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Return of Organization Exempt From Income Tax

OMB No 1545-0047

2016

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	For the	e 2016 cale	ndar year, or tax year begi	nning	, 2	016, an	d ending			, 20				
В	Check if	f applicable	C Name of organization WEEF	KS BAY FOUND	ATION, INC	•			D Employ	er identificat	ion number			
	Address	s change	Doing business as						63-1021925					
	Name c		Number and street (or P O b	Room/surte	1	E Telephone number								
	Initial ref		11401 U.S. Highw			251-99	90-5004							
$\overline{\Box}$		ım/terminated	City or town, state or provinc											
$\overline{\Box}$	Amende		FAIRHOPE, AL 365	G Gross re	eceipts \$	922,728								
$\overline{\sqcap}$			F Name and address of principa		irard			H(a) Is this a gro	up return for:	subordinates?	Yes X No			
_	тфриса	don pending	same as item C a							_	Yes 🗌 No			
_	Tay ava	empt status			sert no) 4947(a)	(1) or	527			list (see inst				
:			weeksbay.org	7 1 (11)	servino / 🗀 To m la A	11,70.	<u> </u>	H(c) Group e	exemption	number ▶				
K				Association Other	<u> </u>	L Year	of formation	<u> </u>	 	of legal domi	cile. AL			
_	art !	Summ		to decidation other	-	1 - 100	or rollingtion	,						
	1		escribe the organization's	mission or most	significant activ	vities	The One			rodited b				
an.	'	-	-					anization						
Activities & Governance			ist Accreditation Com							ces or co	dS td1			
rna			and provide support							ite not acc	ot.c			
×6	2		is box ▶☐ if the organiz				posed of	more man	3					
ŏ	3		of voting members of the				 .ma.1h\		-		21			
ο 5	4		of independent voting me					•	4		21			
iţie	5		mber of individuals emplo	•		v, line z	2 a) .		5	 	150			
댨	6		mber of volunteers (estim	• •		_	•	•			150			
ď	7a		elated business revenue						7a					
	b	Net unre	lated business taxable in	come from Form				. Prior Yea	7b	0				
						70	<u> </u>			Curre	ent Year			
Ð	8		tions and grants (Part VIII	iwi	4 0017	ାଥା	·		0,686		732,073			
en	9		service revenue (Part VII		JG 2 4 2017	RS-OSC	•		8,185		89,903			
Revenue	10	Investme	ent income (Part VIII, colu	mn (A) Mines 3, 4	, and 7d)	그램	_		2,020		50,537			
-	11	Other rev	venue (Part VIII, column (/	A), lines 5, 8 d, 8c	and the and	fle)	l		3,831		18,263			
	12	Total reve	enue—add lines 8 through	n 11 (mu <u>st equal/</u>	earts/iii.column	(<u>A), lin</u> č	12)	87	4,722		890,776			
	13		nd similar amounts paid (·		0		0			
	14		paid to or for members (0		0						
S	15		other compensation, empl	-10)	12	5,455		127,325						
Expenses	16a	Profession	onal fundraising fees (Par	t IX, column (A),	line 11e) .		· L		0		0			
e d	b		idraising expenses (Part I			32,	688	* * * .						
Ú	17	Other ex	penses (Part IX, column ((A), lines 11a–11d	I, 11f–24e)	-	L		0,533		279,276			
	18	Total exp	penses Add lines 13-17 ((must equal Part	<u> </u>	62	5,988		406,601					
	19	Revenue	less expenses. Subtract	line 18 from line	12			24	8,734		484,175			
5	8						Be	ginning of Cur			of Year			
sets or	20	Total ass	sets (Part X, line 16)					4,88	2,008		5,426,932			
Net As	<u>21</u>	Total liab	oilities (Part X, line 26)				L		2,476		31,113			
2	22	Net asse	ets or fund balances Sub	tract line 21 from	line 20			4,82	9,532		5,395,819			
E	art II	Signa	ture Block	_										
U	nder pen	alties of perju	ury, I declare that I have examine	ed this return, includir	ng accompanying sc	hedules a	and stateme	ents, and to th	e best of r	ny knowledge	e and belief, it is			
tr	ue, corre	ct, and comp	lete Declaration of preparer (oth	ner than officer) is bas	ed on all information	of which	n preparer h	as any knowle	dge					
	•		R											
Si	gn	Sign	lature of officer					Dat	e C- 4	11/1	_			
H	ere			ELLIS.	S. Accer	, M	o pr	esians	0/	11/17				
		Тур	e or print name and title											
_		Pnnt/Ty	ype preparer's name	Preparer's si	gnature		Date		Check	X if PTIN				
	aid	Kim	Enikeleff				7/2	4/2017		ployed P00	989337			
	repar	·		eieff, CPA					's EIN ▶ '	46-4292	196			
U	se Or	11 V ———	address ▶ Post Office		obile AL 3	36689				1-591-1				
M	ay the	IRS discus	ss this return with the pre	parer shown abo	ve? (see instruc	tions)					Yes No			
				·										

Form 990 (2016)

For Paperwork Reduction Act Notice, see the separate instructions.

Part	
	Gheck if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	The Organization is accredited by the Land Trust Accreditation Commission and its
	purpose is to protect the natural resources of coastal Alabama and provide support
	for the Weeks Bay National Estuarine Research Reserve.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
•	services?
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported
4a	(Code:) (Expenses \$ 274,153 including grants of \$) (Revenue \$ 6,231)
	The Organization is a nonprofit conservation organization. The Organization
	conserves, restores, and manages wetlands and associated habitats for coastal
	Alabama. These habitats benefit wildlife and people.
	·
45	(O-d
4b	(Code:) (Expenses \$ 55,919 including grants of \$) (Revenue \$ 60,606)
	Alabama Coastal Birdfest - The purpose of the Alabama Coastal Birdfest is to conduct an environmental education and outreach event that will increase the knowledge of the
	public about coastal Alabama's natural resources. The advancement of knowledge in
	the subjects of ornithology, land preservation, and environmental awareness are
	examples of measurable outcomes associated with the Alabama Coastal Birdfest.
4c	(Code:) (Expenses \$ 23,834 including grants of \$) (Revenue \$ 23,066)
	Weeks Bay Volunteers - this is a program, which consists of approximately 130
	members, whose purpose is to support the mission of the Weeks Bay National Estuarine
	Research Reserve and the Organization. The volunteers do this principally through an
	annual native plant sale.
Ad	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
40	Total program service expenses > 353 906

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	x	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11e		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		х
			n 990	(2016)

Part I	V Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b		<u> </u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			$\overline{}$
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u>X</u> _
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	25b		,,
26	If "Yes," complete Schedule L, Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	250		X
26	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		<u>x</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		.,
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	21		X
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	200		
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		X
	Schedule L, Part IV	28b		х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29	Х	
30	conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,		,	,,
32	Part I	31		X
32	complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		,
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
_	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			۱.,
38	Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	37		<u> </u>
50	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
		For	_	(2016)

Form **990** (2016)

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Gheck if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 9			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	}	•	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			ļ., .
	reportable gaming (gambling) winnings to prize winners?	1c	Χ_	L
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			l
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 4		ļ	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	Ì		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ĺ .		
	account)?	4a		<u> </u>
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	Ì		İ
_	(FBAR)			<u> </u>
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Delicate to prohibited tax shelter transaction at any time during the tax year?	5a		_X _X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		- <u>^</u>
c 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	50		
Va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	 		
-	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	"		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	İ		
	and services provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		_X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		_X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		<u>X</u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		_X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		_X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	Ì		
11	Section 501(c)(12) organizations. Enter.	1		
''a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year .			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	L	L	<u></u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans	1		
C	Enter the amount of reserves on hand	 	<u> </u>	<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		_X_

Part	Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule Company to the Schedul								
Casti	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>	<u> </u>	<u> </u>					
Secu	on A. Governing Body and Management			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	1a 21							
b Enter the number of voting members included in line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?									
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?									
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 98 Did the organization become aware during the year of a significant diversion of the organization Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to one or more members of the governing body?	on's assets?	4 5 6	X	X				
b	Are any governance decisions of the organization reserved to (or subject to approval stockholders, or persons other than the governing body?	by) members,	7b		Х				
8	Did the organization contemporaneously document the meetings held or written actions un the year by the following	dertaken during							
a b	The governing body? Each committee with authority to act on behalf of the governing body?		8a 8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses in Schedule C). .	9		X				
Secti	on B. Policies (This Section B requests information about policies not required by the	e internal Reven	ue C	oae.) Yes	No No				
10a	Did the organization have local chapters, branches, or affiliates?		10a	163	X				
b	If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exem		10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	e filing the form?	11a	Х					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	 e nse to conflicts?	12a 12b	X					
С	Did the organization regularly and consistently monitor and enforce compliance with the parameter describe in Schedule O how this was done	oolicy? If "Yes,"	12c	Х					
13 14 15	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation		13	X					
a b	The organization's CEO, Executive Director, or top management official		15a 15b	Х	х				
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or simil with a taxable entity during the year?	lar arrangement	16a		x				
	If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?		16b						
	on C. Disclosure								
17 18	List the states with which a copy of this Form 990 is required to be filed AL Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, all available for public inspection. Indicate how you made these available. Check all that apply.	nd 990-T (Section	501(c)(3)s	only)				
19	Own website Another's website Upon request Other (explain in School Describe in School Owner (and if so, how) the organization made its governing docume financial statements available to the public during the tax year	•	erest	oolicy	/, and				
20	State the name, address, and telephone number of the person who possesses the organization Marcia Miller, 11401 U.S. Highway 98, Fairhope, AL 36532 (251)		cords	>					

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Page	ſ

	000	mni	c١
Form	990	1201	ы

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,	and
	Independent Contractors	

Check if Schedule O contains a response or note to any line in this Part VII			
Check if ochequie O contains a response of note to any line in this raft vir	[line in this Part VII	Check if Schedule O contains a response or note to any

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - · List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order, individual trustees or directors; institutional trustees; officers, key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization	nor any relate	d org	anız	atıo	n c	ompe	nsa	ited any curren	t officer, director	r, or trustee
(A) Name and Title	(B) Average hours per week (list any	box,	unles	Pos eck s pe d a d	rson	e than o is both or/trust	an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1)Ellis Allen	5							ļ ķ		
Chairman and President		х		х				1 0	l o	0
(2) John Borom	5							<u> </u>		
Vice President		х		Х				0	0	0
(3) Phil Norris	5						Г			
Secretary		х		х				0	0	0
(4) Buddy Russell	5									
Treasurer		Х		Х			ļ	0	0	0
(5) Shawn Alves	2									
Board Member		Х						0	0	0
(6) Andrew Chason	2									
Board Member		Х			L		_	0	0	0
(7)Daniel Galbraith	2									
Board Member		Х				<u> </u>		0	0	0
(8) Ralph Havard	2			ŀ			1		,	
Board Member		Х			_		<u>L</u>	0	0	0
(9) Ken Heard	2					1				
Board Member		Х						0	0	0
(10) Veronica Herndon	2	}						1		
Board Member		Х					L	0	0	0
(11)Bob Holk	2	1				1	l			
Board Member		Х			<u> </u>			0	0	0
(12)Rodney Kilgore	2					'		1		
Board Member		Х				L	_	0	0	0
(13)Walter Kirkland	2			ľ	1				1	
Board Member		Х			$ldsymbol{ld}}}}}}$	ļ	_	0	0	0
(14)GiGi Lott	2	1					ĺ	1	[
Board Member		Х					<u></u>	0	0	0

(A) Name and to	(B) Average hours per week (list any	(do n box, office	not che unless er and	(C Posi eck r s per a di	tion nore son recti	than one of the than the than the than the than the than the the than the than the the the the the the the the the the	one an ee)	(D) Reportable compensation from	(E) Reportable compensation t related	from	(F) Estimated amount of other		
		hours for related organizations below dotted line)	dividua	Institutional trustee	Officer	Key emplayee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-Mis		compensation from the organization and related organizations	
(15) Leslie Pacey		2											
Board Member (16) Michael Quinn		2	Х		\dashv				0		의		_0
Board Member		- -	x						l 0		o		0
(17) John Stump		2		П	一	\neg							_
Board Member			Х	Ш					0		0	<u></u>	0
(18) Skipper Tonsmeir	e	2											
Board Member		<u> </u>	X	$\vdash \vdash$	\dashv			┝					0
(19) Gina Walcott Board Member		2	x						0		٥		0
(20) Rick Wallace		2	<u>^</u>	H	\dashv				· · · · · ·		-		
Board Member		} -	x		H	- 1			0		0		0
(21) Leslie Weeks		2											_
Board Member			Х					<u> </u>	0		0		0
(22) Yael Girard		40		1									
Executive Direct	or		ļ <u> </u>	Н	X	\dashv			58,557		0	5,38	36
(23)		 -	ł	1 1	ď	ı							
(24)								\vdash		·			_
3									L .				
(25)													
4. 5.14.1		<u> </u>			l			Ļ	50 553				
1b Sub-total c Total from continua	tion shoots to Dort	 Mi Contin	n A			•	•		58,557		0	5,38	36
d Total (add lines 1b a						•	•	-	58,557		0	5,38	
2 Total number of indiv					lista	ed a	ahove	-1 w		ore than \$10			
reportable compensa	•		1 10 11	0			20010	-, ••	no received in	oro triarr ¢ro	0,000	, 01	
												Yes No	<u>-</u>
3 Did the organization								emp	loyee, or high	est compen	sated		
employee on line 1a?	·											3 X	-
4 For any individual list organization and rel													
individual		greater til	an w	150,0	300	. "	, .	٥,			3401	' 4 X	<u> </u>
5 Did any person listed	on line 1a receive of	or accrue co	ompe	nsatı	ion	fror	n any	un	related organiz	ation or indiv	/idua		_
for services rendered										<u> </u>		5 X	<u>-</u> -
Section B. Independent Co													_
Complete this table f compensation from t year													
	(A) Name and business add	Iress	-						(B) Description of s	ervices		(C) Compensation	
													_
													_
								<u> </u>					
2 Total number of inc	lependent contracto	rs (include	na hi	ıt no	ot li	mit	ed to	l_ th	ose listed ah	ove) who			_
received more than \$								•••		0			

Part	VIII	Statement of Revenue					
		Check if Schedule O contains a re	sponse or note to				(D)
	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512-514
है है।	1a	Federated campaigns . 1a					
or u	b	Membership dues 1b	33,358				
Contributions, Giffs, Grants and Other Similar Amounts	С	Fundraising events 1c	31,320				
ar,	d	Related organizations 1d					
ini,	е	Government grants (contributions) 1e	133,576				
er S	f	All other contributions, gifts, grants,	500 010				,
현원		and similar amounts not included above 1					
nd or	g	Noncash contributions included in lines 1a-1f: \$	432,000	732,073			
	<u>h</u>	Total. Add lines 1a–1f	Business Code	132,013		 	
Program Service Revenue	2a	Workshops and seminars	900099	6,231			
Re	b	Alabama Coastal Birdfest	900099	60,606	_,-		
<u>i</u>	c	Weeks Bay Volunteers	900099	23,066			
ě.	d						
Ē	е						
gra	f	All other program service revenue					
<u>*</u>	g	Total. Add lines 2a-2f	. •	89,903			, -
	3	Investment income (including divi	dends, interest,				
	_	and other similar amounts)		50,537			
i	4	Income from investment of tax-exempt	bond proceeds			<u> </u>	
	5	Royalties	(ii) Personal		-		
	6a	Gross rents	(.,, 5,55,16.				
	b	Less. rental expenses					
	C		0 0				
	d	Net rental income or (loss) .	•	0			
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory				*	
	b	Less cost or other basis					
		and sales expenses	-				
	C		0 0			<u> </u>	
	d	Net gain or (loss)	. •	0			
e ne	8a	Gross income from fundraising					
	04	events (not including \$ 31,320				1	
Š		of contributions reported on line 1c).					
er		See Part IV, line 18	a 39,993				
Other Reven	b	Less: direct expenses .	b 25,274				
	С	Net income or (loss) from fundraising	g events 🕨	14,719			<u> </u>
	9a						
		See Part IV, line 19	a				
	b	Less direct expenses Net income or (loss) from gaming a	b	₀		-	
	10a					 	
	'04	returns and allowances	a 10,222				
	ь	Less cost of goods sold	b 6,678	1	ļ		
	С	Net income or (loss) from sales of in		3,544			
		Miscellaneous Revenue	Business Code				
	11a						ļ
	b					 	 -
	C	All all a garages	.	 	 	 	 -
	d	All other revenue . Total, Add lines 11a–11d .	•	0	 	+	
	12	Total revenue. See instructions.		890,776		 	
		Total Totaliae, Goo moradions.	· ·	5507.70			Form 990 (2016)

•					
Form 9	90 (2016)				Page 10
	Statement of Functional Expenses	-			Page 10
	on 501(c)(3) and 501(c)(4) organizations must com	plete all columns A	ll other organization	s must complete coli.	ımn (A)
	. Check if Schedule O contains a respons				
Do no 8b, 9l	ot include amounts reported on lines 6b, 7b, p, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members	61,812	46 350	6 101	0.272
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	01,012	46,359	6,181	9,272
7 8	Other salaries and wages	50,376	39,032	4,538	6,806
9	· · · · · · · · · · · · · · · · · · ·	3,034	2,275 2,777	304	455
10	Other employee benefits . Payroll taxes	3,702 8,401	6,301	370	555
11	Fees for services (non-employees):	8,401	6,301	840	1,260
''a	Management				
b	Legal				
C	Accounting	4,655	4,655		
d	Lobbying	1,000			
е	Professional fundraising services See Part IV, line 17			7	
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion .	7,204	7,204		
13	Office expenses	30,337	11,294	5,201	13,842
14	Information technology .				
15	Royalties				
16	Occupancy	4,083	3,177	408	498
17	Travel	17,031	16,972	59	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,306	3,932	374	
20	Interest				
21	Payments to affiliates .				
22	Depreciation, depletion, and amortization .	11,307	10,199	1,108	
23	Insurance	7,196	6,572	624	
24	Other expenses Itemize expenses not covered				į.

7,500

818

10,450

174,389

406,601

7,500

818

20,007

10,450

174,389

353,906

above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)

b Donations to other organizations

Total functional expenses. Add lines 1 through 24e

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

Contract labor

c Miscellaneous

e All other expenses

25

d Program expenses

32,688

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 260,529 126,987 Cash-non-interest-bearing 2 Savings and temporary cash investments . . . 2 10,148 3 12,238 Pledges and grants receivable, net 3 Accounts receivable, net . . 5 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L **Assets** Notes and loans receivable, net 2,980 8 4,057 Inventories for sale or use 6,356 Prepaid expenses and deferred charges 5.782 Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 523,427 10c Less: accumulated depreciation 10b 366,585 163,662 156,842 11 11 Investments—publicly traded securities 1,694,883 12 1,896,076 12 Investments—other securities. See Part IV, line 11 . Investments-program-related See Part IV, line 11 13 13 14 14 Intangible assets . . . 2,743,450 15 3,224,950 15 Other assets, See Part IV, line 11 . . . 4,882,008 5,426,932 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 4, 87617 10,195 Accounts payable and accrued expenses . 17 18 18 Grants payable . . Deferred revenue . . 47,600 19 19 20,918 20 20 Tax-exempt bond liabilities . 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 . Total liabilities. Add lines 17 through 25 52,476 26 31,113 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔯 and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 4,709,246 5,261,271 27 Unrestricted net assets 57,786 28 62,298 28 Temporarily restricted net assets . 62.500 29 Permanently restricted net assets 72,250 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds . 33 5,395,819 33 Total net assets or fund balances 4,829,532 4,882,008 5,426,932 Total liabilities and net assets/fund balances Form **990** (2016)

_	4	
Page	- 1	4

				_		
Part						_
	Gheck if Schedule O contains a response or note to any line in this Part XI		<u> </u>			_Ц
1	Total revenue (must equal Part VIII, column (A), line 12)	1				776
2	Total expenses (must equal Part IX, column (A), line 25)	2				601
3	Revenue less expenses Subtract line 2 from line 1	3				175
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4		4,8		532
5	Net unrealized gains (losses) on investments	5			82,	112
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		5,3	95,	819
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII			٠,		
				`	Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın i	n			-
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	oiled o	or			
	reviewed on a separate basis, consolidated basis, or both:					1
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			_ -		
b	Were the organization's financial statements audited by an independent accountant?		. 2	b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on	a		1	, in the second
	separate basis, consolidated basis, or both:		l		- 1	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or				İ	
	of the audit, review, or compilation of its financial statements and selection of an independent account		<u></u>	С	Х	
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın ı	n			
	Schedule O			_		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i	n			
	the Single Audit Act and OMB Circular A-133?		. 3	a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under		е [
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udıts.	31			
			F	orm	990	(2016)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

nexempt chantable trust. 2016

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No 1545-0047

Name	lame of the organization Employer identification number						
WEE	EEKS BAY FOUNDATION, INC. 63-1021925						
Par	Reason for Public Cha	rity Status (All	organizations must	comple	te this p	art.) See instruction	ns.
The o	The organization is not a private foundation because it is (For lines 1 through 12, check only one box.)						
1							
2	A school described in section		•			• •	
3	A hospital or a cooperative hos						
4	A medical research organization hospital's name, city, and state	e.					
5	An organization operated for section 170(b)(1)(A)(iv). (Comp		college or university	owned o	r operate	ed by a government	al unit described in
6 7	☐ A federal, state, or local govern ☐ An organization that normally described in section 170(b)(1)	receives a subs	tantial part of its sup				the general public
8	☐ A community trust described in	n section 170(b)	(1)(A)(vi). (Complete I	Part II.)			
9	An agricultural research organi or university or a non-land-gra university:	nt college of agn	iculture (see instructio	ons) Ente	r the nan	ne, city, and state of	the college or
10	An organization that normally receipts from activities related support from gross investment acquired by the organization a	to its exempt full tincome and uni	nctions—subject to co related business taxal	ertain exc ble incom	eptions, e (less se	and (2) no more that ection 511 tax) from	n 331/3% of its
11	☐ An organization organized and						
12	☐ An organization organized and						
	of one or more publicly support Check the box in lines 12a thro						
а	Type I. A supporting organ the supported organization supporting organization. You	n(s) the power to	regularly appoint or e	lect a ma	jority of t		
b	Type II. A supporting organ control or management of organization(s) You must	the supporting o	rganization vested in	the same			
С	: Type III functionally integ						ally integrated with,
d							orted organization(s)
•	that is not functionally integrequirement (see instruction	grated. The orga	nization generally mu	st satisfy	a distribi	ition requirement an	
е	Check this box if the organ functionally integrated, or ∃						e II, Type III
f							
g		n about the supp	orted organization(s)				
	(i) Name of supported organization	(II) EİN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		li
(A)							
(B)	•						
(C)							
(D)							
(E)				<u> </u>			
Tota	.1			 			

***************************************		гац
Part II	Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)	
	(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify	under
	Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)	
Section /	A. Public Support	

Secu	on A. Fublic Support						
Calen	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	220 400	0.004.007	022 212	700 601	720 050	4 627 55-
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	238,422	2,034,027	932,319	700,686	732,073	4,637,527
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	238,422	2,034,027	932,319	700,686	732,073	4,637,527
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						4,637,527
	on B. Total Support			· · · · · · · · · · · · · · · · · · ·	-		
	dar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7	Amounts from line 4	238,422	2,034,027	932,319	700 ,6 86	732,073	4,637,527
9	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	234,080	141,928	325,596	62,020	50,537	814,161
	is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	87,563	81,513	106,366	112,016	108,166	495,624
11	Total support. Add lines 7 through 10						5,947,312
12 13	Gross receipts from related activities, etc First five years. If the Form 990 is for the organization, check this box and stop he on C. Computation of Public Support	ie organizatior re	n's first, second				n 501(c)(3) ▶ □
14	Public support percentage for 2016 (line 6			1 column (f))		14	77.98%
15	Public support percentage from 2015 Sch 331/3% support test—2016. If the organi	edule A, Part zation did not	ll, line 14 check the box	on line 13, and	d line 14 is 33	15 1/3% or more,	77.41 % check this
b	box and stop here. The organization qua 331/3% support test—2015. If the organi this box and stop here. The organization	zation did not	check a box or	n line 13 or 16a			تت
17a	10% -facts-and-circumstances test—20 10% or more, and if the organization meets the "organization	ets the "facts facts-and-circ	-and-circumsta	inces" test, che st. The organiz	eck this box a ation qualifies	nd stop here. as a publicly	d line 14 is Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organiza Explain in Part VI how the organization in supported organization	tion meets th	e "facts-and-cits-and-cits-and-cits	ircumstances" tances" test. T	test, check the organization	his box and s on qualifies as	top here. a publicly
18	Private foundation. If the organization dinstructions	d not check a	box on line 13,	16a, 16b, 17a,	or 17b, check	this box and	see . ▶ □
						-dul- A /F 00/	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees						}
	received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						ŀ
	organization's tax-exempt purpose .						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513				1		İ
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
_	received from other than disqualified	!					
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						<u> </u>
8	Public support. (Subtract line 7c from				*		
	line 6)				<u> </u>		
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975		1				
	Add lines 10a and 10b	<u></u>	-			ļ	
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on				<u> </u>		-
12	Other income. Do not include gain or					1	
	loss from the sale of capital assets (Explain in Part VI.)				:		
42	Total support. (Add lines 9, 10c, 11,				 		
13	and 12.)				1	[
14	First five years. If the Form 990 is for the	L organizatio	n's first secon	d third fourth	n or fifth tax v	ear as a section	on 501(cY3)
14	organization, check this box and stop he						
Secti	ion C. Computation of Public Suppo						
15	Public support percentage for 2016 (line			13. column (f))		15	%
16	Public support percentage from 2015 Sc					16	%
	ion D. Computation of Investment In						<u> </u>
17	Investment income percentage for 2016			y line 13, colu	mn (f))	17	%
18	Investment income percentage from 201					18	%
19a	331/3% support tests—2016. If the organ				ind line 15 is n	nore than 331/3	%, and line
	17 is not more than 331/3%, check this box	and stop here	e. The organizat	ion qualifies as	a publicly supp	orted organiza	tion 🕨 🔲
ь	331/s% support tests-2015. If the organi	zation did not	check a box on	line 14 or line	19a, and line 1	6 is more than	33¹/₃%, and
_	line 18 is not more than 331/3%, check this	box and stop	here. The organ	nzation qualifie	s as a publicly s	supported orga	nization 🕨 📋
20	Private foundation. If the organization d						_

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.			
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
¢	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
ь	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c	· 	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
þ	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
þ	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	401		

Page	į

Part	V Supporting Organizations (continued)			
	,		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			L
_	below, the governing body of a supported organization?	11a		├──
	A family member of a person described in (a) above? A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11b		
	on B. Type I Supporting Organizations	110		Щ_
	on by Type i cuppering organizations	_	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		_	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
2		1		-
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		 '
Secti	on C. Type II Supporting Organizations		_	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)			
Sacti	on D. All Type III Supporting Organizations	1		<u> </u>
Jec.	on b. Air Type in Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	_	<u> </u>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
3	By reason of the relationship described in (2), did the organization's supported organizations have a	2		
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		<u> </u>
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ction	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struct	ions).
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			1
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities			i
_		2a	-	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these		i	
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			_
	trustees of each of the supported organizations? Provide details in Part VI.	3a_		<u> </u>
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3h		
	του με εμπροπρία οταροιτρίτους / με γρα ταρέτους το Μοττ VI τος τοις οιργέα ΝV τος οταροιτρίτου το τοις τραστά	· «n ˈ		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1			laın in Part VI). See
instructions. All other Type III non-functionally integrated supporting organ			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recovenes of pnor-year distributions	2	•	
3 Other gross income (see instructions)	3	· · · · · · · · · · · · · · · · · · ·	
4 Add lines 1 through 3	4	· · · · · · · · · · · · · · · · · · ·	
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b	<u>,</u>	
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):		*	
2 Acquisition indebtedness applicable to non-exempt-use assets	2	· · · · · · · · · · · · · · · · · · ·	
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4	3	
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional	ly in	tegrated Type III support	ing organization (see
instructions)			

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continuea)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e			· · · · · · · · · · · · · · · · · · ·
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of suppo	rted	
	organizations, in excess of income from activity			
	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nızations	<u>.</u>
	Amounts paid to acquire exempt-use assets			·
	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			_
8	Distributions to attentive supported organizations to which	n the organization is res	ponsive	
	(provide details in Part VI) See instructions.			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6			·
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required—explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2016.			
а				
b				
С	From 2013		'	
d	From 2014			
е	From 2015			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2016 distributable amount		· · · · ·	
i	Carryover from 2011 not applied (see instructions)	· · · · · · · · · · · · · · · · · · ·		
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2016 from Section D, line 7: \$			`
a	Applied to underdistributions of prior years			
b	Applied to 2016 distributable amount			
С_	Remainder Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI See instructions.		0	
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			0
7	Excess distributions carryover to 2017. Add lines 3j and 4c.	0		
8	Breakdown of line 7:			
a				
b	Excess from 2013			
С	Excess from 2014			
d	Excess from 2015			
е	Excess from 2016			·

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Part II	, Line 10 - Other income consists of seminars, fundraising, sale of merchandise,
and misc	cellaneous income.

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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B
- · Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	ection 501(c)(4), (5), or (6) orga of organization	anizations: Complete Part III.		Employer ide	ntification number
	•			' '	
	S BAY FOUNDATION,			63-102192	
Part		e organization is exempt und f the organization's direct and in			
1	definition of "political car		direct political ca	impaign activities in Par	t IV. (see instructions to
2	Political campaign activit	y expenditures (see instructions) .		<i>.</i> > \$	<u> </u>
3	Volunteer hours for politi	cal campaign activities (see instruc	ctions)		
Part		e organization is exempt und			
1	Enter the amount of any	excise tax incurred by the organiza	ation under sectio	n 4955 ▶ 🧐	\$
2	Enter the amount of any	excise tax incurred by organization	n managers under	section 4955 > \$	B
3	If the organization incurre	ed a section 4955 tax, did it file Foi	rm 4720 for this y	ear?	Yes No
4a	Was a correction made?				🗌 Yes 🔲 No
b	If "Yes," describe in Part				
Part	I-C Complete if the	e organization is exempt und	er section 501(c), except section 501	(c)(3).
1	Enter the amount direct	ly expended by the filing organiz	ation for section	527 exempt function	
					3
2		filing organization's funds contrib	•	•	
		ivities			;
3		expenditures. Add lines 1 and 2			
4		n file Form 1120-POL for this year			Yes No
5	Enter the names, address organization made payme the amount of political co	ses and employer identification nur ents. For each organization listed, ontributions received that were pro I fund or a political action committe	mber (EIN) of all se enter the amount mptly and directly	ection 527 political organi paid from the filing organ delivered to a separate p	izations to which the filing ization's funds. Also enter political organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -O	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2016

	section 501(h)).	on is exempt under section 501(c)(3) and filed		
A	Check ► ☐ if the filing organization	pelongs to an affiliated group (and list in Part IV e	each affiliated gro	up member's
		enses, and share of excess lobbying expenditur		
B		hecked box A and "limited control" provisions a		
		bbying Expenditures	(a) Filing organization's totals	(b) Affiliated group totals
	·	means amounts paid or incurred.)	organization a totals	group totals
1		ce public opinion (grass roots lobbying)	ļ	
		ce a legislative body (direct lobbying)		
	, , , , ,	1a and 1b)	0	
			391,237	
	e Total exempt purpose expenditures (a	dd lines 1c and 1d)	391,237	
	· ·	r the amount from the following table in both		
	columns.		78,247	
	If the amount on line 1e, column (a) or (b)			
	Not over \$500,000	20% of the amount on line 1e.		-
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.	10.560	
		25% of line 1f)	19,562	···
	h Subtract line 1g from line 1a. If zero o		0	
	i Subtract line 1f from line 1c. If zero or		0	
	j If there is an amount other than ze reporting section 4911 tax for this ye	ro on either line 1h or line 1i, did the organization		Yes No
	(Some organizations that made a	Year Averaging Period Under section 501(h) section 501(h) election do not have to complete all he separate instructions for lines 2a through 2f.)		s below.

	Lobbyi	ng Expenditures D	uring 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a	Lobbying nontaxable amount	104,987	91,068	114,689	78,247	388,991
b	Lobbying ceiling amount (150% of line 2a, column (e))					583,487
С	Total lobbying expenditures	0	0	0	0	0
d	Grassroots nontaxable amount	26,247	22,767	28,672	19,562	97,248
е	Grassroots ceiling amount (150% of line 2d, column (e))					145,872
f	Grassroots lobbying expenditures	0	0	0	0	0

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Forn	n 5768		
For e	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(;	a)		(b)	
	iption of the lobbying activity.	Yes	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?			ļ		.,
d	Mailings to members, legislators, or the public?			<u> </u>		
e	Publications, or published or broadcast statements?	-				
f	Grants to other organizations for lobbying purposes?	-	_	ļ		
g	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	-		ļ		
h i	Other activities?	-		ļ		
i	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		l			
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	:)(5), (or se	ction		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	ļ	ļ
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		ļ
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				L	
rait	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," C answered "Yes."				line	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).	s of				
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion o excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb					
	and political expenditure next year?		4	}		
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Par						
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	oup lis	t); Pa	rt II-A, I	ines	1 and

Schedule C (For	rm 990 or 990-EZ) 2016	Page 4
Part IV	Supplemental Information (continued)	
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	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	

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SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

OMB No 1545-0047 20**16**

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number WEEKS BAY FOUNDATION, INC. 63-1021925 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) . 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area X Protection of natural habitat ☐ Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements Total acreage restricted by conservation easements 2b 326 Number of conservation easements on a certified historic structure included in (a) . 0 Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ▶ Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 4,018 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X

Part 3	Using the organization's acquisition,	accession, and otl								
	collection items (check all that apply):									
а	Public exhibition		d		or exchang					
b	Scholarly research		е	☐ Othe	r 					
C	Preservation for future generations									
4	Provide a description of the organiza XIII.	tion's collections a	ina expla	in now t	ney further	tne org	anization's exem	ipt purpo	se in I	Part
5	During the year, did the organization									
	assets to be sold to raise funds rather		ined as p	part of the	e organizati	on's co	llection?	☐ Ye	s 🔲	No
Part	IV Escrow and Custodial Arra		_			_			_	
	Complete if the organization	answered "Yes"	on Fon	m 990, f	Part IV, line	9, or ı	reported an am	ount on	Form	}
4-	990, Part X, line 21.	austadian av ath	!	adlam, f			athau accata na			
1a	Is the organization an agent, trustee included on Form 990, Part X?									M-
L	If "Yes," explain the arrangement in P							☐ Ye	s 📙	NO
ь	ii res, explain the arrangement in P	art Alli and comple	ete trie io	llowing t	abie.		Ar	nount		
С	Beginning balance					1c	+			—
ď	Additions during the year					1d	+			
e	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amou				scrow or cu		account liability	? ☐ Ye	$\overline{\Box}$	Nο
b	If "Yes," explain the arrangement in P									
Par				<u> </u>						
	Complete if the organization	answered "Yes"	on For	m 990, F	Part IV, line	10.				
		(a) Current year	(b) Prid		(c) Two years		(d) Three years back	(e) Four	ears ba	ack
1a	Beginning of year balance	62,500	(52,500	62	,500	56,500		56,5	500
b	Contributions	9,750					11,000			
c	Net investment earnings, gains, and									
	losses							1		
d	Grants or scholarships									
e	Other expenditures for facilities and					i				
	programs						5,000			
f	Administrative expenses						_			
g	End of year balance	72,250	(52,500	62	,500	62,500		56,5	500
2	Provide the estimated percentage of			e (line 1g	ı, column (a)) held a	ıs:			
а	Board designated or quasi-endowme	nt 🕨	_%							
b		00%								
C	Temporarily restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and									
3a	Are there endowment funds not in th	e possession of th	e organiz	zation tha	at are held a	and adr	ninistered for the	_		
	organization by:							$\overline{}$	_	<u>No</u>
	(i) unrelated organizations							3a(i)	Х	
	(ii) related organizations							3a(ii)		
b	If "Yes" on line 3a(ii), are the related of							3b	L	
4	Describe in Part XIII the intended uses		n's enac	wment to	unas.					
Par				000 r	7ami (V. 1)ma	. 44- 6	Can Farm 000	Daniel V. II	40	
	Complete if the organization									<u>'-</u>
	Description of property	(a) Cost or oth			or other basis ther)		ccumulated preciation	(d) Book	value	
	Land	,	•	,,,			·		20 (100
1a	Land	•			30,000		110 001		30,0	
b	Buildings	•			235,001		110,821		24,1	100
G	Leasehold improvements Equipment	.			63,836		61 174			62
d e	Other				194,590		61,174 194,590		2,6	0
	Add lines 1a through 1e. (Column (d) r	nust equal Form 00	O Part V			<u> </u>	194,390	1	56,8	<u> </u>
Total.	rice into ta unough te. (Column (a) I	nost oqual i VIIII 33	o, i dil/	, commi	ر <u>د، ر</u> بی, و	<i>v., .</i> .		-	,	, 12

Part VII	Investments — Other Securities. Complete if the organization answered "Yes" on	Form 990. Part IV. lin	e 11b. See Form 9	990. Part X line 12
,	(a) Description of security or category (including name of security)	(b) Book value	(c) Metho	od of valuation: f-year market value
(1) Financia	denvatives			
• •	held equity interests			
(3) Other				
(A) TIAA	-CREF	1,896,076	End of year m	narket value
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	b) must equal Form 990, Part X, col. (B) line 12.) ▶	1,896,076		
Part VIII	Investments – Program Related.			
	Complete if the organization answered "Yes" on	Form 990, Part IV, lin	e 11c. See Form 9	990, Part X, line 13.
	(a) Description of investment	(b) Book value		od of valuation: f-year market value
(1)				
(2)		-		
_(3)				· · · · · · · · · · · · · · · · · · ·
(4)				- <u>-</u>
(5)				
<u>(6)</u>				
<u>(7)</u>			 	
(8)				
Total (Column)	b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets.		*	
	Complete if the organization answered "Yes" on	Form 990, Part IV, lin	e 11d. See Form 9	
	(a) Description			(b) Book value
	held for convservation purposes			3,185,75
(2) Trade	lands			39,20
(3)				
(4)				
<u>(5)</u>			·	
<u>(6)</u>				
_(7)				
<u>(8)</u>				
Total (Colu	mn (b) must equal Form 990, Part X, col. (B) line 15.)			2 224 054
Part X	Other Liabilities.		· · · · · · · · · · · · · · · · · · ·	3,224,95
	Complete if the organization answered "Yes" on line 25.	Form 990, Part IV, lin	e 11e or 11f. See	Form 990, Part X,
1.	(a) Description of liability (b) Book va	lue	-	
(1) Federal in	ncome taxes			
(2)				
(3)				
(4)		_		
(5)				
(6)				
(7)				
(8)				
(9)				
	b) must equal Form 990, Part X, col. (B) line 25.) ▶			
2. Liability fo	r uncertain tax positions. In Part XIII, provide the text of the f	ootnote to the organization	n's financial statement	ts that reports the
organization'	s liability for uncertain tax positions under FIN 48 (ASC 740).	Check here if the text of the	he footnote has been	provided in Part XIII

Part			Return.	
	Complete if the organization answered "Yes" on Form 990, Par			070 000
1	Total revenue, gains, and other support per audited financial statements .		1	972,888
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	- 00 110		
a	Net unrealized gains (losses) on investments			
b	Bollated collision and accompany of the collision and the collisio			
C			-	
d	Other (Describe in Part XIII.)		2e	82,112
е 3	Subtract line 2e from line 1		3	890,776
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			030,770
_	Investment expenses not included on Form 990, Part VIII, line 7b 4	a	ī. * .	
a b	Other (Describe in Part XIII.)	*******	N	
C	Add lines 4a and 4b		4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	890,776
Part				
	Complete if the organization answered "Yes" on Form 990, Par			
1	Total expenses and losses per audited financial statements		1	406,601
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	a		
b	Prior year adjustments	b		
C	Other losses	С		
d	Other (Describe in Part XIII.)	d	1,3,	
е	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	406,601
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		·\$	
а	Investment expenses not included on Form 990, Part VIII, line 7b 4	a	*,	
b	Other (Describe in Part XIII.)	b		
С			4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	8.)	5	406,601
Part	XIII Supplemental Information.	5	5	1 D. IV I
Provid	the the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;	Part IV, lines 1b and 2b	; Part V, IIn	e 4; Part X, line
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p			- D-14
Part	II, line 5 - The Organization has a written Conserv	ation Easement A	menamen	Policy,
a	tim Research Enforcement Polyay, and a Congorya	tion Eagement Mo	ni torino	r Policy
Cons	ervation Easement Enforcement Policy, and a Conserva	CION Easement Mo.	IIT COLTIIG	POTICY.

Part XIII Supplemental Information (continued)

Part II, line 9 - The Organization records their easements at their appraised value.
Unrestricted support and expenses are recognized in equal amounts based upon the fair
value of the easement. The Organization is obligated to monitor easements to ensure
that the restrictions are maintained. The Organization monitors these easements in the
normal course of its operations and associated costs are expensed as incurred. The
estimated value of the easements is not included in the statements of financial position
because the easements do not represent a future economic benefit to the Organization. The
following is the related footnote from the Organization's audited financial statements:
Donated conservation easements represent rights to restrict the use, access and development
of certain properties. Unrestricted support and expenses are recognized in equal amounts
based upon the appraised fair value of the easement. The Organization is obligated to
monitor easements to ensure that the restrictions are maintained. The Organization
monitors these easements in the normal course of its operations and associated costs are
expensed as incurred.
The estimated fair value of easements is not included in the statements of financial
position because the easements do not represent a future economic benefit to the
Organization.
Part V, line 4 - The intended use of the Organization's endowment funds are to provide
investment income sufficient to defray the annual expenses related to monitoring and
maintaining conservation easements and land held for conservation purposes.
3

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2016
Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number WEEKS BAY FOUNDATION, INC. 63-1021925 Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. ☐ Mail solicitations e Solicitation of non-government grants b ☐ Internet and email solicitations f Solicitation of government grants ☐ Phone solicitations g Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (or retained by) fundraiser listed in col. (i) (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (ii) Activity (or retained by) custody or control of contributions? or entity (fundraiser) from activity organization Yes 1 2 3 5 6 7 8 10 **Total** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

\neg			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Bald Eagle Bash (event type)	(event type)	(total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts	67,707		3,606	71,313
ř	2	Less: Contributions Gross income (line 1 minus	31,320			31,320
_		line 2)	36,387		3,606	39,993
ĺ	4	Cash prizes				
	5	Noncash prizes				
enses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages	7,085			7,085
Direc	8	Entertainment	3,500			3,500
	9	Other direct expenses .	11,207		3,482	14,689
		Direct expense summary. Ad	ld lines 4 through 0 in s	- l (-1)	_	05 07
	10 11	Net income summary. Subtra	act line 10 from line 3, c	olumn (d)	•	14,719
Pa		Net income summary. Subtra Gaming. Complete if the	act line 10 from line 3, c e organization answer	olumn (d)	•	14,719
	11	Net income summary. Subtra	act line 10 from line 3, c e organization answer	olumn (d)	•	14,719
	11	Net income summary. Subtra Gaming. Complete if the	act line 10 from line 3, c e organization answei 90-EZ, line 6a.	olumn (d)	▶ 0, Part IV, line 19, or	reported more (d) Total gaming (add
Revenue	11 1 III	Net income summary. Subtra Gaming. Complete if the than \$15,000 on Form 99	act line 10 from line 3, c e organization answei 90-EZ, line 6a.	olumn (d)	▶ 0, Part IV, line 19, or	reported more (d) Total gaming (add
Revenue	11	Net income summary. Subtra Gaming. Complete if the than \$15,000 on Form 99 Gross revenue	act line 10 from line 3, c e organization answei 90-EZ, line 6a.	olumn (d)	▶ 0, Part IV, line 19, or	(d) Total gaming (add
Revenue	1 1 2	Net income summary. Subtra Gaming. Complete if the than \$15,000 on Form 99 Gross revenue	act line 10 from line 3, c e organization answei 90-EZ, line 6a.	olumn (d)	▶ 0, Part IV, line 19, or	reported more (d) Total gaming (add
Revenue	1 2 3	Net income summary. Subtra Gaming. Complete if the than \$15,000 on Form 99 Gross revenue	act line 10 from line 3, c e organization answei 90-EZ, line 6a. (a) Bingo	olumn (d)	▶ 0, Part IV, line 19, or (c) Other garming	reported more (d) Total gaming (add
Revenue	1 2 3 4	Subtraction of the summary of the su	act line 10 from line 3, c e organization answei 90-EZ, line 6a.	olumn (d)	▶ 0, Part IV, line 19, or	reported more (d) Total gaming (add
Revenue	1 2 3 4 5	Subtraction of the summary of the su	act line 10 from line 3, ce organization answer 90-EZ, line 6a. (a) Bingo Yes% No	olumn (d) red "Yes" on Form 99 (b) Pull tabs/instant bingo/progressive bingo Yes% No	O, Part IV, line 19, or	reported more (d) Total gaming (add
Revenue	11 1 2 3 4 5 6	Gross revenue	act line 10 from line 3, ce organization answer 90-EZ, line 6a. (a) Bingo Yes% No	olumn (d)	O, Part IV, line 19, or (c) Other garming Yes% No	reported more (d) Total gaming (add
Revenue	11 1 2 3 4 5 6 7 8	Gross revenue Cash prizes Noncash prizes Other direct expenses	Yes	olumn (d)	O, Part IV, line 19, or (c) Other garming Yes% No	reported more (d) Total gaming (add col. (a) through col. (c))
Direct Expenses Revenue	11 1 2 3 4 5 6 7 8	Gross revenue	Yes % No No Subtract line 7 from line 3, ce organization answere 90-EZ, line 6a. (a) Bingo Yes % No Id lines 2 through 5 in ce y. Subtract line 7 from line ganization conducts gain anduct gaming activities	Olumn (d)	O, Part IV, line 19, or (c) Other garming Yes% No	reported more (d) Total gaming (add col. (a) through col. (c))

Schedu	ule G (Form 990 or 990-EZ) 2016				Page 3
11 12	Does the organization conduct gaming activities with nonmembers?	ity	_	res [] No
13	Indicate the percentage of gaming activity conducted in:		_		-
а	The organization's facility	a			%
b	An outside facility				%
14	Enter the name and address of the person who prepares the organization's garning/special events books are records:	nd			
	Name ►				
	Address ▶				
15a	Does the organization have a contract with a third party from whom the organization receives gammerevenue?	ng	П 1	∕es [∃ No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$			_	_
C	If "Yes," enter name and address of the third party: Name ►				
	Address >				
16	Gaming manager information:				
	Name ▶				
	Gaming manager compensation ▶ \$				
	Description of services provided ▶				
	□ Director/officer □ Employee □ Independent contractor				
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds retain the state gaming license?	_	□ v	′es □	l No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations spent in the organization's own exempt activities during the tax year > \$		· .	62 <u></u>	, 140
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional informations				
				•	

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

2016

Open To Public

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

Employer identification number

VEEK	S BAY FOUNDATION, INC.			63-102	1925			
Part	Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method noncash cor			-
1	Art—Works of art							
2	Art—Historical treasures					•		
3	Art—Fractional interests .							
4	Books and publications .							
5	Clothing and household			1				
	goods				1			
6	Cars and other vehicles .							
7	Boats and planes							
8	Intellectual property							
9	Secunties—Publicly traded				1			
10	Securities—Closely held stock .				Ī			
11	Securities—Partnership, LLC,				1			
	or trust interests				}			
12	Secunties-Miscellaneous							
13	Qualified conservation		-					
	contribution—Historic							
	structures				1			
14	Qualified conservation				1			
	contribution—Other							
15	Real estate—Residential							
16	Real estate—Commercial .							
17	Real estate—Other	Х	1	432,000	Fair Mar	ket	Val	ue
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()							
26	Other ► ()				<u> </u>			
27	Other ► ()				<u> </u>			
28	Other ► (<u> </u>	<u> </u>			
29	Number of Forms 8283 received				}			
	which the organization completed	Form 8283	3, Part IV, Donee Acknowled	dgement	29			0
							Yes	No
30a	During the year, did the organizat							
	28, that it must hold for at least the	hree years	from the date of the initial					
	to be used for exempt purposes to		e holding period?		-	30a		X
	If "Yes," describe the arrangemen					1		
31	Does the organization have a	-		•				
						31	Х	<u> </u>
32a	Does the organization hire or use			-	ell noncash			
						32a		X
b	If "Yes," describe in Part II.							
33	If the organization didn't report an describe in Part II.	amount in	column (c) for a type of pro	perty for which column (a)	is checked,			

Pan II 	the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.						
	······································						
	•						

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

20**16**

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

WEEKS BAY FOUNDATION, INC.	63-1021925				
Form 990, Part VI, Line 6 - Individuals, or other entities, pay a					
membership.					
Form 990, Part VI, Line 7a - The membership elects the Board of I	Directors at the annual				
membership meeting.					
Form 990, Part VI, Line 11a - A copy of the final form of the Form	rm 990 and the required				
schedules were provided to the Board of Directors electronically	for their review prior				
to the return being filed.					
Form 990, Part VI, Line 12c - The Organization, on an annual basi	is, asks each member of				
the Board of Directors to review the Conflict of Interest Policy	to verify that they do				
not have any conflicts of interest with the Organization.					
Form 990, Part VI, Line 15a - The compensation of the Executive I	Director is reviewed by				
the Executive Committee and submitted by the Budget and Finance C	Committee to the Board				
of Directors for approval as part of the annual budget.					
Form 990, Part VI, Line 18 - The Organization's Form 990 will be	mailed to anyone who				
requests a copy of the form.					
Form 990, Part VI, Line 19 - The Organization's governing documer	nts, Conflict of Interest				
Policy, the annual Audited Financial Statements and the Form 990	are made available to				
anyone who requests the documents.					

Schedule O (Form 990 or 990-EZ) (2016)			_	Page 2
Name of the organization	Emp	loyer identification	number	
WEEKS BAY FOUNDATION, INC.	63-	-1021925		
Form 990, Part VI, Line 2 - Board members Skipper Tonsmeire and Da	niel	Galbraith	have	<u>a</u>
business relationship, they are employer and employee, respectivel	У.:			
	•••			
•		*******		
•				
				*
