0 | 7,184 |
| 19 COHO REL VALUE EQUITY-A | | × | | | _ | 6/17/2016 | 12/15/2016 | 369,303 | | | . , | , | 0 | 19,303 |
| 20 PARKWAY INC REIT | 701560107 | × | | | | 10/7/2016 | 10/21/2016 | 14 | 16 | | | | 0 | -2 |
| 21 WILLIAMS REALTY FUND I | VARIOUS | × | | | | VARIOUS | VARIOUS | | 2,701,019 | | | | | -2,701,019 |
| 22 FIDELITY | | × | | | | | | | 15,116 | | | | | -15,116 |
| 23 TAILWIND | | × | | | | | | 15,187 | | | | | | 15,187 |
| 24 SSARIS MULTI MANAGER | | × | | | | | | | 247,642 | | | | | -247,642 |
| 25 UBS CARLYLE FUND | | × | , | | | | | | 2,832 | | | _ | | -2,832 |
| 26 DTC PRIVATE EQUITY | | × | | | | | _ | | 6 628 | | | | • | -6,628 |
| 27 TIFF PRIVATE EQUITY PARTI | | × | | | | | | 161,366 | | | | | | 161,366 |
| 28 COMMONFUND CAPITAL INT | | × | | | | | | 58,410 | | | | | | 58,410 |
| | | × | | | | | | 165,677 | | | | | | 165 677 |
| | | × | | | | | _ | 96,585 | | | | | | 96,585 |
| 31 SAPERE CTA FUND | | × | | | | _ | _ | _ | 333,299 | | _ | | | -333,299 |

Part I, Line 11 (990-PF) - Other Income

| | -652,226 | 0 | | 0 |
|----------------------|--------------|----------------|------------|-----|
| | Revenue | | | İ |
| | and Expenses | Net Investment | Adjusted | - 1 |
| Description | per Books | Income | Net Income | ╝ |
| 1 PARTNERSHIP INCOME | -652,226 | | | |

Part I, Line 16b (990-PF) - Accounting Fees

| | 2,500 | 0 | | 2,500 |
|------------------------------|---|--------------------------|--------------|---|
| Description 1 TAX PREP FEES | Revenue and Expenses per Books 2,500 | Net Investment Income | Adjusted Net | Disbursements for Charitable Purposes (Cash Basis Only) 2,500 |

Part I, Line 16c (990-PF) - Other Professional Fees

| | | 514,597 | 514,597 | 0 | 0 |
|-----|----------------------------|--------------|----------------|--------------|-------------------|
| | | | | | Disbursements |
| 1 | | Revenue and | } | | for Chantable |
| į . | | Expenses per | Net Investment | Adjusted Net | Purposes |
| | Description | Books | Income | Income | (Cash Basis Only) |
| 1 | SUNTRUST FEES | 26,929 | 26,929 | | 0 |
| 2 | CONSULTING/INVESTMENT FEES | 139,372 | 139,372 | | 0 |
| 3 | ADMIN EXPENSE | 26,168 | 26,168 | | <u>'</u> 0 |
| 4 | FIDELITY PROFESSIONAL FEES | 321,978 | 321,978 | | 0 |
| 5 | UBS PROFESSIONAL FEES | 150 | 150 | | <u> </u> |

Part I, Line 18 (990-PF) - Taxes

| | 10,371 | 10,371 | 0 | 0 |
|------------------------|--------------------------------------|--------------------------|---|---|
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
| 1 FOREIGN TAX WITHHELD | 10,371 | 10,371 | • | |

Part I, Line 23 (990-PF) - Other Expenses

| | 464,644 | 464,644 | 0 | 0 |
|------------------------|--------------------------------------|--------------------------|---------------------|---|
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
| 1 PARTNERSHIP EXPENSES | 464,644 | 464,644 | | |

Part II, Line 10b (990-PF) - Investments - Corporate Stock

| | | | 0 | 7,053,784 | 0 | 32,748,731 |
|---|--------------------------|--------------|--------------|-------------|--------------|-------------|
| | | Num. Shares/ | Book Value | Book Value | FMV | FMV |
| | Description | Face Value | Beg. of Year | End of Year | Beg. of Year | End of Year |
| - | | | | | | |
| ~ | CRAWFORD & CO CL A COM | 0 | | 52,096 | | 47,937 |
| က | GENUINE PARTS CO COM | 0 | | 563,718 | | 2,372,258 |
| 4 | OXFORD INDS INC COM | 0 | | 5,591,549 | | 28,217,085 |
| 2 | 5 SUNTRUST BANKS INC COM | 0 | | 846,421 | | 2,111,451 |

Part II, Line 13 (990-PF) - Investments - Other

| | | | 071,189 | 56,129,423 | 54,628,960 |
|----|---------------------------------|-----------|--------------|-------------|-------------|
| | | Basis of | Book Value | Book Value | FMV |
| | Asset Description | Valuation | Beg. of Year | End of Year | End of Year |
| - | | | | 0 | |
| 7 | 2 PARKWAY INC REIT | | 0 | 78,846 | 80,308 |
| 8 | PARKWAY INC REIT | | 0 | 5,301 | 5,399 |
| 4 | DODGE & COX INTL STK FD | | 0 | 2,574,851 | 2,317,063 |
| 2 | VANGUARD INSTL INDEX-I | | 0 | 7,567,055 | 7,441,148 |
| ဖ | MFS INTERNATIONAL GROWTH FUND-I | | 0 | 2,157,136 | 2,100,277 |
| ~ | VULCAN VALUE PARTNERS S/C | | 0 | 1,625,437 | 1,662,865 |
| æ | COUSINS PROPERTIES INC REIT | | 0 | 666 | 245,775 |
| ြ | COUSINS PROPERTIES INC REIT | | 0 | 15,197 | 16,520 |
| 9 | 10 PARTNERSHIP VALUE | | | 16,213,390 | 10,388,695 |
| = | 11 FIDELITY | | | 22,192,347 | 27,630,440 |
| 12 | UMB | | | 2,700,000 | 2,740,470 |
| | | | | | |

Part II, Line 14 (990-PF) - Land, Buildings, and Equipment

| | | 0 | 0 | 0 | 0 | 0 | 0 | |
|---|-------------------------|-------------|---------------------------------------|--------------|--------------|-------------|-------------|--|
| | | | Accumulated | Accumulated | | | | |
| | | Cost or | Depreciation | Depreciation | Book Value | Book Value | FMV | |
| | Asset Description | Other Basis | Beg. of Year | End of Year | Beg. of Year | End of Year | End of Year | |
| - | | | | | 0 | 0 | | |
| 7 | TENET HEALTHCARE CL-ACT | | · · · · · · · · · · · · · · · · · · · | | 0 | 0 | C | |

Part III (990-PF) - Changes in Net Assets or Fund Balances

Line 3 - Other increases not included in Part III, Line 2

| 1 Mutual Fund Timing Difference | 1 | 261_ |
|--|-----|-----------|
| 2 Nonrecourse from partnerships | 2 | 161,630 |
| 3 Fed Tax Refund | 3 | 87,726 |
| 4 Partnership Income Difference | 4 | 1,283,925 |
| 5 Partnership Contributions Adjustment | 5 | 759,613 |
| 6 Cost Basis Adjustment | 6 | 1,225,630 |
| 7 Total | . 7 | 3,518,785 |
| | | |

Line 5 - Decreases not included in Part III, Line 2

| 1 | Mutual Fund Timing Difference | , | 1 1/2 1 11 7 74 | 1.7.1.418 |
|----|--------------------------------|------|-----------------|--------------------|
| 2 | Loss on PY Sales Settled in CY | 1, 1 | | 2 1,970,310 |
| _3 | Total | ٠ | | 3 1,971,728 |

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Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

| | -2,695,471 | Gains Minus | Excess FMV Over | Adj Basis or Losses | 37,074 | 16,493 | -1,939 | -550 | 2,354 | -286 | -84 130 | -196,255 | -109 961 | -2,765 | 582 | -73 | -92 281 | -28,341 | 372 821 | 173,087 | 2,692 | 7,184 | 19,303 | -5 | -2,701019 | -15,116 | 15,187 | -247,842 | -2 332 | -6,628 | 161 366 | 58 410 | 165,677 | 96 585 | -333 299 |
|----------------------------|-----------------------------|----------------|-----------------|------------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|---------------------------|--------------------------|--------------------------|---------------------------|---------------------------|---------------------------|---------------------------|-----------------------------|----------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|---------------------|---------------------------|----------|--------|-------------------------|---------------------|-----------------------|------------------------------|----------------------------|---------------------------|---------------------------|---------------------|
| | 0 | Excess of FMV | Over | Adjusted Basis | 0 | | C | <u>[</u> | 0 | 0 | io | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | jo oj | 0 | 0 | 0 | 0 | 0 | 0 | lo lc | 0 | 0 | 0 | 0 | č |
| | 0 | Adjusted Basis | as of | 12/31/69 |) | | 0 | <u></u> | 0 | | | 0 | 0 | | , , | | | | 0 | | | Ó | | | | | 0 | | | | |) | 0 | Ċ | |
| | | ₽ M < | as of | 12/31/69 | | , | | | | | | | | | | | | , | | | | | | | | | | | | , | | | | | |
| | -2,695,471 | | | Gain or Loss | 37,074 | 16,493 | -1,939 | -550 | 2,354 | -286 | -84,130 | -196 255 | -109,961 | -2,765 | -585 | -73 | -92 281 | -28,341 | 372,821 | 173,087 | 2,692 | 7,184 | 19,303 | -2 | -2,701,019 | -15,116 | 15,187 | -247,642 | -2,832 | -6,628 | 161 366 | 58 410 | 165,677 | 96,585 | -333,299 |
| | 12,333,755 | Cost or Other | Basis Plus | Expense of Sale | 1,700,000 | 795,905 | 105,380 | 176,406 | 200,000 | 1 122 | 383,294 | 850,000 | 466,706 | 12,964 | 24,884 | 10 504 | 492,281 | 478,341 | 1,700 000 | 850,483 | 50,371 | 78 562 | 350,000 | 16 | 2,701 019 | 15,116 | О | 247 642 | 2,832 | 6,628 | 0 | 0 | 0 | 0 | 333 299 |
| | 0 | | | Adjustments | 0 | , | 0 | ō | ō | 0 | 0 | o | 0 | 0 | <u>, o</u> | 0 | 0 | ' 0 | 0 | 0 | · - | 0 | 0 | 0 | | | | | | | | | | | |
| | 0 | | Depreciation | Allowed | | | | | | | | | | | | | | | | | | | | • | | | | | | | | | | | _ |
| | 9,638,284 | | Gross | Sales Price | 1 737 074 | 812,398 | 103,441 | 175 856 | 502,354 | 836 | 299 164 | 653,745 | 356,745 | 10,199 | 24 299 | 10,431 | 400 000 | 450 000 | 2,072,821 | 1 023 570 | 53 063 | 85,746 | 369 303 | 14 | | | 15,187 | | | | 161,366 | 58,410 | 165,577 | 36,585 | |
| | | | Date | Sold | 12/15/2016 | 12/15/2016 | 12/15/2016 | 12/15/2016 | 12/15/2016 | 6/17/2016 | 6/17/2016 | 12/15/2016 | 12/15/2016 | 12/15/2016 | 12/15/2016 | 12/15/2016 | 6/17/2016 | 6/17/2016 | 12/15/2016 | 12/15/2016 | 12/15/2016 | 12/15/2016 | 12/15/2016 | 10/21/2016 | VARIOUS | | | | | | | | | , | |
| | | | Date | Acquired | 2/19/2014 | 3/13/2014 | 12/23/2014 | 12/21/2015 | 6/17/2016 | 6/4/2014 | 3/13/2014 | 2/20/2014 | 3/13/2014 | 12/9/2014 | 12/9/2015 | 12/7/2016 | Ļ | _ | 2/19/2014 | 3/13/2014 | 12/23/2014 | 12/23/2015 | 6/17/2016 | 10/7/2016 | VARIOUS | | | | | | | | | : | _ |
| lec. | 10 | | Acquisition | Method | | | | <u> </u> | | | | | | | | | | - | | | | | | | | | | | | | | - | | | |
| 71.968 |) - | | | CUSIP # | 115233702 | 115233702 | 115233702 | 115233702 | 115233702 | 197199581 | 197199581 | 197199581 | 197199581 | 197199581 | 197199581 | 197199581 | 256206103 | 55273E848 | 56166Y636 | 56166Y636 | 56166Y636 | 56166Y636 | 56166Y636 | 70156Q107 | VARIOUS | | | | | | | | | | |
| Long Term CG Distributions | Short Term CG Distributions | | | Description of Property Sold | 1 BROWN ADV GROWTH EQTY | 2 BROWN ADV GROWTH EQTY | 3 BROWN ADV GROWTH EQTY | 4 BROWN ADV GROWTH EQTY | 5 BROWN ADV GROWTH EQTY | 6 COLUMBIA ACORN EMG MIKT | 7 COLUMBIA ACORN EMG MKT | 8 COLUMBIA ACORN EMG MKT | 9 COLUMBIA ACORN EMG MIKT | 10 COLUMBIA ACORN EMG MKT | 11 COLUMBIA ACORN EMG MKT | 12 COLUMBIA ACORN EMG MKT | 13 DODGE & COX INTL STOCK F | 14 MFS INTL GROWTH-I | 15 COHO REL VALUE EQUITY-A | 16 COHO REL VALUE EQUITY-A | 17 COHO REL VALUE EQUITY-A | 18 COHO REL VALUE EQUITY-A | 19 COHO REL VALUE EQUITY-A | 20 PARKWAY INC REIT | 21 WILLIAMS REALTY FUND I | FIDELITY | | 24 SSARIS MULTI MANAGER | 25 UBS CARLYLE FUND | 26 DTC PRIVATE EQUITY | 27 TIFF PRIVATE EQUITY PARTH | 28 COMMONFUND CAPITAL INTI | 29 COMMONFUND CAPITAL PRI | 30 COMMONFUND CAPITAL VEN | 31 ISAPERE CTA FUND |

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|---------|-----------|-----------------|----------------------------|------------------------|--------------------------|--------------------------|------------------------|------------------------|------------------------|------------------------|------------------------------------|
| _ | Expense | Account | | | | | | | 100 | | |
| 0 | | Benefits | | | ı | | | | | | |
| 236,115 | | Compensation | 2,000 | 2 000 | 2,000 | 2,000 | 2 000 | 2,000 | 2,000 | 2,000 | 220,115 |
| | Avg Hrs | Per Week | S REQ'D | S REQ'D | s rearo | SREO'D | S REQ'D |
| | | Title | CHAIRMAN AS REQ'D & CEO | TRUSTEE AS REG'D PT | TRŪSTEE AS REO'O | TRUSTEE AS REO'D PT | TRUSTEE AS REQ'D PT | TRUSTEE AS REO'D PT | TRUSTEE AS REO'D PT | TRUSTEE AS REG'D PT | DIRECTOR AS REQ'D |
| | | Foreign Country | | | | | | | | ţ | 1 |
| | | Zip Code | 30308 | 30305 | 30305 | 30327 | | | | | 30318 |
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| | ć | | 222 PIEDMONT AVENUE | | 3521 NORTHSIDE DRIVE, NW | 880 CURLEW CT NW | | | | | 656 COLLIER COMMONS CIRCLE ATLANTA |
| | Check "X" | if Business | | | | | | | | | |
| | | мате | J HICKS LANIER C/O OXFORD | CECIL D CONLEE | JULIA LANIER BALLOUN | MRS CLAUDIA M LIVINGSTON | E JENNER WOOD III | V WHITSON LIVINGSTON | LIZA LANIER KANCIK | STÉPHEN S LANIER | MARK B RILEY |
| - 1 | | I. | - | , ~ | က | - ₹ | (1) | ر ا ا | · · | 80 | • |

| Part XIII, Line 2a, Column C (990-PF) - Prior Year Undistributed Income | | |
|--|----|-----------|
| 1 Distributable amounts for 2015 that remained undistributed at the beginning of the 2016 tax year | 1 | 5,348,563 |
| 2 | 2 | |
| 3 | 3 | |
| 4 | 4 | |
| 5 | 5 | |
| 6 | 6 | |
| 7 | 7 | |
| 8 | 8 | |
| 9 | 9 | |
| 10 Total | 10 | E 3/8 563 |