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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491319023127

OMB No 1545-0052

2016

Return of Private Foundation

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

		ndar year 2016, or tax year beginning 01-01-20)16 , aı	nd er	nding 12-31-		
A٨	NE BRA	ındation NOSFORD WALLACE FOUNDATION IRAH A KOLARICH CPA			62-1551711	entification numbe	r
		I street (or P O box number if mail is not delivered to street address)	Room/suite				
		STON AVENUE		i '	mber (see instructior	is)	
City	or town	, state or province, country, and ZIP or foreign postal code		(615) 320-7888			
NAS	HVILLE,	TN 37203			C If exemption	application is pending	g, check here
G Ch	neck al	l that apply 🔲 Initial return 🔲 Initial return of a	former public charity		D 1. Foreign or	ganızatıons, check he	ere 🕨
		Final return Amended return				ganizations meeting k here and attach cor	
		Address change Name change			· ·	undation status was t	· -
_	•	pe of organization Section 501(c)(3) exempt private in				n 507(b)(1)(A), chec	
		a 4947(a)(1) nonexempt charitable trust U Other taxable to the value of all assets at end J Accounting method		-1			
of '	year <i>(f</i> .	xet value of all assets at end from Part II, col (c), \$ 530,209 J Accounting method □ Other (specify) (Part I, column (d) must		al		ation is in a 60-month n 507(b)(1)(B), checl	
Pa	rt I	Analysis of Revenue and Expenses (The total					(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	(ь)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	8,237				
	,	Check ► ☐ If the foundation is not required to attach					
	2	Sch B					
	3	Interest on savings and temporary cash investments	1,302		1,302	1,302	
	4	Dividends and interest from securities	14,327		14,327	14,327	
	5a	Gross rents					
ē	b 6a	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10	15,692				
em	b	Gross sales price for all assets on line 6a 135,551	15,632				
Revenue	7	Capital gain net income (from Part IV, line 2)			15,692		
ш.	8	Net short-term capital gain				716	
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)	96. 1,449		(22	1 440	
	11	Other income (attach schedule)	1,449 41,007		31,944	1,449 17,794	
	12	Compensation of officers, directors, trustees, etc	41,007		31,944	17,794	
	14	Other employee salaries and wages					
Š	15	Pension plans, employee benefits					
nse	16a	Legal fees (attach schedule)					
<u>6</u>	b	Accounting fees (attach schedule)	963				
Operating and Administrative Expenses	С	Other professional fees (attach schedule)					
Ĭ	17	Interest					
Str	18	Taxes (attach schedule) (see instructions)	482		232		
Ξ	19	Depreciation (attach schedule) and depletion					
Ē	20	Occupancy					
פַ	21	Travel, conferences, and meetings					
ਰ ਹ	22 23	Other expenses (attach schedule)	3,903		3,903		
at III	24	Total operating and administrative expenses.			-,- 33		
)er:	-	Add lines 13 through 23	5,348		4,135		
ō	25	Contributions, gifts, grants paid	34,800				34,800
	26	Total expenses and disbursements. Add lines 24 and 25	40,148		4,135		34,800
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements	859				
	ь	Net investment income (If negative, enter -0-)			27,809		
	С	Adjusted net income(If negative, enter -0-)				17,794	
-or	Daner	work Reduction Act Notice, see instructions.			Cat No. 11289)	/ Ear	m 000-PF (2016

384,921

384,921

385,254

386,926

386,926

387,870

2

3

4

5

6

384,921

859

1,146

386,926

386,926 Form 990-PF (2016)

Foundations that follow SFAS 117, check here ▶

Unrestricted

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) -

Enter amount from Part I, line 27a

Permanently restricted . .

Temporarily restricted

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

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

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

Total net assets or fund balances at 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

Balances

Fund 26

ō

Assets 27

Net 30

2

24

25

28 29

31 Part III

(b)

Page **3**

	(a) the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)	
1 a UBS AS AGENT-SEE ATT	ACHED	Р			
b UBS AS AGENT-SEE ATT	ACHED	Р			
c UBS AS AGENT-SEE ATT	ACHED		Р		
d UBS AS AGENT-SEE ATT	ACHED		Р		
e UBS AS AGENT-RETURN	OF PRINCIPAL		Р		
	(f)		(g)	(h)
(e) Gross sales price	Depreciation allowed	Cost or	other basis	Gain o	r (loss)
Gross sales price	(or allowable)	plus exp	ense of sale	(e) plus (f) mınus (g)
а	9,792		9,076		716
b	30,847		68,857		11,990
c 4	1,864		39,838		2,026
d	47		47		
e	2,041		2,041		
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69	,	1)
(i) F M V as of 12/31/69	(j)	Excess	(k) of col (ı) (j), ıf any	Gains (Col (col (k), but not	h) gain minus less than -0-) or om col (h))
a					716
b					11,990
С					2,026
d					·
e					
•	e or (net capital loss) gain or (loss) as defined in sections art I, line 8, column (c) (see instructions)		Part İ, lıne 7	2	15,692
	Under Section 4040(a) for De	nduced Tay on Not	Tavactarent Ta	l .	710
	Under Section 4940(e) for Re				
(For optional use by domestic p	private foundations subject to the se	ction 4940(a) tax on ne	t investment incom	e)	
if section 4940(d)(2) applies, le	eave this part blank				
Was the foundation liable for th	ne section 4942 tax on the distributant ot qualify under section 4940(e) Do		ın the base period?	,	es 🔽 No
1 Enter the appropriate ar	nount in each column for each year,	see instructions before	making any entries	5	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rati (col (b) divided by c	
2015	41,801		490,216	, , , , , , , , , , , , , , , , ,	0 085271
2014	37,996		490,795		0 077417
2013	21,480		445,077		0 048261
2012	17,840		367,184		0 048586
2012	17,500		320,442		0 054612
2 Total of line 1, column (r		2		0 314147
3 Average distribution ration number of years the four	o for the 5-year base period—divide ndation has been in existence if less	the total on line 2 by 5, than 5 years			0 062829
	ncharitable-use assets for 2016 fron	n Part X, line 5	4		493,924
5 Multiply line 4 by line 3			5		31,033
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		278
7 Add lines 5 and 6			7		31,311
If line 8 is equal to or gre	ions from Part XII, line 4 , . . eater than line 7, check the box in Pa		8 nplete that part usin	g a 1% tax rate Se	34,800 e the Part VI
instructions				Fo	orm 990-PF (2016)

Form 990-PF (2016) Information About Officers, Directors, Trustees,	Foundation Managers Highly	Page 7
and Contractors (continued)	roundation managers, riging	Palu Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, en	ter "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 rele organizations and other beneficiaries served, conferences convened, research papers produ	evant statistical information such as the nunced, etc	nber of Expenses
1		
2		
2		
3		
		
4		
Part IX-B Summary of Program-Related Investments (see	nstructions)	
Describe the two largest program-related investments made by the foundation during the	ne tax year on lines 1 and 2	Amount
1 N/A		
2		
All other program-related investments See instructions		
all other program-related investments. See instructions		
-		
Total. Add lines 1 through 3		. ▶
		Form 990-PF (2016)

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

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

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

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

2

За 3b

4

5

34.800

34,522

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278

(c)

2015

Page 9

24.418

24,418

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7	U-FI	(2	OΙ	v
	XII	Ц		ι

b Total for prior years

From 2011. . . .

d From 2014. . . .

e From 2015.

b From 2012. . . . c From 2013. .

XII, line 4 > \$

indicated below:

1 Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only.

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e.

d Applied to 2016 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2017.

10 Analysis of line 9

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

d Excess from 2015. .

e Excess from 2016. . .

c Excess from 2014. . . .

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount —see instructions e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must 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

4 Qualifying distributions for 2016 from Part

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

1,749 287

13.804

17,738

(a)

Corpus

33,578

10.382

43.960

1.749

42,211

287

13.804

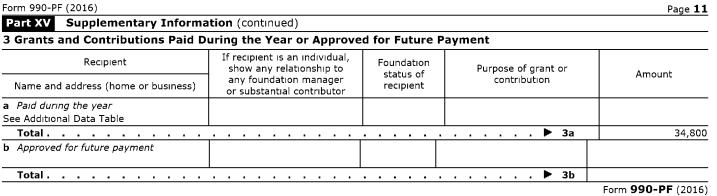
17,738

10.382

(b)

Years prior to 2015

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Part XIII	Undistributed Income (see instructions)						



er gross	amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	512, 513, or 514	(e) Related or exem
_		(a)	(b)	(c)	(d)	function income
_	service revenue	Business code	Amount	Exclusion code	Amount	(See mad dedon
:						
	and contracts from covernment accused					
	and contracts from government agencies ship dues and assessments.					
Intere	st on savings and temporary cash					
	ments			14	1,302 14,327	
	tal income or (loss) from real estate			14	14,327	
	financed property					
	ebt-financed property					
	ntal income or (loss) from personal property					
	nvestment income.			14	623	
	r (loss) from sales of assets other than			18	15,692	
Net inco	ome or (loss) from special events			_	==,72=	
	rofit or (loss) from sales of inventory					
Other r	evenue E TAX REFUND				026	
	TAX REFUND			1	826	
				+		
	1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				32,770	
Subtota Total. /	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)			13	32,770	
Subtota Total. /	al Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). neet in line 13 instructions to verify calculatio	ns)			· · · · · · · · · · · · · · · · · · ·	
Subtota Total. / worksh	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which	ns) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	32,7
Subtota Fotal. / worksh rt XVII e No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th 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) of	pt Purposes of Part XVI-A contribut	ed importantly to	32,7
Subtota Total. / worksh rt XVI	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which	ns) e Accomplish income is reporte	ment of Exemed in column (e) of	pt Purposes of Part XVI-A contribut	ed importantly to	32,7
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	/
П	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part XVII	Information Re-		ansf	ers To a	and Transact	ior	is and Relati	onships With N	onchari	table		
	ganization directly or inc Code (other than section	directly engag							ction 501		Yes	No
• •	from the reporting found		-	•								
(1) Cash										1a(1)		No
(2) Other assets									1a(2)		No	
b Other tran	sactions											
(1) Sales of assets to a noncharitable exempt organization										1b(1)		No
(2) Purch	ases of assets from a ne	oncharitable	exemp	ot organiz	zation					1b(2)		No
(3) Renta	al of facilities, equipmen	t, or other as	sets.							1b(3)		No
(4) Reimi	bursement arrangement	:s								1b(4)		No
` '	or loan guarantees									1b(5)		No
` ,	mance of services or me			-						1b(6)		No
_	facilities, equipment, m			•						1c		No
of the goo	ver to any of the above ds, other assets, or serv nsaction or sharing arrar	rices given by	the r	eporting	foundation If th	ne f	oundation receiv	ed less than fair m	arket valu			
(a) Line No	(b) Amount involved	(c) Name of	nonchai	ritahla ava	mpt organization	ı	(d) Description	of transfers, transactio	ne and cha	rına ərrə	naemen	nte
(a) Line No	(b) Amount involved	(C) Name on	IOTICITAL	illable exe	mpt organization	\vdash	(d) Description	or cransiers, cransactio	nis, and sna	illig alla	ngemen	11.5
						Γ						
						₩						
						┢						
						\vdash						
						_						
						-						
						\vdash						
2a Is the four	Indation directly or indire	ctly affiliated	with	or relate	d to one or mo	re t	av-evemnt orga	nizations				
	in section 501(c) of the	•			•		, ,		Г	∃Yes	☑ N	lo.
	omplete the following so	•	Cilaii 3	iection 30	71(0)(3)) 0: 111 3:	CCLI	011 327 1 1 1			_ 163	- IV	
D II 163, CC	(a) Name of organization		- 1	(1	b) Type of organiza	atıor	n	(c) Descript	ion of relation	onship		
	er penalties of perjury, I y knowledge and belief,											
Sign whic	h preparer has any kno	wledge			1		•					
Here 👠 🍐	*****				2017-11-15		*****		May the I with the p			
7 - 9	Signature of officer or tr	ustee			Date		Title		(see instr	· —		
	Print/Type preparer's	name	Prepa	rer's Sıgr	nature		Date	Check if self-	PTIN			
								employed ▶ □		P01421	.746	
Paid	DEBORAH A KOLAR	RICH					2017-11-15					
Preparer	CPA	NDALL A 1701 T	DIC	CDA								
Use Only		DRAH A KOLA	KICH	CPA					Firm's E	IN ▶62	-12104	114
Julia Ciliy		08 POSTON A	AVE									
		CIIVALLE TY	7770	\ 7					Phone n	o (615) 320-7	7888
NASHVILLE, TN 37203								•				

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 100 CLUB SUMNER PO BOX 1076 NONE 501C3 FOR ACTIVE CONDUCT OF 100 HENDERSONVILLE, TN 37215 EXEMPT PURPOSE AMERICAN RED CROSS NONE 501C3 250 FOR ACTIVE CONDUCT OF 2201 CHARLOTTE AVENUE **EXEMPT PURPOSE** NACHITLE TN 37203

NASHVILLE, IN 37203				
BELCOURT THEATER 2102 BELCOURT AVENUE NASHVILLE, TN 37212	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	250
BOY SCOUT TROOP 31 4715 HARDING ROAD	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	100

TOTAL STATE				
BOY SCOUT TROOP 31 4715 HARDING ROAD NASHVILLE, TN 37205	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	10
CAMP MERRIE WOODE 100 MERRIE-WOODE ROAD	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	50

BOY SCOUT TROOP 31 4715 HARDING ROAD NASHVILLE, TN 37205	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	
CAMP MERRIE WOODE	NONE	501C3	FOR ACTIVE CONDUCT OF	

500

SAPPHIRE, NC 28774		EXEMPT PURPOSE	
Total	 		34,800

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CHEEKWOOD 1200 FORREST PARK DRIVE NASHVILLE, TN 37205	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	150
COMMUNITY FOUNDATION 3833 CLEGHORN AVENUE NASHVILLE, TN 37215	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	250
THE CROSSROADS CAMPUS 1210 7TH AVE N NASHVILLE, TN 37208	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	500
CUMBERLAND RIVER COMPACT 2 VICTORY AVE SUITE 300 NASHVILLE, TN 37213	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	100
ENSWORTH SCHOOL	NONE	501C3	FOR ACTIVE CONDUCT OF	250

EXEMPT PURPOSE

7401 HIGHWAY 100

NASHVILLE, TN 37221

34,800 Total . . За

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				
FRIENDS OF RADNOR LAKE PO BOX 40324 NASHVILLE, TN 37204	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	250
FRIENDS OF WARNER PARK 50 VAUGHN ROAD NASHVILLE, TN 37221	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	350
GOLF CLUB OF TN SCHOLARSHIP FUND ONE GOLF CLUB DRIVE KINGSTON SPRINGS, TN 37082	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	100
GRAND CANYON RIVER GUIDES PO BOX 1934 FLAGSTAFF, AZ 86002	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	250
GREENWAYS FOR NASHVILLE PO BOX 196340	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	9,000

34,800

NASHVILLE, TN 37219

Total . . 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
HARPETH HALL SCHOOL 3801 HOBBS ROAD NASHVILLE, TN 37215	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	1,600
HOLLINS UNIVERSITY PO BOX 9629 ROANOKE, VA 24020	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	750
HUNDRED CLUB OF NASHVILLE PO BOX 190428 NASHVILLE, TN 37219	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	500
LEAD PUBLIC SCHOOLS 531 METROPLEX DRIVE SUITE A-200 NASHVILLE, TN 37211	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	250
LEGAL AID SOCIETY CAMPAIGN FOR EQUAL JUSTICE 300 DEADERICK STREET NASHVILLE, TN 37201	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	400

За

34,800

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 LEUKEMIA & LYMPHOMA SOCIETY NONE 501C3 FOR ACTIVE CONDUCT OF 500 3230 COMMERCE PLACE **EXEMPT PURPOSE** SUITE B WEST PALM BEACH, FL 33407 MA GENERAL HOSPITAL NONE 501C3 FOR ACTIVE CONDUCT OF 250 125 NASHUA STREET EXEMPT PURPOSE SUITE 540 100 100

EXEMPT PURPOSE

500

34,800

BOSTON, MA 021141101				
MERRIE WOODE FOUNDATION 100 MERRIE-WOODE ROAD SAPPHIRE, NC 28774	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	
MONTGOMERY BELL ACADEMY 4001 HARDING ROAD NASHVILLE, TN 37205	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	
NASHVILLE BALLET	NONE	50103	FOR ACTIVE CONDUCT OF	

3630 REDMON STREET

NASHVILLE, TN 37209

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 status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NASHVILLE CITY CEMETERY NONE 501C3 FOR ACTIVE CONDUCT OF 300 PO BOX 150733 EXEMPT PURPOSE NASHVILLE, TN 37215 NASHVILLE DOLPHINS NONE 501C3 250 FOR ACTIVE CONDUCT OF 95 WHITE BRIDGE ROAD EXEMPT PURPOSE SUITE 221 NASHVILLE, TN 37205

NASHVILLE HUMANE ASSOCIATION 213 OCEOLA AVENUE NASHVILLE, TN 37209	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	1,050
NATIONAL MS SOCIETY 214 OVERLOOK CIRCLE SUITE 153 BRENTWOOD, TN 37027	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	250
OREGON HUMANE SOCIETY	NONE	501C3	FOR ACTIVE CONDUCT OF	100

EXEMPT PURPOSE

34,800

1067 NE COLUMBIA BLVD

PORTLAND, OR 97211

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 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 OZ ARTS 6172 COCKRILL BEND CIRCLE NONE 501C3 FOR ACTIVE CONDUCT OF 5,000 NASHVILLE, TN 37209 EXEMPT PURPOSE PLANNED PARENTHOOD NONE 501C3 FOR ACTIVE CONDUCT OF 3,850 50 VANTAGE WAY SHITE 102 EVEMBT DUBBOSE

NASHVILLE, TN 37228			EXEMITTOR OSE	
PRESTON TAYLOR MINISTRIES 4014 INDIANA AVENUE NASHVILLE, TN 37209	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	200
RENEWAL HOUSE PO BOX 280356	NONE	501C3	FOR ACTIVE CONDUCT OF	1,000

PRESTON TAYLOR MINISTRIES 4014 INDIANA AVENUE NASHVILLE, TN 37209	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	2
RENEWAL HOUSE PO BOX 280356	NONE	501C3	FOR ACTIVE CONDUCT OF	1,0

11/10/11/12/22/ 11/1 37/23/				
RENEWAL HOUSE PO BOX 280356 NASHVILLE, TN 37228	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	1,000
SECOND HARVEST FOOD BANK	NONE	501C3	FOR ACTIVE CONDUCT OF	1,000

RENEWAL HOUSE PO BOX 280356 NASHVILLE, TN 37228	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	1,00
SECOND HARVEST FOOD BANK 331 GREAT CIRCLE ROAD	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	1,00

NASHVILLE, TN 37228	NONE	501C3	EXEMPT PURPOSE	1,
SECOND HARVEST FOOD BANK	NONE	501C3	FOR ACTIVE CONDUCT OF	1,

NASHVILLE, IN 3/226			EXEMPT PURPOSE	
SECOND HARVEST FOOD BANK 331 GREAT CIRCLE ROAD	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	1,

Total . 3a

SECOND HARVEST FOOD BANK 31 GREAT CIRCLE ROAD NASHVILLE, TN 37228	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	1,0

34,800

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 SEXUAL ASSAULT CENTER NONE 501C3 FOR ACTIVE CONDUCT OF 101 FRENCH LANDING DRIVE **EXEMPT PURPOSE**

500

200

50

NASHVILLE, TN 37228				
ST GEORGES EPISCOPAL CHURCH 4715 HARDING ROAD NASHVILLE, TN 37205	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	

ASHVILLE, IN 3/205			
T JUDES 262 DANNY THOMAS PLACE IEMPHIS, TN 38105	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE
HE CONSERVANCY GALA	NONE	501C3	FOR ACTIVE CONDUCT OF

3a

ST JUDES 262 DANNY THOMAS PLACE MEMPHIS, TN 38105	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	
THE CONSERVANCY GALA PO BOX 196340 NASHVILLE, TN 37219	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	

THE CONSERVANCY GALA PO BOX 196340 NASHVILLE, TN 37219	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	500
THE J PASCHALL DAVIS FUND	NONE	501C3	FOR ACTIVE CONDUCT OF	1,000

NASHVILLE, TN 37219				
THE J PASCHALL DAVIS FUND 50 VANTAGE WAY SUITE 102	NONE	l	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	1,0

NASHVILLE, TN 37219				
THE J PASCHALL DAVIS FUND 50 VANTAGE WAY SUITE 102	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	

······································				
HE J PASCHALL DAVIS FUND	NONE	501C3	FOR ACTIVE CONDUCT OF	1
0 VANTAGE WAY SUITE 102			EXEMPT PURPOSE	
IASHVILLE TN 37228				

NASHVILLE, TN 37228		
Total	 	 34,800

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							
THE LAND TRUST FOR TENNESSEE 209 10TH AVENUE SOUTH SUITE 327 NASHVILLE, TN 37203	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	1,500			
THISTLE FARMS 5122 CHARLOTTE PIKE NASHVILLE, TN 37209	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	100			
TN PARKS & GREENWAYS FOUNDATION 117 30TH AVENUE SOUTH NASHVILLE, TN 37212	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	100			
VANDERBILT UNIVERSITY MEDICAL CTR 2525 WEST END AVENUE SUITE 450 NASHVILLE, TN 37203	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	250			
WOODBINE UNITED METHODIST CHURCH	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	250			

117 30TH AVENUE SOUTH NASHVILLE, TN 37212	NONE	30103	EXEMPT PURPOSE	100
VANDERBILT UNIVERSITY MEDICAL CTR 2525 WEST END AVENUE SUITE 450 NASHVILLE, TN 37203	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	250
WOODBINE UNITED METHODIST CHURCH 2621 NOLENSVILLE PIKE	NONE	501C3	FOR ACTIVE CONDUCT OF EXEMPT PURPOSE	250

2621 NOLENSVILLE PIKE NASHVILLE, TN 37211

34,800

Total . За

efile GRAPHIC print - DO NOT PR	ROCESS	As Filed Data -		D	LN: 93491319023127		
TY 2016 Accounting Fees Schedule							
	Name:	ANNE BRANSI	ORD WALLAC	E FOUNDATION			
C/O DEBORAH A KOLARICH CPA							
EIN: 62-1551711							
Category	Amo	ount Net	Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

963

ACCOUNTING/TAX PREPARATION

ellie GRAPHIC	print - DO	NOT PROC	ESS AS	riieu va	ta -		DLN: 934	91319023127	4
								•	_

TY 2016 Investments Corporate Stock Schedule

Name: ANNE BRANSFORD WALLACE FOUNDATION

C/O DEBORAH A KOLARICH CPA

EIN: 62-1551711				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
COMMON STOCK	107,100	240,198		
CLOSED END MUTUAL FUNDS	38,889	38,470		
EQUITY MUTUAL FUNDS	45,915	46,294		
CORPORATE BONDS & NOTES	15,995	17,189		
CLOSED END FUNDS	7,826	8,304		
FIXED INCOME MUTUAL FUNDS	19,311	20,830		
PREFERRED SECURITIES	17,668	17,878		
CLOSED END FUNDS/ET PRODUCTS	4,729	5,135		
MUTUAL FUNDS	57,081	62,909		
COMMODITIES	11,315	10,961		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319023127
TY 2016 Other Assets Schedule	1	

Name: ANNE BRANSFORD WALLACE FOUNDATION

C/O DEBORAH A KOLARICH CPA

Other	Assets	Schedule

INCOME RECEIVABLE

Description

EIN: 62-1551711

Beginning of Year -

Book Value

12,703

2,079

End of Year - Fair

Market Value

2,079

End of Year - Book Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DL	N: 93491319023127
TY 2016 Other Expenses Sche	dule			
Name:	ANNE BRANSFO	RD WALLACE FO	UNDATION	
	C/O DEBORAH A KOLARICH CPA			
EIN:	62-1551711			
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
INVESTMENT FEES	3,803	3,803		
MISCELLANEOUS	100	100		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319023127
		_
TY 2016 Other Income Schedul	e	

Name: ANNE BRANSFORD WALLACE FOUNDATION

C/O DEBORAH A KOLARICH CPA

EIN: 62-1551711

Other Income Schedule					
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income		
MISCELLANEOUS - OTHER INCOME	623	623	623		
EXCISE TAX REFUND	826		826		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491319	023127
TY 2016 Other Increases Sche				
Name:	ANNE BRANSF	FORD WALLACE FOUNDATION		
	C/O DEBORAH	I A KOLARICH CPA		
EIN:	62-1551711			
De	escription		Amount	
ВООК ТО ТАХ				1,146

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DL	N: 93491319023127
TY 2016 Other Liabilities Sche	dule			
Name:	ANNE BRANSF	ORD WALLACE FOUNDAT	ΓΙΟΝ	
	C/O DEBORAL	I A KOLARICH CPA		
	•	A ROLARGETT CLA		
EIN:	62-1551711			
Description	n	Beginning o	I	End of Year - Book Value
SHORT OPTIONS			333	944

efile GRAPHIC print - DO NOT F	PROCESS	As Filed Data	-	DLI	N: 93491319023127		
TY 2016 Taxes Schedu	TY 2016 Taxes Schedule						
Name: ANNE BRANSFORD WALLACE FOUNDATION C/O DEBORAH A KOLARICH CPA							
	EIN:	62-1551711					
Category	Ar	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FOREIGN TAX		232	232				
EXCISE TAX		250					

efile GRAPHIC print - I	efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491319023127							
Schedule B	Schedule	e of Contributors		OMB No 1545-0047				
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at							
Name of the organizat ANNE BRANSFORD WALL			Employer ide	entification number				
C/O DEBORAH A KOLARI	CH CPA		62-1551711					
Organization type (che	eck one)							
Filers of:	Section:							
Form 990 or 990-EZ	Form 990 or 990-EZ							
	4947(a)(1) nonexempt charital	ble trust not treated as a private foundat	tion					
	☐ 527 political organization							
Form 990-PF		dation						
4947(a)(1) nonexempt charitable trust treated as a private foundation								
	501(c)(3) taxable private foundation							
141	ation filing Form 990, 990-EZ, or 990-PF r property) from any one contributor Com		_	•				
Special Rules								
under sections to under sections to under sections to the under sections are under sections.	tion described in section 501(c)(3) filing F 509(a)(1) and 170(b)(1)(A)(vi), that checken by one contributor, during the year, total c ne 1h, or (ii) Form 990-EZ, line 1 Comple	ed Schedule A (Form 990 or 990-EZ), Pa ontributions of the greater of (1) \$5,000	art II, line 13, 1	16a, or 16b, and that				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III								
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 lf this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not 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								
990-EZ, or 990-PF), bu	on that is not covered by the General Rule at must answer "No" on Part IV, line 2, of form 990PF, Part I, line 2, to certify that it	fits Form 990, or check the box on line I	H of its					
For Paperwork Reduction for Form 990, 990-EZ, or 99	Act Notice, see the Instructions 0-PF	Cat No 30613X Schedu	le B (Form 990,	990-EZ, or 990-PF) (2016)				

Schedule B (For	m 990, 990-EZ, or 990-PF) (2016)		Page 2
Name of organia ANNE BRANSFOR C/O DEBORAH A	D WALLACE FOUNDATION	Employer identification 62-1551711	number
Part I	Contributors (see instructions) Use duplicate copies of Part I if add	ditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ANNE B WALLACE 30 OLD CLUB COURT NASHVILLE, TN 37215	\$ 8,237	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
•		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions) orm 990, 990-EZ, or 990-PF) (2016)

Schedule B (Forr	n 990, 990-EZ, or 990-PF) (2016)		Page 3
	WALLACE FOUNDATION	Employer identification number	
C/O DEBORAH A KOLARICH CPA Part II Noncash Property		62-1551711	
(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
1	73 SHARES AMERICAN TOWER CORP	\$ 3 608	2016-06-16
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	280 SHARES EXXON MOBIL CORP	\$ 4 629	2016-11-26
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2016)

Schedule B (Form	990, 990-EZ, or 990-PF) (2016)		Page 4	
Name of organization ANNE BRANSFORD WALLACE FOUNDATION C/O DEBORAH A KOLARICH CPA			Employer identification number 62-1551711	
than \$1, organiz the year	000 for the year from any one contributor	r. Complete columns (a) thro of exclusively religious, chari ctions.) ▶ \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for	
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee	
(a)	(b) Dumaga of sift	(a) Han of wife	(d) Decembring of how wife in hold	
No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee	
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee	
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee	
			Schedule B (Form 990, 990-EZ, or 990-PF) (2016)	