

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



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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

For cal-	enc	lar year 2016 or tax year beginr	ning		, 2016	, and	ending		, 20
Name of	f fou	ndation					A Employe	r identification numb	er
AMERIC	CAN	I PAPER & TWINE CHARITABLE TE	RUST					62-6046717	
		street (or PO box number if mail is not de			Room/	/suite	B Telephon	e number (see instruc	tions)
7400 C	nck	(RILL BEND BLVD			}	1		615-350-900	'n
City or to	own.	state or province, country, and ZIP or fore	eign postal code				C if exempt	on application is pen	
			•				Cirexempt	ют аррисацот із релі	ing, check here
		E, TN 37209 all that apply:  Initial return	☐ Initial return	of a former	nublia	obarity	<b>.</b>	n organizations, check	
G Che	CK	· · · · —	☐ Amended		public	Charity	ו ט 1. Foreigr	n organizations, check	here ►[
			<del></del>					organizations meetir	g the 85% test,
	<del></del> -	<del></del>	<del></del>	<del></del>				here and attach comp foundation status was	
		type of organization: 🔽 Section						07(b)(1)(A), check here	
		4947(a)(1) nonexempt charitable							•
			Accounting method	: 🛂 Cash	∐ Ac	crual	F If the four	ndation is in a 60-mon	
		year (from Part II, col. (c),	Other (specify)				under sec	ction 507(b)(1)(B), chec	k here ►{
			art I, column (d) must be	on cash basis	s.)				
Part		Analysis of Revenue and Exper	nses (The total of	(a) Revenue	and	(b) Not	investment	(a) Adjusted not	(d) Disbursement for charitable
		amounts in columns (b), (c), and (d) may		expenses p	per		come	(c) Adjusted net income	purposes
		the amounts in column (a) (see instructio	nns).)	Doors					(cash basis only)
1		Contributions, gifts, grants, etc., recei	ved (attach schedule)	10	0,000				
2		Check ► ☐ if the foundation is not re	quired to attach Sch. B						
3		Interest on savings and temporar							
4		Dividends and interest from secu	•						
5	а	Gross rents							T
1 -		Net rental income or (loss)		<u> </u>				<del></del>	
L		Net gain or (loss) from sale of ass	sets not on line 10					<del></del>	<del>                                     </del>
<b>3</b>   1		Gross sales price for all assets on line		<u> </u>					
<b>8</b> 7		Capital gain net income (from Pa							† <del></del>
8 8		Net short-term capital gain		<u> </u>					1
_   9									1
10		Gross sales less returns and allowand	1	<del></del>				<del></del>	<del> </del>
· · · · · ·		Less: Cost of goods sold							<del> </del>
l l		_		<del> </del>					<del>                                     </del>
		Gross profit or (loss) (attach sche		ļ					<del> </del>
11		Other income (attach schedule)		<del></del>				<del></del>	<del> </del>
12		Total. Add lines 1 through 11 .		10	0,000			<del></del>	<del> </del>
υ <sub>0</sub> 13		Compensation of officers, director		<u> </u>					<del></del>
14 15 16 16		Other employee salaries and wag							<del></del>
e 15		Pension plans, employee benefits		<u>-</u> -					
当 16		, ,		DIC CERN	EN				<del> </del>
മ		Accounting fees (attach schedule		RECEIV	التاكا	<del></del>		<del></del>	<del> </del>
<u></u>		Other professional fees (attach so	chedule) . 🝴 . 🦳						<b></b>
토   17		Interest	· · · ·   @1	MAY O I	<u> </u>	10			<del> </del>
. <u>S</u> 18		Taxes (attach schedule) (see instruct	. 11 2 11	DAIL					<b></b>
늘 19		Depreciation (attach schedule) ar	nd depletion . 📗 .						L
호 20		Occupancy		DENER	<u> </u>	1			
B 21		Travel, conferences, and meeting	js <u>[ </u>				<u> </u>		
E 22		Printing and publications							
ලා 23	;	Other expenses (attach schedule	e) . <i>.</i>						
<b>.</b> 들   24		Total operating and adminis							
<u>s</u>		Add lines 13 through 23							1
25	;	Contributions, gifts, grants paid		10	0,400				100,40
0 26		Total expenses and disbursements			0,400				100,40
27	_	Subtract line 26 from line 12:		<u>``</u>					
		Excess of revenue over expenses	and disbursements		-400		ĺ		1
		Net investment income (if negative							<del> </del>
		Adjusted net income (if negative		<u> </u>				<del></del>	<del>                                     </del>
	~	ork Reduction Act Notice, see inst		<del></del>		11289X		<del></del>	orm <b>990-PF</b> (201

Pa	rt II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		f year
		<del></del>		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1		pearing	1,854	1,454	1,454
	2	-	ry cash investments	L		) 
	3	Accounts receivable			·	
		Less: allowance for d	oubtful accounts ▶			
	4	Pledges receivable ▶				
		Less: allowance for d	oubtful accounts ▶			
	5					
	6		m officers, directors, trustees, and other			
			attach schedule) (see instructions)			
	7	Other notes and loans re	ceivable (attach schedule) 🕨			
		Less: allowance for dou	btful accounts ▶			
ţ	8	Inventories for sale or	ruse			
Assets	9	Prepaid expenses an	d deferred charges			
ĕ	10a	Investments-U.S. and	state government obligations (attach schedule)			
	b	Investments—corpor	ate stock (attach schedule)			
	С	Investments—corpor	ate bonds (attach schedule)			
	11	Investments-land, build	ings, and equipment: basis ▶			
		Less accumulated depre-	ciation (attach schedule) ▶			
- 1	12		age loans			
- 1	13	Investments-other (a	attach schedule)			
	14	Land, buildings, and eq	uipment: basis ▶			
		Less: accumulated depr	eciation (attach schedule)			
	15	Other assets (describ				
	16		be completed by all filers—see the			
		instructions. Also, se	e page 1, item I)	1,854	1,454	1,454
	17	Accounts payable an	d accrued expenses			
w	18	Grants payable				
Liabilities	19	Deferred revenue .				
Ħ	20	Loans from officers, dire	ectors, trustees, and other disqualified persons			
<u>ia</u>	21	Mortgages and other	notes payable (attach schedule)			
	22	Other liabilities (desci	ribe ► )			
	23	Total liabilities (add	ribe ►)   lines 17 through 22)			
<u></u>		Foundations that fol	llow SFAS 117, check here ▶ □			
Balances		and complete lines	24 through 26 and lines 30 and 31.		Í	
Ĕ	24	Unrestricted				
ā	25	Temporarily restricted	1			
O III	26	Permanently restricte	d ,			
Net Assets or Fund		Foundations that do and complete lines	not follow SFAS 117, check here ► ☐			
ō	27	•	rincipal, or current funds	1,854	1,454	
ţ	28		plus, or land, bldg., and equipment fund			
Se	29	•	umulated income, endowment, or other funds			
Ř	30	_	rund balances (see instructions)	1,854	1,454	
et	31		nd net assets/fund balances (see	.,,,,,		İ
Z				1,854	1,454	
Pa	rt III		iges in Net Assets or Fund Balances		.,,.,,	
			alances at beginning of year-Part II, colu	mn (a), line 30 (must	agree with	
	end-	of-year figure reported	d on prior year's return)		1	1,854
2	Ente	er amount from Part I, I	ıne 27a		<del> </del>	-400
3					<del>  </del>	
_						1,454
_					<del></del>	
6	Tota	I net assets or fund ba	line 2 (itemize) ► liances at end of year (line 4 minus line 5)—I	Part II, column (b), line	30 6	1,454
_						Form <b>990-PF</b> (2016)

Part	V Capital Gains and L	osses for Tax on Investm	ent In	come				
•		ind(s) of property sold (e.g., real estate or common stock, 200 shs MLC Co.)			(b) How acquired P—Purchase D—Donation		ate acquired o , day, yr.)	(d) Date sold (mo , day, yr)
1a								
b								
<u>c</u>								<del></del>
<u>d</u>				-				
<u>е</u>	<del></del>	(0 D			- 41: - 1: - 1: - 1: - 1: - 1: - 1: - 1:		(h) O	(1 )
	(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis			n or (loss) f) minus (g)
<u>a</u>					<del></del>			
<u>b</u>	<del></del>							
<u>c</u>								
<u>d</u>								
<u>e</u>	Complete only for assets showi	ng gain in column (h) and owned	by the fo	undation	on 12/31/69		ID Cours (Co	1 (h) zava minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Exces	s of col (i) (j), if any		col (k), but no	l (h) gain minus t less than -0-) <b>or</b> rom col (h))
a	<del></del>							
<u>_</u>								<del></del>
С								
d								
е								
2	Capital gain net income or (				rt I, line 7 }	2		
3	If gain, also enter in Part I,	or (loss) as defined in sections line 8, column (c) (see instructions or continuous cont	ctions).	If (loss)	, enter -0- ın Ì			
Part		Section 4940(e) for Redu				3		
		te foundations subject to the						<del></del>
Was t	s," the foundation does not qu	ection 4942 tax on the distribu ualify under section 4940(e). D	o not c	omplete	this part.			☐ Yes ☐ No
_1_	<del></del>	nt in each column for each yea	ar; see t	he instru	ictions before m	akıng	any entries.	
Cale	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	s N	let value of	(c) f noncharitable-use a	ssets		(d) Inbution ratio divided by col (c))
	2015	6	7,765			2,192		30.9147
	2014	6	2,900			4,352		14.4531
	2013		0,900			3,962		15.3710
	2012		0,500			3,162		15.9709
	2011	4	4,200			2,370	<del></del>	15.1628
2 3	<b>Total</b> of line 1, column (d) Average distribution ratio fo					the	2	91.8725
	number of years the foundar	tion has been in existence if le	ess than	5 years		• }	3	18.3745
4	Enter the net value of nonch	aritable-use assets for 2016 f	rom Par	t X, line	5	.	4	2,717
5	Multiply line 4 by line 3 .					•	5	49,924
6	Enter 1% of net investment	income (1% of Part I, line 27b	)			.	6	0
7	Add lines 5 and 6					.	7	49,924
8		s from Part XII, line 4 er than line 7, check the box in				. [ that pa	8 art using a 1	100,400 % tax rate. See the

	0-PF (2016)			Page 4			
Part		instr	uctio	ns)			
1а,	1a. Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.  Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)						
b							
_	here ► ✓ and enter 1% of Part I, line 27b			0			
С							
	Part I, line 12, col. (b).			1			
2	2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)						
3	Add lines 1 and 2			- 0			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			0			
6	Credits/Payments:						
а	2016 estimated tax payments and 2015 overpayment credited to 2016   6a						
b	Exempt foreign organizations—tax withheld at source 6b			İ			
С	Tax paid with application for extension of time to file (Form 8868) . 6c						
d	Backup withholding erroneously withheld						
7	Total credits and payments. Add lines 6a through 6d						
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached  8						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9			0			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10			↓			
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶ 11			<u></u>			
	VII-A Statements Regarding Activities		V	T 50-			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		Yes				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1a	<u> </u>	1			
b	Instructions for the definition)?	1b		/			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	10	-	<del>  •</del>			
	published or distributed by the foundation in connection with the activities.						
С							
ď							
_	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	1					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
	on foundation managers. ▶ \$	Ì		} }			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		1			
	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of						
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	_3_		1			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<b>✓</b>			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		1			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5_		<del>  ✓ ,</del>			
•	If "Yes," attach the statement required by General Instruction T.	l .					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  • By language in the governing instrument, or		ļ.				
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>						
	conflict with the state law remain in the governing instrument?	6	1				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	7				
, 8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	<u> </u>	•	<del>                                     </del>			
	TENNESSEE						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	1	ļ			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or						
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"						
	complete Part XIV	9		✓			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their						
	names and addresses	10		1			
	Fo	m <b>99</b>	0-PF	(2016)			

Part	VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)			,
40		11		/
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		/
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
	Website address ► N/A			
14		5-350-	9000	
	Located at ► 7400 COCKRILL BEND BLVD, NASHVILLE, TN ZIP+4 ►	3720	9	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year			▶ □
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority	,	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ►			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	1 1		<b>\</b>
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	'		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			)
	the benefit or use of a disqualified person)?			Ì
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations		1	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		l	
	were not corrected before the first day of the tax year beginning in 2016?	1c		<b>-</b>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and		}	
_	6e, Part XIII) for tax year(s) beginning before 2016?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		ı	i
	all years listed, answer "No" and attach statement—see instructions.)	2b		1
	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
3a	➤ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		1	
Sa	at any time during the year?	1	İ	
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or			
b	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		ĺ	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of		İ	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		]	Ì
	foundation had excess business holdings in 2016.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		1

Part	VII-B	Statements Regarding Activities	s for V	Vhich Form	4720	May Be R	equire	ed (continu	ied)		
		he year did the foundation pay or incur a									
		y on propaganda, or otherwise attempt t							<b></b> ✓ No		
		ence the outcome of any specific public				-	-	s _	_		. (
	directly or indirectly, any voter registration drive?								. (		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?										
	(4) Provide a grant to an organization other than a charitable, etc., organization described in										
	section 4945(d)(4)(A)? (see instructions)										
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?										}
b											}
-		ons section 53.4945 or in a current notice								5b	
	_	ations relying on a current notice regardi	_	_		=		-	▶┌	. ===	
c	_	nswer is "Yes" to question 5a(4), does t	-						_		1
	because	e it maintained expenditure responsibility	for the	grant?				☐ Yes [	□ No	,	1
	If "Yes,"	attach the statement required by Regula	ations s	ection 53.494	45–5(d)					ļ l	
6a		foundation, during the year, receive any		•	_			3			
	•	sonal benefit contract?							<b></b> ✓ No		
ь		foundation, during the year, pay premiur	ns, dire	ectly or indire	ctly, on	a personal	benefi	t contract?	•	6b	✓
		to 6b, file Form 8870.				-11 - 1			-7		
		ne during the tax year, was the foundation did the foundation receive any proceed						∐ Yes ∐ ransaction?		7b	
	VIII	Information About Officers, Direct									200
		and Contractors			ouuu		<b>.</b> 90.0,	inginy i d		p.oy	<b>500</b> ,
1	List all	officers, directors, trustees, foundatio	n mana	agers and th	eir con	npensation	ı (see i	nstructions	s).		
		(a) Name and address		e, and average irs per week		mpensation not paid,		Contributions to			nse account,
				ed to position		nter -0-)		erred compens		other a	llowances
ROBE	RT S DOO	CHIN	TRUST	TEE, AS	<b>[</b>						
		BEND BLVD, NASHVILLE TN	NEED	ED	ļ	0	<u> </u>				
		IN VINGELEN	1	TEE, AS	]	_					
	DOOCHIN	BEND BLVD, NASHVILLE TN	NEEDE		<del> </del> -	0					
		BEND BLVD, NASHVILLE TN	NEEDE	EE, AS	1	0					
7400 0	OOMALL	DEND DEVD, NASHVILLE TH	14660		$\overline{}$						
			L								
2	-	nsation of five highest-paid employed	es (oth	er than thos	se incl	uded on li	ne 1-	see instruc	ction	s). If no	ne, enter
	"NONE.	"		r				т			
	(a) Nama am	and address of analysis and analysis and thou \$50.00	10	(b) Title, and a		(a) Compos	anation.	(d) Contribution employee be			nse account,
	(a) Name ar	d address of each employee paid more than \$50,00	,0	hours per v		(c) Comper	isation	plans and def compensat	erred		llowances
				<del> </del>		<del>                                     </del>					
						1	NONE	t 			
				<del> </del>			HONE				<del></del>
	••••					1					
									_		
		<del></del>		<u> </u>							
						1		ļ			
				<del> </del>		<del> </del>		<del> </del>		<del></del>	
	<b></b>					{		ļ			
Total	number c	f other employees paid over \$50,000 .		<u></u>		<u></u> .	<u> </u>	<u> </u>	▶		

Par	VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors (continued)	ployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
		NONE
Tata	aumhor of others receiving over \$50,000 for professional garvess	
	number of others receiving over \$50,000 for professional services	<del></del>
Par	t IX-A Summary of Direct Charitable Activities	
Lis	t the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of janizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
•		
2		
3		
4		
Par	IX-B Summary of Program-Related Investments (see instructions)	
	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
_		
2		
All	other program-related investments. See instructions	
3		
Tota	Add lines 1 through 2	
Tota	. Add lines 1 through 3	orm <b>990-PF</b> (2016)

Part	* Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign found	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	ГТТ	
	purposes:	1	
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	2,758
c	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	2,758
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	2,758
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	ınstructions)	4	41
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,717
_6	Minimum investment return. Enter 5% of line 5	6	136
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating to and certain foreign organizations check here ► and do not complete this part.)	oundation	าร
1	Minimum investment return from Part X, line 6	1	136
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	136
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	136
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	1 1	
	line 1	7	136
Pari	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	100,400
b	Program-related investments—total from Part IX-B	16	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	[ ]	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	100,400
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
_	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	100,400
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether	the foundation
			000 DE (0010)

	90-PF (2016)				Page S
Part	XIII Undistributed Income (see instri	uctions)			
1	Distributable amount for 2016 from Part line 7	XI, Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
2	Undistributed income, if any, as of the end of 201	6.	<del></del>		136
a	Enter amount for 2015 only		}	0	
b	Total for prior years: 20 ,20 ,20		0		
3	Excess distributions carryover, if any, to 201	6:	<del>`</del>		<del></del>
а		,083	1		
b	From 2012	,344	1		
С	From 2013 60	,705			
d	From 2014 62	,686			
е		,655			
f	Total of lines 3a through e				
4	Qualifying distributions for 2016 from Part	KII,	t	,	
	line 4: ▶ \$ 100,400		<u>}</u>		
a	Applied to 2015, but not more than line 2a		<u> </u>	0	
b	Applied to undistributed income of prior year (Election required—see instructions)				
С	Treated as distributions out of corpus (Election		0		
·	required—see instructions)	· ·			
d	Applied to 2016 distributable amount				
e	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 20				
	(If an amount appears in column (d), the sai				<u></u> _
	amount must be shown in column (a).)		ľ	ł	
6	Enter the net total of each column indicated below:	as			
a b	Corpus. Add lines 3f, 4c, and 4e. Subtract line Prior years' undistributed income. Subtra				<u></u>
	line 4b from line 2b		0		
С	Enter the amount of prior years' undistribut		1	{	
	income for which a notice of deficiency has been issued, or on which the section 4942				
	tax has been previously assessed		0		
d	Subtract line 6c from line 6b. Taxal			<del></del>	· <del></del>
	amount—see instructions		ol		
е	Undistributed income for 2015. Subtract li	ne			
	4a from line 2a. Taxable amount-s	ee			
	instructions			o	
f	Undistributed income for 2016. Subtract lin				
	4d and 5 from line 1. This amount must	1	İ		
_	distributed in 2017				0
7	Amounts treated as distributions out of corp		1		
	to satisfy requirements imposed by secti 170(b)(1)(F) or 4942(g)(3) (Election may		İ		Y
	required—see instructions)	l l	1		
8	Excess distributions carryover from 2011 r				
•	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 20	11/000			
	Subtract lines 7 and 8 from line 6a	I	l		
10	Analysis of line 9:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
а	Excess from 2012	,344	]		
b		,705	)		-
C		,686	)		
d		,655	}		
е	Excess from 2016 100	,400	l l		

Page <b>10</b>
4942(j)(5)
n assets at
ne foundation
portion of the
s not accept zations under

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A. guestion 9	)	
	If the foundation has received a ruling					
	foundation, and the ruling is effective for					
b	Check box to indicate whether the four		~		ection	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	<del></del>	Prior 3 years		
	income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	investment return from Part X for each year listed		·.	<del>                                     </del>		
b	85% of line 2a				<del> </del>	
C	Qualifying distributions from Part XII,		<del> </del>			
	line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly					
Ū	for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test-enter.					
	(1) Value of all assets					
	(2) Value of assets qualifying under					-
	section 4942(j)(3)(B)(i)				<u> </u>	
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
C	"Support" alternative test-enter:					
	(1) Total support other than gross			1		
	investment income (interest, dividends, rents, payments on		•			
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					ı
	organizations as provided in					
	section 4942(j)(3)(B)(iii)			<u> </u>	<del></del>	L
	an exempt organization					li
	(4) Gross investment income					
Part		on (Complete th	is part only if the	he foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-	-see instruction	s.)			
1	Information Regarding Foundation					
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have co	ontributed more th	ıan \$5,000). (See s	ection 507(d)(2).)	
	<del></del>	_ <del></del>	<del> </del>	<del></del>	<del></del>	
þ	List any managers of the foundation					rge portion of the
	ownership of a partnership or other en	inty) of which the	iodiluation nas a	1070 or greater into	51 dol.	
2	Information Pagarding Contribution	Grant Gift Loo	n Coholombia a	to Brograms	<del></del>	
2	Information Regarding Contribution Check here ▶ ☐ if the foundation		<del>-</del> '		organizations and	door not accept
	unsolicited requests for funds. If the f	•	•		•	
	other conditions, complete items 2a,		girio, giaino, oto:	(000 111011 40110110)	o marriadalo oi oi	gamzanono anaor
a	The name, address, and telephone nu		dress of the person	on to whom applic	ations should be a	ddressed:
	,,,				,	
ROBE	RT S DOOCHIN, 7400 COCKRILL BEND B	LVD, NASHVILLE T	N 37209			
	The form in which applications should			materials they sho	uld include:	
				-		
WRITT	EN FORM WITH A DESCRIPTION OF THE	CHARITABLE PUR	RPOSE			
C	Any submission deadlines:	<u>_</u>				
NONE	<del></del>					
d	Any restrictions or limitations on av	vards, such as by	y geographical a	reas, charitable fie	elds, kinds of inst	titutions, or other
	factors:					
NONE						

3,	Grants and Contributions Paid During t	he Year or Approv	ed for Fu	ture Payment		
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or		Amount
	Name and address (home or business)	or substantial contributor	recipient	contribution		
а	Paid during the year					
SEE A	ATTACHED SCHEDULE	N/A	PUBLIC	CHARITABLE PURPOSE		100,40
			}			
		1				
		1	1			ł
		1	\			<u> </u>
		İ				
		{				
						}
			]			
	Total		<del></del>		<b>▶</b> 3a	100,400
b	Approved for future payment					
						ı
		1				
			İ			į
						1
						ļ
						1
	Total	L	<u></u>	L		
	Total				▶ 3b	

Form 990-PF (2016)

Рa	rt XV	I-A Analysis of Income-Producing Ac	ctivities				
nte	er gro	ss amounts unless otherwise indicated.	Unrelated bu	usiness income	Excluded by sect	ion 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.)
1		gram service revenue:	<u> </u>	<u> </u>	ļ	ļ <u>.</u>	
	а 		<u> </u>		ļ.— — —		
	b -		<u> </u>	<del> </del>	<del> </del>	<u> </u>	
	ď		<del></del>		<del> </del>	<u> </u>	<del></del>
	e -		<u> </u>		<del>  -</del>		
	f -		<del></del>	<del> </del>	<del> </del>		<del> </del>
	gi	ees and contracts from government agencies		<del> </del>			
2	_	nbership dues and assessments	ļ —	<del>                                     </del>	<del>                                     </del>		<del></del>
		rest on savings and temporary cash investments	· · · · · · · · · · · · · · · · · · ·				
4		dends and interest from securities					
5	Net	rental income or (loss) from real estate:	** ** ** * * * * * * * * * * * * * * *	St. Og. Sterring	12.00 1 1 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	から教室をから	A STORY OF
	a i	Debt-financed property					
		Not debt-financed property			<u> </u>		
		rental income or (loss) from personal property			ļ		
7		er investment income					
8		or (loss) from sales of assets other than inventory					
9		income or (loss) from special events					
10		ss profit or (loss) from sales of inventory	<u> </u>	<del> </del>			
11		er revenue: a	<u> </u>	<del> </del>	<del> </del>		
	b .		<del></del>				
	c. d			<del> </del>			<del></del>
	u .		<del></del>	<del> </del>	<del> </del>		
12	Sub	total. Add columns (b), (d), and (e)		<del> </del>	<del> </del>		<del></del>
				· · · · · ·		13	
		sheet in line 13 instructions to verify calculation					<del></del>
Рa	rt XV	I-B Relationship of Activities to the A	ccomplishm	ent of Exemp	t Purposes		
Lir	ne No.	Explain below how each activity for which accomplishment of the foundation's exempt pur	income is rep	orted in column	(e) of Part XVI	-A contributed in	nportantly to the
	<b>V</b>	accomplishment of the foundation's exempt pur	rposes (other tha	in by providing fur	nds for such purp	oses). (See instruc	etions)
_							
			<del></del> -				
							<del></del>
		<del> </del>					
	<u> </u>			<u> </u>	<del></del>		<del></del>
		<del> </del>				<del></del>	<del></del>
		<del> </del>					
		<del></del>			<del></del>		
		<del> </del>					<del></del>
		<del> </del>					
		<del> </del>					
		1.			···		<del></del>
	_	<u> </u>					
		<del> </del>					
		Ī					

Part	XVII		n Regarding Trans ganizations	sfers To and Trans	sactions and F	Relationsh	ips With I	Nonchai	ritabl	е	
1	ın sec organ	e organization of tion 501(c) of the izations?	directly or indirectly elee Code (other than se	engage in any of the following with any other organization described section 501(c)(3) organizations) or in section 527, relating to political						Yes	No
а	Transfers from the reporting foundation to a noncharitable exempt organization of:  (1) Cash								1a(1)		1
	(2) Other assets							1a(2)		1	
b	$\Sigma_{i}$										
			a noncharitable exen	not organization .					1b(1)		<b>-</b> √
									1b(2)		<b>-</b>
	-		chases of assets from a noncharitable exempt organization								1
									1b(3) 1b(4)		<b>-</b>
		ans or loan gua	-						1b(5)		<b>/</b>
		•	ervices or membershi						1b(6)		1
С			quipment, mailing list	•					1c		<b>-</b>
		-	of the above is "Yes	•					the 1	air m	arket
			ther assets, or servic								
	value	in any transaction	on or sharing arrange	ment, show in colum	n (d) the value o	f the goods,	other asse	ets, or ser	vices	receiv	ved.
(a) Line	no (I	) Amount involved	(c) Name of noncha	ırıtable exempt organizatio	n (d) Descr	ption of transfe	ers, transactio	ns, and shar	ring arra	angeme	nts
2a b	descr	ibed in section 5	ectly or indirectly affile 501(c) of the Code (of the Code)						] Yes		۷o
	If "Yes," complete the following schedule.  (a) Name of organization			(b) Type of organization			(c) Description of relationship				
		(-,		(-/ -/)			(1)				
	Unde	penalties of perjury, I	declare that I have examined	this return, including accom-	panying schedules and	statements, and	to the best of	my knowledg	ge and b	elief, it i	is true,
Sign Here	e Polest & Doochin		n taxpayer) is based on all info 4-24-17	rer) is based on all information of which preparer has an 14-24-17 Trustee			May the IRS			oelow !	
	Signature of Officer of trustee Date Title								لت		
Paid	]	Print/Type preparer	's name	Preparer's signature	<del></del>	Date	Chec	k 🗀 it P	TIN		_
Prep	arer	- <del></del>		<u> </u>		1		mployed			
Use	Only	Firm's name					Firm's EIN	<u> </u>			
		Firm's address 🕨				<del></del>	Phone no				

### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

**AMERICAN PAPER & TWINE CHARITABLE TRUST** 

# **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2016

**Employer identification number** 

62-6046717

Organization type (check one):						
Filers of	:	Section:				
Form 99	0 or 990-EZ	☐ 501(c)(	) (enter number) organization			
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation		exempt charitable trust <b>not</b> treated as a private foundation			
	☐ 527 political organization		ganization			
Form 99	0-PF	F 501(c)(3) exempt private foundation  4947(a)(1) nonexempt charitable trust treated as a private foundation				
		☐ 4947(a)(1) none	exempt charitable trust treated as a private foundation			
		501(c)(3) taxab	e private foundation			
<del></del>	<del></del>					
	nly a section 501(c)(7)	-	eral Rule or a Special Rule. ation can check boxes for both the General Rule and a Special Rule. See			
General	Rule					
<b>7</b>		r property) from any	-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 one contributor. Complete Parts I and II. See instructions for determining a			
Special	Rules					
	regulations under se 13, 16a, or 16b, and	ctions 509(a)(1) and that received from a	501(c)(3) filing Form 990 or 990-EZ that met the 33½ % support test of the 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line any one contributor, during the year, total contributions of the greater of (1) rm 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.			
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
	contributor, during the contributions totaled during the year for a <b>General Rule</b> applies	ne year, contributior I more than \$1,000. n <i>exclusively</i> religious s to this organization	501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one as exclusively for religious, charitable, etc., purposes, but no such If this box is checked, enter here the total contributions that were received us, charitable, etc., purpose. Don't complete any of the parts unless the in because it received nonexclusively religious, charitable, etc., contributions			

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B	(Form 990, 990-EZ, or 990-PF) (2016)		Page 2		
Name of o	organization	En	ployer identification number		
AMERICA	N PAPER & TWINE CHARITABLE TRUST		62-6046717		
Part I	Contributors (See instructions). Use duplicate copie	es of Part I if additional space is	needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	AMERICAN PAPER & TWINE CO. 7400 COCKRILL BEND BLVD NASHVILLE, TN 37209		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		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	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		

AMERICAN PAPER & TWINE COMPANY
CHARITABLE TRUST
E.I.N. 62-6046717
DECEMBER 31, 2016
FORM 990-PF

Page 1, Part 1, Line 1

American Paper & Twine Company 7400 Cockrill Bend Blvd.
Nashville, TN 37209

\$ 100,000

# AMERICAN PAPER & TWINE COMPANY CHARITABLE TRUST E.I.N. 62-6046717 DECEMBER 31, 2016 FORM 990-PF

## Page 11, Part XV, Line 3a, List of Recipients

Abe's Garden	\$ 250
Andrew Jackson Foundation	1,700
Cheekwood Botanical Garden & Museum of Art	8,000
Ensworth School	1,000
Frist Center for the Visual Arts	250
Guiding Eyes fo the Blind	250
Jewish Federation of Nashville	13,000
Lipscomb Athletics	5,000
McKendree Village Foundation	300
Memphis Jewish Community Center	500
Nashville OIC	300
Nashville Rotary Service Trust	200
Nashville Symphony	5,000
Nashville Zoo	7,000
National Museum of American Illustration	500
Pencil Foundation	5,000
St Lukes Community House	300
Tall Timbers Research Station & Land Conservancy	250
ICWPA	200
Tennessee Higher Education Initlative	4,800
Tennessee Wildlife Federation	1,000
The Dominican Campus	500
The Temple	13,600
United Way of Metro Nashvılle	2,000
University of Pennsylvania	1,000
University School of Nashville	7,000
Vanderbilt University School of Medicine	2,500
Vanderbily University Medical Center Children's Hospital	2,500
Vanderbily University Medical Center Orthopedic	3,500
YMCA of Middle Tennessee	13,000

\$ 100,400