DLN: 93491317008077

2016

OMB No 1545-0052

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For	caler	ndar year 2016, or tax year beginning 01-01-20	016 , aı	nd ending 12-31-	2016	
		indation (FOUNDATION		A Employer ıd	entification numbe	r
				58-6163728		
		f street (or P O box number if mail is not delivered to street address) SHINGTON ROAD NW) Room/suite	B Telephone nu	mber (see instructior	ns)
-			(706) 595-1907	,		
		i, state or province, country, and ZIP or foreign postal code GA 30824	•	C If exemption	application is pending	g, check here
		П				▶ ⊔
G Ch	eck al	I that apply □ Initial return □ Initial return of a □ Final return □ Amended return	former public charity	_	ganizations, check he	▶ ⊔
		☐ Address change ☐ Name change			rganizations meeting k here and attach coi	
——— Н Сh	eck tv	pe of organization ✓ Section 501(c)(3) exempt private	foundation		undation status was t	
	,	$14947(a)(1)$ nonexempt charitable trust \Box Other taxable		under sectio	n 507(b)(1)(A), chec	k nere - —
		xet value of all assets at end J Accounting method	☐ Cash ☑ Accru		ation is in a 60-month	
		rom Part II, col (c), \$ 74,611,119	t be on cash basis)	under sectio	n 507(b)(1)(B), chec	k here
Par	τI	Analysis of Revenue and Expenses (The total	(a) Bayanya and	T T		(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b) Net investment income	(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)	1,637,292			
	2	Check ▶ ☐ If the foundation is not required to attach				
	_	Sch B				
	3 4	Dividends and interest from securities	1,319,795	1,319,795	1,319,795	
	т 5а	Gross rents	393,946		393,946	
	b	Net rental income or (loss) 260,944		1		
o	6a	Net gain or (loss) from sale of assets not on line 10	3,457,905	i		
Revenue	b	Gross sales price for all assets on line 6a				
ŠeĶ	_	14,990,570	0	2.457.005		
-	7	Capital gain net income (from Part IV, line 2) Net short-term capital gain		3,457,905		
	8 9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)	<u></u>			
	11	Other income (attach schedule)	-48,417	,		
	12	Total. Add lines 1 through 11	6,760,521	5,171,646	1,713,741	
	13	Compensation of officers, directors, trustees, etc	285,750	142,875		142,875
	14	Other employee salaries and wages				
es	15	Pension plans, employee benefits	71,438	35,719		35,719
Sue	16a	Legal fees (attach schedule)	1,387	693		694
and Administrative Expenses	b	Accounting fees (attach schedule)	8,800	· ·		4,400
re E	С	Other professional fees (attach schedule)	284,830	142,415		142,415
ati	17	Interest	00.1			
<u> st</u>	18	Taxes (attach schedule) (see instructions)	25,432	12,716		12,716
<u>ا</u> ۾	19	Depreciation (attach schedule) and depletion				
Act	20	Occupancy				
밀	21 22	Travel, conferences, and meetings				
g 9	23	Other expenses (attach schedule)	137,294	135,552		1,742
Operating	24	Total operating and administrative expenses.	20.725	155,552		1,, 12
Ser		Add lines 13 through 23	814,931	474,370		340,561
9	25	Contributions, gifts, grants paid	3,086,230			3,086,230
	26	Total expenses and disbursements. Add lines 24 and 25	2.204 : 5:			2 424 75
\dashv	27	Subtract line 26 from line 12	3,901,161	474,370		3,426,791
	2, a	Excess of revenue over expenses and	2,859,360	,		
	_	disbursements	, ·			
	b	Net investment income (if negative, enter -0-) Adjusted net income(if negative, enter -0-)		4,697,276	1,713,741	
	С	work Reduction Act Notice, see instructions.		Cat No 11289>		m 990-PF (2016)

108,855

65,202,537

9

ارجو

4,829,333

164,869

200

200

71,972,122

71,972,122

71,972,322

71,972,322

	4
	5
	6
	7
2	8
Assets	9
انتے	10a

Less allowance for doubtful accounts

Land, buildings, and equipment basis ▶

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe ▶_

Temporarily restricted

Permanently restricted

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Investments—U S and state government obligations (attach schedule)

Investments—corporate stock (attach schedule)

Less accumulated depreciation (attach schedule) ▶ _______1,789,180

Investments—land, buildings, and equipment basis ▶ ___

Less accumulated depreciation (attach schedule)

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

Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.

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

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow SFAS 117, check here ▶ \Box

Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions)

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

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

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

Analysis of Changes in Net Assets or Fund Balances

set	9
Ą	10a
	b
	С
	11
	12
	13
	14
	15
	16
	10
	17
	18
es	19
를	20
Jac	21 22
_	22
	23
ces	
<u>a</u>	24
8	25
ы	26
Fu	
Assets or Fund Balances	
set	27
AS	28 29 30 31
let	29
~	21
De	rt III
1	Total
1	of-ye

2

4

108,855

66,686,168

4,688,103

149,238

74.611.119

74,610,919

74,611,119

2

3

4

5

6

71,972,122

2,859,360

74,831,482

74,610,919 Form 990-PF (2016)

220,563

108,855

66,686,168

4.688.103

149,238

74,611,119

²⁰⁰ 200 74,610,919

instructions

List and describe th	(a) ne kınd(s) of property sold (e g , re nouse, or common stock, 200 shs	al estate,	(b) How acqui P—Purcha D—Donati	se	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1aSee Additional Data Table						
b						
с						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) r other basis pense of sale		Gain o	h) r (loss)) mınus (g)
a See Additional Data Table						
b						
с						
d						
e						
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	n on 12/31/69			I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) ss of col (ı) ol (յ), ıf any		col (k), but not	h) gain minus less than -0-) or om col (h))
a See Additional Data Table						
b						
С						
d						
e						
· -	or (net capital loss) ain or (loss) as defined in sections : I, line 8, column (c) (see instructions)	ons) If (loss), enter -		; }	3	3,457,90 -544,37
Part V Qualification U	nder Section 4940(e) for Re	duced Tax on Ne	t Investmer	nt In	come	
For optional use by domestic pr	vate foundations subject to the sec	ction 4940(a) tax on r	net investment	ıncom	ie)	
f "Yes," the foundation does not	section 4942 tax on the distributal qualify under section 4940(e) Do	not complete this par	<u>'</u>			es 🗹 No
	ount in each column for each year,	see instructions befor	re making any i	entrie		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharita	able-use assets		(d) Distribution rati (col (b) divided by c	
2015	3,047,967					
2014	2,796,659		63,947,157			0 04373
2013	3,091,558		59,217,067			0 05221
2012	2,891,130 2,727,299		62,209,683 59,134,668			0 04647 0 04612
2 Total of line 1, column (d			39,134,000	2		0 188535
3 Average distribution ratio	for the 5-year base period—divide blation has been in existence if less		5, or by the	3		0 037707
	charitable-use assets for 2016 from			4		71,160,497
			[5		2,683,249
	nt income (1% of Part I, line 27b)		[6		46,973
7 Add lines 5 and 6				7		2,730,222
	ns from Part XII, line 4 ,			8		

Page **3**

Form 990-PF (2016)		Page 7
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly P	aid Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	r "NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include released organizations and other beneficiaries served, conferences convened, research papers produced to the conference of the conferen		er of Expenses
1		
2		
3		
3		
4		
Part IX-B Summary of Program-Related Investments (see	instructions)	
Describe the two largest program-related investments made by the foundation during the	ne tax year on lines 1 and 2	Amount
1		
,		
•		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		•
Total Add Intes I dillough 5		Form 990-PF (2016)
		FULLI 220-FF (2010)

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

3a 3h

4

5

3,426,791

3.379.818

Form 990-PF (2016)

46.973

Amounts set aside for specific charitable projects that satisfy the

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

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

3

4

5

3,426,791

Form **990-PF** (2016)

84,261

(d)

Page 9

Form 990-PF (2	016)
Part XIII	Un

rm	990-PF	(2	016)
Pa	rt XIII		u

m 990-PF (20	016)		
art XIII	Undistributed Income	(see instructions)	

2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only.

1 Distributable amount for 2016 from Part XI, line 7

(a)

Corpus

200.974

84.261

116,713

116,713

116.713

(b)

Years prior to 2015

(c)

2015

- **b** Total for prior years Excess distributions carryover, if any, to 2016
- a From 2011. **b** From 2012. . . . c From 2013. . .
- d From 2014.

c Treated as distributions out of corpus (Election

(If an amount appears in column (d), the

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

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . . **b** Excess from 2013. . c Excess from 2014. . . .

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

Subtract lines 7 and 8 from line 6a

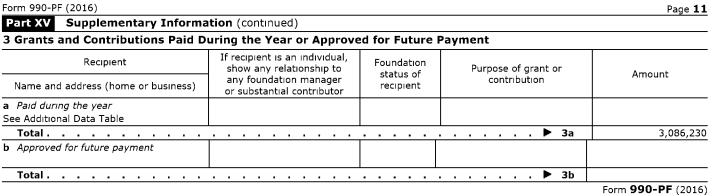
6 Enter the net total of each column as

indicated below:

d Applied to 2016 distributable amount. . . . e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2016

- e From 2015.
- 200,974 f Total of lines 3a through e.
- 4 Qualifying distributions for 2016 from Part
 - XII, line 4 > \$ 3,426,791
- a Applied to 2015, but not more than line 2a
- **b** Applied to undistributed income of prior years (Election required—see instructions).

same amount must be shown in column (a))



	-A Analysis of Income-Producing			Fueluded by an about	- 512 - 514	(e)
ter gross	amounts unless otherwise indicated	(a)	(b)	Excluded by section	(d)	Related or exemp
_	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions
		+				
	and contracts from government agencies					
Intere	ship dues and assessments st on savings and temporary cash					
Dividen	ments			14	1,319,795	
	tal income or (loss) from real estate					
	ebt-financed property			16	260,944	
	ntal income or (loss) from personal property				·	
Other in	vestment income					
	r (loss) from sales of assets other than					
	ory					3,457,90
	rofit or (loss) from sales of inventory					
Other r	, ,					
a MISC F				14	-48,417	
~						
е					1,532,322	3,457,90
e Subtota Total.	Add line 12, columns (b), (d), and (e)			1	1,532,322 3	3,457,90 4,990,227
e Subtota Total. / ee worksh	Add In Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Beet in line 13 instructions to verify calculatio	ns)				
e Subtota Total. / ee worksh art XVI	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio Relationship of Activities to th	^{ns}) e Accomplish	ment of Exem	pt Purposes	3	
e Subtota Total. / ee worksh art XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / ee worksh art XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations Belationship of Activities to the Explain below how each activity for which	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / ee worksh art XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / ee worksh art XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / ee worksh art XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / ee worksh art XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / e worksh art XVI ne No.	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / ee worksh art XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / e worksh art XVI ne No.	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / ee worksh art XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / e worksh art XVI ne No.	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / e worksh art XVI ne No.	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / e worksh art XVI ne No.	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / ee worksh art XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / ee worksh art XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / ee worksh art XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / e worksh art XVI ne No.	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / e worksh art XVI ne No.	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / e worksh art XVI ne No.	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / e worksh art XVI ne No.	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	
e Subtota Total. / e worksh art XVI ne No.	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exemed in column (e) o	pt Purposes of Part XVI-A contribu	3	

. (20	,10)
	Information Regarding Transfers To and Transactions and Relationships With Noncharitable
/II	Exempt Organizations

Part	XVII	Information Re Exempt Organiz		rans	fers To	and Transac	tioi	ns and F	Relatio	nships With No	oncharitab	e		
		ganization directly or in- Code (other than sectio	directly enga								tion 501		Yes	No
a Trai	nsfers f	rom the reporting foun	dation to a ne	oncha	arıtable ex	empt organizat	on (of				\exists		
(1)	Cash.										. 1a	(1)		No
(2)	Other	assets									1a	(2)		No
b Oth	er trans	sactions										П		
(1)	Sales	of assets to a nonchari	table exempt	orga	nızatıon.						1ь	(1)		No
(2)	Purch	ases of assets from a n	oncharitable	exem	npt organi	zation					1b	(2)		No
(3)	Renta	l of facilities, equipmen	it, or other as	ssets.							1b	(3)		No
(4)	Reimb	oursement arrangemen	ts								. 1b	(4)		No
(5)	Loans	or loan guarantees.									1b	(5)		No
(6)	Perform	mance of services or m	embership or	fund	raising so	licitations					. <u>1</u> b	(6)		No
c Sha	ring of	facilities, equipment, m	nailing lists, d	ther	assets, or	paid employee	5.				1	с		No
of t	he good	ver to any of the above ds, other assets, or serv	vices given b	y the	reporting	foundation If t	he f	oundation	receive	d less than fair ma	arket value)		
		saction or sharing arra	,		•	•	the	•		•				
(a) Line	INO	(b) Amount involved	(C) Name of	nonch	aritable exe	empt organization		(a) Desc	лрион ог	transfers, transaction	is, and sharing	311411	gemeni	.5
							-							
	_													
	-						-					—		
							+							
2a Is t	he foun	dation directly or indire	ectly affiliated	with	, or relate	ed to, one or mo	re t	ax-exemp	ot organı	zations	_		_	
des	cribed i	n section 501(c) of the	Code (other	than	section 50	01(c)(3)) or in s	ecti	on 527?.			\Box Y	2 S	✓ No	0
b If "	Yes," co	omplete the following so	chedule											
		(a) Name of organizatio	n		(b) Type of organiz	atıo	n		(c) Description	on of relationsh	p		
												—		
	Unde	er penalties of perjury,	I doclaro that	t I ba	Vo evamir	and this roturn	ınclı	udina acci	ompanyı	ng schodulos and s	-tatements -	nd t	o tha l	acet
		y knowledge and belief												
Sign	whic	h preparer has any kno	wledge											
lere	*	****				2017-11-13		**	****		May the IRS d			
	-	Signature of officer or ti	rustoo			Date		— ▶ _	·lo		with the prepa	_		
		ngriature or officer or ti	ustee			Date		, 110	.16		(see instr)?	Y Y 6	es ⊔ N	0
		Print/Type preparer's	name	Prep	arer's Sig	nature		Date			PTIN			
				•	_					Check if self-	D01	2120	011	
		John P Gillion Jr								employed 🕨 🗹		2121	011	
Paid		John F. Chillott St												
Prep	arer	Firm's name ▶ Bairo	I & Company	CPAs	LLC			<u> </u>		l	F 1 =77			
Jse (Only	Banc		,,	_						Firm's EIN	•		
	-	Firm's address ► 42	10 Columbia	Rd B	ldg 10									
		^	gusta, GA 3	רחםח							Phone no (706)	855-9	500
		Au	gusia, UA 3	090/										
		•									•			

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) How acquired (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 100 AMEX COMPANY Р 2016-01-21 2016-05-04 110 GRAINGER W W INC Ρ 2015-01-29 2016-01-04 18270 KINDER MORGAN INCORP Р 2015-06-26 2016-01-21 200 MCDONALDS CORP Р 2015-02-26 2016-01-21 500 MERCK & COMPANY INC / Р 2015-10-01 2016-05-04 Ρ 900 PRICE T ROVE 2015-01-29 2016-01-22 Р 400 STRYKER CORP 2016-01-21 2016-05-02 Р 720 TEXAS INSTRUMENTS 2016-01-21 2016-05-02 Ρ 2016-01-21 80 TEXAS INSTRUMENTS 2016-12-06 2020 AFLAC I C Р 2013-08-15 2016-12-06 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 6,399 6,317 82 25,953 21,942 -4,011 255,267 608,882 -353,615 23,554 19.889 3,665 27,393 24,823 2,570 60,035 70,857 -10,822 43,844 36,920 6,924 41,473 36,260 5,213 5,665 4,029 1,636 137,715 122,270 15,445 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 82 -4,011 -353,615 3,665 2,570 -10,822 6,924 5,213 1,636 15,445

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 680 AT&T Р 2005-09-21 2016-05-04 6 ADVANSIX COMPANY Ρ 2015-06-01 2016-10-10 167 ADVANSI3060115 Р 2016-10-11 2012-02-05 900 AMEX COMPANY Р 2015-01-29 2016-05-04 430 BLACKROCK INC Ρ 2012-01-05 2016-12-06 Ρ 300 GENUINE PARTS CO 2015-03-25 2016-05-04 Р 160 GRAINGER W W INC 2005-08-30 2016-05-04 Р 3310 HELMERICH ^ PAYNE 2012-09-26 2016-01-15 Ρ 400 JOHNSON & JOHNSON 2000-07-03 2016-05-04 2400 MCDEONALDS CORP Р 2015-02-26 2016-08-03 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 26.384 17,220 9,164 9 8 2,521 2,220 301 57,593 73,837 -16,244160,736 76,798 83,938 28,735 382 28,353 34,892 10,074 24,818 146,928 155,899 -8,971 44,857 16,576 28,281 281,519 238,668 42,851 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 9,164 301 -16,24483,938 382 24,818 -8,971 28,281 42,851

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 500 OMNICOM GROUP INC Р 2011-06-06 2016-05-04 1170 PRICE T ROVE Ρ 2008-02-21 2016-01-22 3830 PRICE T ROVE Р 2008-02-21 2016-08-08 110 STRYKER CORP Р 2008-04-15 2016-05-02 1340 STRYKER CORP Р 2008-04-15 2016-06-24 Ρ 2600 STRYKER CORP 2009-05-01 2016-09-13 Р 2920 TEXAS INSTRUMENTS 2012-07-11 2016-12-06 Р 1570 TUPPERWARE CORP 2013-11-25 2016-01-22 508 WILLIS GROUP HOLDINGS Ρ 2012-07-18 2016-01-12 082 PARKWAY INCORPORATED REIT Р 2016-10-19 2016-10-19 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 41,653 30,533 11,120 78,045 57,729 20,316 344,074 235,606 108,468 12,057 6.939 5,118 156,396 64,668 91,728 286,790 99,954 186,836 206,760 80,800 125,960 92,355 171,432 -79,077 50 59 9 1 2 -1 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 11,120 20,316 108,468 5,118 91,728 186,836 125,960 -79,077 -1

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) How acquired (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 221263 FIRST TRUST GLOBAL TARGET Р 2016-01-12 2016-04-13 RJ w574 Ρ 2016-01-01 2016-06-01 RJ 9785 Р 2016-01-01 2016-06-01 RJ 9785 Р 2015-01-01 2016-12-31 RJ 6576 Ρ 2016-01-01 2016-06-01 Ρ RJ 6576 2015-01-01 2016-12-31 RJ 29589 Р 2016-01-01 2016-06-01 RJ 2858 Р 2015-01-01 2016-12-31 Ρ 2015-01-01 2016-12-31 capital gain dist 2858 CAPITAL GAIN DISTRIBUTIONS Р 2015-01-01 2016-12-31 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 1,963,488 2,177,853 -214,365 178,660 184,192 -5,532 148,673 111,456 37,217 1,073,835 1,213,351 -139,516 3,399,940 3,452,463 -52,523 535,315 453,637 81,678 286,983 248,093 38,890 1,061,877 1,347,726 -285,849 2,978 2,978 3,942 3,942 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (k) over col (j), if any (j) as of 12/31/69 -214,365 -5,532 37,217 -139,516 -52,523 81,678 38,890 -285,849 2,978 3,942

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P—Purchase (mo, day, yr) (mo, day, yr) D-Donation CAPITAL GAIN DISTRIBUTIONS Ρ 2015-01-01 2016-12-31 CAPITAL GAIN DISTRIBUTIONS Ρ 2015-01-01 2016-12-31 CAPITAL GAIN DISTRIBUTIONS Ρ 2015-01-01 2016-12-31 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Gain or (loss) Depreciation allowed Cost or other basis (or allowable) (q) plus expense of sale (h) (e) plus (f) minus (g) (f) 679 679 3.708.383 20,328 3.688.055 166 166 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (i) as of 12/31/69 (k) over col (1), if any 679 3,688,055

166

orm 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	any foundation manager or substantial contributor	recipient					
a Paid during the year							
AUGUSTA BALLET INC 1301 GREEN ST AUGUSTA, GA 30904	NONE	EXEMPT	GENERL SUPPORT	30,000			
AUGUSTA CHORAL SOCIETY PO BOX 1402 AUGUSTA, GA 30903	NONE	EXEMPT	GENERL SUPPORT	28,000			
AUGUSTA PLAYERS INC PO BOX 2352 AUGUSTA, GA 30903	NONE	EXEMPT	GENERL SUPPORT	35,000			
SYMPHONY AUGUSTA PO BOX 579 AUGUSTA, GA 30903	NONE	EXEMPT	GENERL SUPPORT	1,021,000			
CSRA HUMANE SOCIETY PO BOX 14667 AUGUSTA, GA 30919	NONE	EXEMPT	GENERL SUPPORT	25,000			

AUGUSTA PLAYERS INC PO BOX 2352 AUGUSTA, GA 30903	NONE	EXEMPT	GENERL SUPPORT	35,000
SYMPHONY AUGUSTA PO BOX 579 AUGUSTA, GA 30903	NONE	EXEMPT	GENERL SUPPORT	1,021,000
CSRA HUMANE SOCIETY PO BOX 14667 AUGUSTA, GA 30919	NONE	EXEMPT	GENERL SUPPORT	25,000

За

3,086,230

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GACAROLINA COUNCILBSA NONE EXEMPT GENERL SUPPORT 15,000 PO BOX 2247 AUGUSTA, GA 30903 GEDTRUDE HERREDT ART INC. NONE EVEMDT GENERI SURBORT 45.000 .000 20,000 GREATER AUGUSTA ARTS COUNCIL NONE EXEMPT GENERL SUPPORT 1301 GREEN STREET

EXEMPT

GENERL SUPPORT

40,000

3,086,230

GOLDEN HARVEST FOOD BANK 3310 COMMERCE DRIVE AUGUSTA, GA 30909	NONE	EXEMPT	GENERL SUPPORT	35,0
506 TELFAIR STREET AUGUSTA, GA 30901	NONE	EXEMIT	GENERAL SOTTON	43,0

NONE

AUGUSTA, GA 30901 THE HALE FOUNDATION

402 WALKER STREET AUGUSTA, GA 30902

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HISTORIC AUGUSTA INC PO BOX 37 NONE **EXEMPT** GENERL SUPPORT 40,000 AUGUSTA, GA 30903 SACRED HEART CULTURAL CENTER INC NONE **EXEMPT GENERL SUPPORT** 140,000 1301 GREENE STREET 000

AUGUSTA, GA 30901				
UNITED WAY OF CSRA PO BOX 1724 AUGUSTA, GA 30904	NONE	EXEMPT	GENERL SUPPORT	10,000
EMPTY STOCKING FUND PO BOX 1928 AUGUSTA, GA 30903	NONE	EXEMPT	GENERL SUPPORT	5,000

13,000

AUGUSTA, GA 30903				
AMERICAN CANCER SOCIETY PO BOX 539	NONE	EXEMPT	GENERL SUPPORT	
	l .	ı	1	

THOMSON, GA 30824 Total . .

За

3,086,230

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
ACTION MINISTRIES INC PO BOX 2001 AUGUSTA, GA 30903	NONE	EXEMPT	GENERL SUPPORT	50,000	
CHILD ENRICHMENT INC PO BOX 12036 AUGUSTA, GA 30914	NONE	EXEMPT	GENERL SUPPORT	50,000	
AMERICAN RED CROSS 1322 ELLIS STREET AUGUSTA, GA 30901	NONE	EXEMPT	GENERL SUPPORT	60,000	
FAMILY Y 3617 WALTON WAY AUGUSTA, GA 30909	NONE	EXEMPT	GENERL SUPPORT	15,000	
SALVATION ARMY PO BOX 2523	NONE	EXEMPT	GENERL SUPPORT	15,000	

1322 ELLIS STREET AUGUSTA, GA 30901				
FAMILY Y 3617 WALTON WAY AUGUSTA, GA 30909	NONE	EXEMPT	GENERL SUPPORT	15,000
SALVATION ARMY PO BOX 2523 AUGUSTA, GA 30903	NONE	EXEMPT	GENERL SUPPORT	15,000

Total. . . .

За

3,086,230

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year WESLEYAN COLLEGE NONE **EXEMPT** GENERL SUPPORT 20,000 4760 FORSYTH ROAD MACON, GA 31210 NONE **EXEMPT** GENERL SUPPORT 10,000 WIMBERLY HOUSE MINISTRIES PO BOX 50 WAYNESBORO GA 30830 000 000 1903 DIVISION STREET AUGUSTA, GA 30904

WATNESBOKO, GA 30030				
HOPE HOUSE FOR WOMEN PO BOX 3597 AUGUSTA, GA 30914	NONE	EXEMPT	GENERAL SUPPORT	15,00
BOYS GIRLS CLUB THOMSON	NONE	EXEMPT	GENERAL SUPPORT	25,00

EXEMPT

GENERAL SUPPORT

5,000

3,086,230

NONE

FELLOWSHIP OF CHRISTIAN

PO BOX 204168 AUGUSTA, GA 30917

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
ACTIVITIES COUNCIL OF THOMSON PO BOX 674 THOMSON, GA 30824	NONE	EXEMPT	GENERAL SUPPORT	21,000
BOYS GIRLS CLUB CSRA 206 MILLEDGE ROAD AUGUSTA, GA 30904	NONE	EXEMPT	GENERAL SUPPORT	39,000
AUGUSTA PREPARATORY DAY 285 FLOWING WELLS ROAD AUGUSTA, GA 30907	NONE	EXEMPT	GENERAL SUPPORT	45,000
AUGUSTA MUSEUM OF HISTORY 560 REYNOLDS ST AUGUSTA, GA 30901	NONE	EXEMPT	GENERAL SUPPORT	53,000
PHINIZY CENTER FOR WATER SCIENCES	NONE	EXEMPT	GENERAL SUPPORT	20,000

3,086,230

AUGUSTA, GA 30904				
AUGUSTA PREPARATORY DAY 285 FLOWING WELLS ROAD AUGUSTA, GA 30907	NONE	EXEMPT	GENERAL SUPPORT	45,00

1858 LOCK DAM RD AUGUSTA, GA 30906

> Total . 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year EASTER SEALS PO BOX 2441 NONE EXEMPT GENERAL SUPPORT 25,000 AUGUSTA, GA 30903 MCCALLIE COLLOCI NONE CVEMPT CENTERAL CURRORT 2 000

500 DODDS AVENUE CHATTANOOGA, TN 37404	NONE	EXEMPT	GENERAL SUPPORT	3,000
CHURCH OF THE GOOD SHEPHERD 1105 FURYS LANE STE C MARTINEZ GA 30907	NONE	EXEMPT	GENERAL SUPPORT	32,250

HORCH OF THE GOOD SHEPHERD 105 FURYS LANE STE C MARTINEZ, GA 30907	NONE	EXEMPI	GENERAL SUPPORT	
MOLLIES MILITIA 501 LAUREL LAKES DRIVE 3ELVEDERE. SC 29860	NONE	EXEMPT	GENERAL SUPPORT	

MOLLIES MILITIA 501 LAUREL LAKES DRIVE BELVEDERE, SC 29860	NONE	EXEMPT	GENERAL SUPPORT	10,000
RACHEL LONGSTREET FOUNDATION	NONE	EXEMPT	GENERAL SUPPORT	45,000

501 LAUREL LAKES DRIVE BELVEDERE, SC 29860				
RACHEL LONGSTREET FOUNDATION PO BOX 2247	NONE	EXEMPT	GENERAL SUPPORT	45,0

SELVEDERE, SC 29860				
RACHEL LONGSTREET FOUNDATION PO BOX 2247	NONE	EXEMPT	GENERAL SUPPORT	45,0
AUGUSTA.GA 30903		1		

RACHEL LONGSTREET FOUNDATION PO BOX 2247 AUGUSTA, GA 30903	NONE	EXEMPT	GENERAL SUPPORT	45,0
		l		

AUGUSTA, GA 30903		
Total	 	3,086,230

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
UNIVERSITY HEALTH CARE FOUNDAT 2100 CENTRAL AVE SUITE D-1 AUGUSTA, GA 30904	NONE	EXEMPT	GENERAL SUPPORT	27,500	
AUGUSTA MINI THEATRE 430 8TH STREET AUGUSTA, GA 30901	NONE	EXEMPT	GENERAL SUPPORT	15,000	
HERITAGE ACADEMY 2230 BROAD STREET AUGUSTA, GA 30904	NONE	EXEMPT	GENERAL SUPPORT	30,000	
JUD C HICKEY CENTER 1901 CENTRAL AVE AUGUSTA, GA 30904	NONE	EXEMPT	GENERAL SUPPORT	15,000	

HERITAGE ACADEMY 2230 BROAD STREET AUGUSTA, GA 30904	NONE	EXEMPT	GENERAL SUPPORT	
JUD C HICKEY CENTER 1901 CENTRAL AVE AUGUSTA, GA 30904	NONE	EXEMPT	GENERAL SUPPORT	

NONE **EXEMPT** GENERAL SUPPORT 29,200

WESTMINISTER SCHOOL 3067 WHEELER ROAD

AUGUSTA, GA 30909 Total .

3,086,230 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ST JOHN UMC PO BOX 444 NONE **EXEMPT** GENERAL SUPPORT 4,000 AUGUSTA, GA 30903 STORYLAND THEATRE PO BOX 14875 NONE **EXEMPT GENERAL SUPPORT** 17,000 AUGUSTA, GA 30919

COLLEGE OF CHARLESTON FOUNDATI 66 GEORGE STREET CHARLESTON, SC 29424	NONE	EXEMPT	GENERAL SUPPORT	10,000
UGA TEE-OFF CLUB 120 PENDLETON DR ATHENS, GA 30606	NONE	EXEMPT	GENERAL SUPPORT	4,500
NEW BETHLEHEM COMMUNITY CTR	NONE	EXEMPT	GENERAL SUPPORT	15,000

AUGUSTA, GA 30901

Total . . . 3,086,230

Form 990PF Part XV Line 3 - Gran	ts and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
GIRL SCOUTS OF HISTORIC GEORGIA 4150 F A A ROAD CUMMING, GA 30041	NONE	EXEMPT	GENERAL SUPPORT	15,000
MCDUFFIE COUNTY HOSPITAL FOUNDATION 521 HILL ST SW THOMSON, GA 30824	NONE	EXEMPT	GENERAL SUPPORT	4,500
ST SIMONS LAND TRUST 1624 FREDERICA RD STE 6 ST SIMONS ISLAND, GA 31522	NONE	EXEMPT	GENERAL SUPPORT	2,500
THOMSON-MCDUFFIE CHAMBER OF COMMERC 111 RAILROAD ST THOMSON, GA 30824	NONE	EXEMPT	GENERAL SUPPORT	7,000
UGA MUSEUM OF ART 394 S MILLEDGE AVE STE 142 ATHENS, GA 30904	NONE	EXEMPT	GENERAL SUPPORT	10,000
Total				3,086,230

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AUGUSTA CHRISTIAN SCHOOLS NONE **EXEMPT** GENERAL SUPPORT 5,000 313 BASTON RD MARTINEZ GA 30907

11/11(111122, G/1 3030)				
AUGUSTA EXCHANGE CLUB CHARITY PO BOX 3884 AUGUSTA, GA 30914	NONE	EXEMPT	GENERAL SUPPORT	
PAINE COLLEGE 1235 15TH ST	NONE	EXEMPT	GENERAL SUPPORT	

6,000

20,000

10,000

3,086,230

PAINE COLLEGE 1235 15TH ST AUGUSTA, GA 30901	NONE	EXEMPT	GENERAL SUPPORT	
JNITED METHODIST CHILDRENS HOME 325 8TH STREET AUGUSTA GA 30901	NONE	EXEMPT	GENERAL SUPPORT	

Total . 3a

AUGUSTA CHARITY CLASSIC FUND	NONE	FXEMPT	GENERAL SUPPORT	
325 8TH STREET AUGUSTA, GA 30901	NONE	EXEMPT	GENERAL SUFFORT	
UNITED METHODIST CHILDRENS HOME	NONE	EXEMPT	I GENERAL SUPPORT	

325 8TH STREET AUGUSTA, GA 30901				,
AUGUSTA CHARITY CLASSIC FUND	NONE	EXEMPT	GENERAL SUPPORT	2,0

325 8TH STREET AUGUSTA, GA 30901				
AUGUSTA CHARITY CLASSIC FUND	NONE	EXEMPT	GENERAL SUPPORT	

AUGUSTA, GA 30901				
AUGUSTA CHARITY CLASSIC FUND PO Box 204168	NONE	EXEMPT	GENERAL SUPPORT	2

AUGUSTA CHARITY CLASSIC FUND	NONE	EXEMPT	GENERAL SUPPORT	2,000
PO Box 204168 AUGUSTA, GA 30917				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
AUGUSTA ROWING CLUB 101 Riverfront Dr AUGUSTA, GA 30901	NONE	EXEMPT	GENERAL SUPPORT	15,000	
DAVIS LOVE FOUNDATION 100 Brunswick Avenue ST SIMONS ISLAND, GA 31522	NONE	EXEMPT	GENERAL SUPPORT	2,000	
FIRST UNITED METHODIST CHURCH 802 N Liberty St WAYNESBORO, GA 30907	NONE	EXEMPT	GENERAL SUPPORT	10,000	
GEORGIA PUBLIC BROADCASTING 260 14th Street NW ATLANTA, GA 30318	NONE	EXEMPT	GENERAL SUPPORT	5,000	
HARRY JACOBS CHAMBER MUSIC SOCIETY Post Box No 15286 AUGUSTA, GA 30919	NONE	EXEMPT	GENERAL SUPPORT	2,750	
Total				3,086,230	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
LUCY CRAFT LANEY THE DELTA HOUSE IN 1116 Phillips Street AUGUSTA, GA 30901	NONE	EXEMPT	GENERAL SUPPORT	10,000
MORRIS MUSEUM OF ART 1 Tenth Street AUGUSTA, GA 30901	NONE	EXEMPT	GENERAL SUPPORT	10,000
SMILE TRAIN 41 Madison Ave 28th Floor NEW YORK, NY 10010	NONE	EXEMPT	GENERAL SUPPORT	5,000
AUGUSTA STATE UNIVERSITY FOUNDATION 2500 WALTON WAY AUGUSTA, GA 30904	NONE	EXEMPT	GENERAL SUPPORT	1,000
FAMILY Y OF THOMSON 510 WEST HILL STREET THOMPSON, GA 30824	NONE	EXEMPT	GENERL SUPPORT	10,000

3,086,230

Total . 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
MACH ACADEMY INC 1850 CHESTER AVE AUGUSTA, GA 30906	NONE	EXEMPT	GENERAL SUPPORT	10,000
SOUTHEASTERN COUNCIL OF FOUNDATIONS 50 HERTZ PLAZA ATLANTA, GA 30303	NONE	EXEMPT	GENERAL SUPPORT	7,200
UNITED WAY OF MCDUFFIE COUNTY P O BOX 87 THOMPSON, GA 30824	NONE	EXEMPT	GENERAL SUPPORT	10,000
ALZHEIMERS ASSOCIATION OF GA CHAPTE 7022 EVANS TOWNE CENTER BLVD EVANS, GA 30809	N/A	EXEMPT	GENERAL SUPPORT	20,000
FAMILY COUNSELING CENTER OF THE CSR 3711 EXECUTIVE CENTER SUITE 201 MARTINEZ, GA 30907	N/A	EXEMPT	GENERAL SUPPORT	15,000

3,086,230

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
FIRESIDE INDUSTRIES P O BOX 2525 AUGUSTA, GA 30903	N/A	EXEMPT	GENERAL SUPPORT	10,000
GOODWILL INDUSTRIES OF MIDDLE GA FURYS FERRY ROAD AUGUSTA, GA 30907	N/A	EXEMPT	GENERAL SUPPORT	500
THOMSON HIGH SCHOOL ATHLETIC BOOSTE WASHINGTON ROAD THOMSON, GA 30324	N/A	EXEMPT	GENERAL SUPPORT	4,200
THOMSON MCDUFFIE LIBRARY WASHINGTON ROAD THOMSON, GA 30324	N/A	EXEMPT	GENERAL SUPPORT	5,600
UGA ATHLETICS WILLIAM C HARTMAN JR UGA CAMPUS ATHENS, GA 30602	N/A	EXEMPT	GENERAL SUPPORT	14,850

Total . . 3a 3,086,230

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year UGA FOUNDATION- TERRY COLLEGE OF N/A **EXEMPT** GENERAL SUPPORT 24,000 ΒU UGA CAMPUS ATHENS, GA 30602 WOODLAWN METHODIST CHURCH N/A **EXEMPT** GENERAL SUPPORT 10,000 2220 WALTON WAY AUGUSTA, GA 30904 NONE ARTS NOW **EXEMPT EDUCATIONAL** 20,000 100 EDGEWOOD AVENUE STE 100

ATLANTA, GA 30303				
CENTER FOR NEW BEGINNINGS P O BOX 1066 WAYNESBORO, GA 30830	NONE	EXEMPT	COMMUNITY OUTREACH	20,000
COMMUNITY FOUNDATION FOR THE CSRA P O BOX 31358	NONE	EXEMPT	COMMUNITY OUTREACH	2,000

AUGUSTA, GA 30903

3,086,230 Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FAMILY PROMISE OF AUGUSTA NONE **EXEMPT** COMMUNITY OUTREACH 32,500 2177 CENTRAL AVENUE AUGUSTA, GA 30904 NONE **EXEMPT EDUCATIONAL** 3,000 **TUTTLE NEWTON HOUSE** 2196 CENTRAL AVENUE AUGUSTA, GA 30904

· · · · · · · · · · · · · · · · · · ·				
AUGUSTA WARRIOR PROJECT 4115 COLUMBIA ROAD SUITE 5-333 MARTINEZ, GA 30907	NONE	EOF	COMMUNITY OUTREACH	25,000
TURN BACK THE BLOCK P O BOX 3366 AUGUSTA, GA 30914	NONE	EOF	COMMUNITY OUTREACH	15,000

ll					
	TURN BACK THE BLOCK P O BOX 3366 AUGUSTA, GA 30914	NONE	EOF	COMMUNITY OUTREACH	15,0
	4115 COLUMBIA ROAD SUITE 5-333 MARTINEZ, GA 30907				,

MARTINEZ, GA 30907				
TURN BACK THE BLOCK P O BOX 3366 AUGUSTA, GA 30914	NONE	EOF	COMMUNITY OUTREACH	15,0
WHEN HELP CAN'T WAIT	NONE	EOF	DONATION	5,0

TURN BACK THE BLOCK P O BOX 3366 AUGUSTA, GA 30914	NONE	EOF	COMMUNITY OUTREACH	15,00
WHEN HELP CAN'T WAIT 3822 COMMERCIAL COURT	NONE	EOF	DONATION	5,00

ARTINEZ, GA 30907				
322 COMMERCIAL COURT				
HEN HELP CAN'T WAIT	NONE	EOF	DONATION	5,000

T-4-1				2 006 22
3822 COMMERCIAL COURT MARTINEZ, GA 30907				
WHEN HEEF CAN I WATI	INONE	LOI	DONATION	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GEORGIA HEALTH SCIENCES NONE **EOF EDUCATION** 333,000 **FOUNDATION** 1120 15TH STREET FI-1035 AUGUSTA, GA 30912 LOWCOUNTRY MARITIME SOCIETY NONE FOF **FDUCATIONAL** 5,000 16 CHARLOTTE ST 000 000 AUGUSTA, GA 30904 CONNECT MINISTRIES NONE **EOF** RELIGIOUS 10,000 1431 CAPITAL AVENUE SUITE 123

CHARLESTON, SC 29403				
ALOIS SOCIETY PO BOX 96011 WASHINGTON, DC 20090	NONE	EOF	EDUCATIONAL	10,00
AMERICAN OPERA MUSICAL THEATRE 2500 WALTON WAY	NONE	EOF	EDUCATIONAL	10,00

3,086,230

WATKINSVILLE, GA 30677

Total . .

orm 990PF Part XV Line 3 - Gran	ts and Contributions Paid	I During the `	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
FIRST TEE OF GREATER DALLAS 16200 ADDISON RD ADDISON, TX 75001	NONE	EOF	COMMUNISTY OUTREACH	15,000
FLORENCE COUNTY DISABILITIES FOUNDA 219 North Church Street Lake City, SC 29560		EOF	EDUCATIONAL	10,000
FOLDS OF HONOR 2016 9500 PROTOTYPE COURT RENO, NV 89521		EOF	COMMUNITY OUTREACH	500
GEORGIA GOLD HALL OF FAME 1100 Reynolds Street Augusta, GA 30901		EOF	EDUCATIONAL	1,750
HABITAT FOR HUMANITIES- THOMSON PO BOX 1701 THMSON, GA 30824		EOF	COMMUNITY OUTREACH	10,000
Total				3,086,230

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business)

a Paid during the year			
LYNNDALE INC 1490 Eisenhower Drive Augusta, GA 30904	EOF	EDUCATIONAL	21,000
HARITAT FOR HUMANITY	FOF	COMMUNITY OUTREACH	25 930

I EOI

or substantial contributor

1002 Walton Way Augusta, GA 30901		
Total	 	 3,086,230

efile GRAPHIC print - DO NOT PROCESS	As Filed D	ata -	DI	LN: 93491317008077		
TY 2016 Accounting Fees Sc	hedule					
Name: THE KNOX FOUNDATION						
EIN: 58-6163728						
Software ID	Software ID: 16000303					
Software Version	: 2016v3.0	0				
Category A	Adjusted Net Income	Disbursements for Charitable Purposes				
ACCOUNTING FEES	8,800	4,400	0	4,400		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491317008077
TY 2016 Investments - Land	Schedule	
Name:	THE KNOX FOUNDATION	
EIN:	58-6163728	
Software ID:	16000303	

Software Version: 2016v3.0						
Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value		
Furniture and Fixtures	52,382	39,504	12,878			
Buildings	5,094,073	1,749,676	3,344,397	4,688,103		
Land	1,330,828		1,330,828			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLN	i: 93491317008077
TY 2016 Legal Fees Schedule				_
Name:	THE KNOX F	OUNDATION		
EIN:	58-6163728			
Software ID:	16000303			
Software Version:	2016v3.0			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
	1,387	693	0	694

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491317008077
TY 2016 Other Assets Scheduk	e	
Name:	THE KNOX FOUNDATION	N

EIN: 58-6163728 **Software ID:** 16000303

Software Version: 2016v3.0

50

Other Assets Schedule					
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value		
ACCRUED DIVIDENDS	164,869	149,238			
			149 238		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491317008077				
TY 2016 Other Decreases Scho	TY 2016 Other Decreases Schedule					
Name:	THE KNOX FOUNDATION					
EIN:	58-6163728					
Software ID:	16000303					
Software Version:	2016v3.0					
De	escription	Amount				
UNRELATED BUSINESS TAXES		30,000				
UNREALIZED LOSSES ON INVESMENTS		190,413				
EXEMPT INTEREST		150				

efile GRAPHIC print - DO NOT PROCESS	efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491317008077						
TY 2016 Other Expenses Sche	dule						
ı				,			
Name: THE KNOX FOUNDATION							
EIN:	58-6163728			,			
Software ID:	16000303			,			
Software Version:	2016v3.0			,			
Other Expenses Schedule							
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
OFFICE SUPPLIES	121	61		60			
COMPUTER	1,119	559	·	560			
MEMBERSHIP DUES	296	148	1	148			
POSTAGE	84	42		42			
REPAIRS	1,000	500	1	500			
CONTRIBUTIONS FROM PASS THRU ENTITIES	15			15			
INVESTMENT EXPENSE	823	823					

834

133,002

417

133,002

417

MISC EXPENSE

Rental Expenses

TY 2016 Other Income Schedule							
Name:	THE KNOX F	OUNDATION					
EIN:	1: 58-6163728						
Software ID:): 16000303						
Software Version:	: 2016v3.0						
Other Income Schedule							
Description		Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income			

-48,417

DLN: 93491317008077

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

MISC RECEIPTS

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-1	DLN	N: 93491317008077
TY 2016 Other Professional	l Fees Schedu	le		,
				1
Nan	ne: THE KNOX F	OUNDATION		1
EJ	IN: 58-6163728	;		,
Software I	ID: 16000303			,
Software Version	on: 2016v3.0			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES CRAWFIORD 2	54,517	27,259	0	27,258
CONSULTING FEES	116,803	58,402	0	58,401
MANAGEMENT FEE CRAWFORD	78,531	39,265	0	39,266
		1		

15,426

2,063

15,427

2,063

0

0

30,853

4,126

MANAGEMENT FEE NOVARE

MANAGEMENT FEE WESTEND

As Filed Data	-	DL	N: 93491317008077
THE KNOX F	OUNDATION		
58-6163728			
16000303			
2016v3.0			
Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
20,450	10,225		10,225
4,550	2,275		2,275
432	216		216
	THE KNOX F6 58-6163728 16000303 2016v3.0 Amount 20,450 4,550	16000303 2016v3.0 Amount Net Investment Income 20,450 10,225 4,550 2,275	THE KNOX FOUNDATION 58-6163728 16000303 2016v3.0 Amount Net Investment Income Adjusted Net Income 20,450 10,225 4,550 2,275

efile GRAPHIC print -	DO NOT PROCESS As Filed Data -		DLN: 93491317008077		
Schedule B (Form 990, 990-EZ,	Schedule of Contributors		OMB No 1545-0047		
or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instruction www.irs.gov/form990	ons is at	2016		
Name of the organizat	ion	Employer id	lentification number		
		58-6163728			
Organization type (ch	eck one)				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundate	tion			
	☐ 527 political organization				
Form 990-PF	√ 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributi r property) from any one contributor Complete Parts I and II See instructions for				
Special Rules					
under sections received from a	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ 3% = 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Pary one contributor, during the year, total contributions of the greater of (1) \$5,000 ne 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	art II, line 13,	16a, or 16b, and that		
during the year,	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece total contributions of more than \$1,000 exclusively for religious, charitable, scient the prevention of cruelty to children or animals. Complete Parts I, II, and III				
during the year, If this box is che purpose Do no	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions that were received during the year for an exceptible and of the parts unless the General Rule applies to this organization by able, etc., contributions totaling \$5,000 or more during the year	itributions tota exclusively re secause it rece	iled more than \$1,000 ligious, charitable, etc, eived <i>nonexclusively</i>		
990-EZ, or 990-PF), bu	on that is not covered by the General Rule and/or the Special Rules does not file Stit must answer "No" on Part IV, line 2, of its Form 990, or check the box on line I Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of	H of its			
For Paperwork Reduction for Form 990, 990-EZ, or 9		ıle B (Form 990	, 990-EZ, or 990-PF) (2016)		

Name of organization THE KNOX FOUNDATION

Employer identification number

- 1	5Ω _	61	62	77 Q

		58-6163/28	
Part I	Contributors (see Instructions) Use duplicate copies of Part I if additional space is	needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	See Additional Data Table	\$	Person Payroll Noncash (Complete Part II for noncash
(a) No. Name, a	(b) Name, address, and ZIP + 4	(c) Total contributions	contribution) (d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II
(a)	(b)	(c) Total contributions	for noncash contribution) (d) Type of
No.	Name, address, and ZIP + 4	\$	contribution Person Payroll Noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(Complete Part II for noncash contribution) (d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	for noncash contribution) (d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	contribution) (d) Type of contribution
		s ———	Person Payroll Noncash (Complete Part II
			for noncash contribution)

Schedule B (Form 99	0, 990-EZ, or 990-PF) (2016)		Page 3	
Name of organization THE KNOX FOUNDATION		Employer identification number		
		58-61	.63728	
Part II	Noncash Property			
(a) No.from Part I	(see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		<u> </u>		
	_	Schedule B (Form 9	990, 990-EZ, or 990-PF) (2016)	

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

Additional Data

Software ID: 16000303 Software Version: 2016v3.0

EIN: 58-6163728

Name: THE KNOX FOUNDATION

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4			Person 🗸
<u>1</u>	JULIA PR KNOX - HUDSON 103 LAKEMONT DRIVE		Payroll 🗌
		\$ 660,000	Noncash \Box
	AUGUSTA, GA 30904		(Complete Part II for not contribution)
_			Person 🗸
2	THE PAT KNOX JKL CLAT TRUST		Payroll 🗌
	PO BOX 927	\$ 75,014	Noncash \Box
	AUGUSTA, GA 30907		(Complete Part II for no contribution)
			Person 🗸
3	THE PAT KNOX DAK CLAT TRUST		Payroll 🗌
	PO BOX 927	\$ 75,013	Noncash \Box
	AUGUSTA, GA 30907		(Complete Part II for no contribution)
_			Person 🗸
<u>4</u>	THE GEORGE ANN KNOX CLAT TRUST		Payroll 🗌
	PO BOX 26	\$ 187,265	Noncash \Box
	THOMSON, GA 30824		(Complete Part II for no contribution)
_			Person 🗸
5	GEORGE ANN KNOX		Payroll 🗌
	P O BOX 26	\$ 100,000	Noncash \Box
	THOMSON, GA 30824		(Complete Part II for no contribution)
			Person 🗸
<u>6</u>	JULIA LIRETTE		Payroll 🗌
	P O BOX 26	\$ 180,000	Noncash \Box

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person **V** PETER KNOX IV Payroll P O BOX 26 \$ 180,000 Noncash \square THOMSON, GA 30824 (Complete Part II for noncash contribution) Person **V** DAVID KNOX Payroll P O BOX 26 \$ 180,000 Noncash THOMSON, GA 30824 (Complete Part II for noncash

contribution)