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

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

For calendar year 2016 or tax year beginning		, and ending	з домноннозорі	Open to Fubile inspection
Name of foundation		-	A Employer identification	number
THE ASHURST-LANE FAMILY FOU	JNDATION		63-1280870	
Number and street (or P O box number if mail is not delivered to street as	ddress)	Room/suite	B Telephone number	
5648 WOODSIDE CIRCLE			(334) 277-	1738
City or town, state or province, country, and ZIP or foreign po	ostal code		C If exemption application is po	ending, check here
MONTGOMERY, AL 36117-2601 G Check all that apply: Initial return	Initial return of a fr	ormer public charity	D 1. Foreign organizations	chook horo
Final return	Amended return	ormer public charity		
Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, imputation
H Check type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation sta	tus was terminated
	Other taxable private founda		under section 507(b)(1)	(A), check here
	ng method: X Cash cher (specify)	Accrual	F If the foundation is in a under section 507(b)(1)	
(from Part II, col (c), line 16)		pasis)	under section 507(b)(1)	(D), Check liefe
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
1 Contributions, gifts, grants, etc., received	160,099.		N/A	
2 Check If the foundation is not required to attach Sch B Interest on savings and temporary cash investments		*	*	1 3 1 9 1 3 1 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
cash investments Dividends and interest from securities	17,487.	17,487.	,	STATEMENT 1
5a Gross rents				widhtan ikuk
b Net rental income or (loss)	· *** *			#1 k, 5 4 5 5 12 1
62 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	6,223.		, , , , , , , , , , , , , , , ,	
b Gross sales price for all assets on line 6a 109,000. 7 Capital gain net income (from Part IV, line 2)		6,223.		> A\$
8 Net short-term capital gain	- 2		,	22000
9 Income modifications	,	, , ,	•	***
10a Gross sales less returns and allowances			* * * *	
b Less Cost of goods sold				
c Gross profit or (loss)			*	
12 Total. Add lines 1 through 11	183,809.	23,710.		
13 Compensation of officers, directors, trustees, etc	0.	0.		0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits 16a Legal fees			+	
h Accounting fees STMT 2	2,075.	1,038.	 	1,037.
c Other professional fees STMT 3	5,096.	5,096.		0.
9 17 Interest				
18 Taxes STMT 4	317.	209.		108.
.텔 19 Depreciation and depletion 팀 20 Occupancy			 	
19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and THE TRAVEL DEP			<u> </u>	
	N			
	♥ 7 ,488.			
23 Other expenses 24 Total operating and administrative 5 2017	8	C 242		1 145
	7,488. 48,500.	6,343.		1,145. 48,500.
25 Contributions, gifts, grants@DEN, UT 26 Total expenses and disbursements.	= = 0,500			=0,500.
Add lines 24 and 25	55,988.	6,343.		49,645.
27 Subtract line 26 from line 12:				
Excess of revenue over expenses and disbursements	127,821.	17 267		
b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)		17,367.	N/A	
v Aujustou not income (ii negative, enter -0-)	<u></u>		1 41/43	<u> </u>

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2016)

THE ASHURST-LANE FAMILY FOUNDATION

63-1280870

Form **990-PF** (2016)

Form 990-PF (2016)

		JRST-LANE FAMI							3-128		Page 3
		sses for Tax on Inves		Income				ED S'	TATEM	INT	
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How acquired P - Purchase D - Donation						acquired lay, yr.)	(d) Da (mo., d	te sold ay, yr.)			
1a											
b	_										
C											
_d											
_e					<u> </u>						
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale				. ,	ain or (loss) s (f) minus (
a .											
b											
C											
_d											
e 109,000.				102,77	7.					6	$, 2\overline{2}3.$
Complete only for assets showing	g gain in	column (h) and owned by the fo	oundation	on 12/31/69					Col. (h) gain		
(i) F.M.V. as of 12/31/69	! ,	(j) Adjusted basis as of 12/31/69	(k) Ex over	cess of col. (ı) col. (յ), ıf any			col.		not less thar (from col. (
a											
b											
С											
d											
e										6	,223.
		∫ If gain, also enter in F	Part I line		ک			_	<u> </u>		
2 Capital gain net income or (net ca		If (loss), enter -0- in F	Part I, line		}	2				6	,223.
3 Net short-term capital gain or (los	,	, , , , ,):		ا ر						
If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8		C).			- } }				N/A		
Part V Qualification U	nder S	ection 4940(e) for Re	duced	Tax on Net	Inve	stme	ent Inco	me	14/24		
(For optional use by domestic private		<u> </u>									
(For optional use by domestic private	Touridation	ons subject to the section 4540	(a) lax UII	net masament m	COILLE	.)					
If section 4940(d)(2) applies, leave the	ns part bl	ank.									
Was the foundation liable for the sect	hon 4042	tay on the distributable amount	of any vo	or in the base per	od?					┌── Voo	X No
If "Yes," the foundation does not qual				•	iou,					165	[ZZ] NU
1 Enter the appropriate amount in 6					itries	_					
	T		7	oro making any or				 		(d) oution ratio	
(a) Base period years Calendar year (or tax year beginnii	na in)]	(b) Adjusted qualifying distribu	tions	Net value of no	(c) nchai		use assets	İ	Distrib (col. (b) div	utión ratio	(c))
2015	ig iii)		487.				9,856		(coi. (b) div		59292
2014			450.				7,753				84233
2013		20,	206.				$\frac{7,733}{8,713}$				73639
			500.				8,393				59983
2012			659.				5,39 <u>3</u> 5,804				03349
2011			033.			130	0,004	•			03349
										2	00106
2 Total of line 1, column (d)								2_			80496
3 Average distribution ratio for the			ie 2 by 5,	or by the number	of yea	ars				•	
the foundation has been in exister	nce if less	than 5 years						3_		.0	56099
4 Enter the net value of noncharitab	le-use ass	sets for 2016 from Part X, line 5	j					4		543	,853.
5 Multiply line 4 by line 3				5		30	<u>,510.</u>				
6 Enter 1% of net investment income (1% of Part I, line 27b)					6			174.			
		·									
7 Add lines 5 and 6								7_		30	,684.
8 Enter qualifying distributions from	n Part XII,	line 4						8		49	,645.
If line 8 is equal to or greater than	ı lıne 7, ct	neck the box in Part VI, line 1b,	and comp	lete that part using	g a 19	% tax ra	ate				
See the Part VI instructions.		<u> </u>									 _
623521 11-23-16									F	orm 990-	PF (2016)

Form 990-PF (2016) THE ASHURST-LANE FAMILY FOUNDATION Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	63-12 1948 - sec		Page ions)	<u>e 4</u>
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	T			
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				£
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%			174	<u> </u>
of Part I, line 27b			,	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			*	!
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			<u>) . </u>
3 Add lines 1 and 2	3		174	_
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			<u>) .</u>
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		174	<u>: •</u>
6 Credits/Payments:	1 1			
a 2016 estimated tax payments and 2015 overpayment credited to 2016	-		11.3	
b Exempt foreign organizations - tax withheld at source	-		*	1
c Tax paid with application for extension of time to file (Form 8868)	4	, ,	6.3	,
d Backup withholding erroneously withheld	-		(j., è (.) ,	
7 Total credits and payments. Add lines 6a through 6d	7		0	<u>.</u>
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8		174	—
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	. 9		174	<u>: •</u>
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶ Part VII-A Statements Regarding Activities	11			—
		T 131	res N	Īo
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervel	ie in	 	-	K
any political campaign?	·\ 0	1 <u>a</u>		<u>x</u>
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition		1b	1	<u>-</u>
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis	ihed or		1.	, ,
distributed by the foundation in connection with the activities			uik.	. i
c Did the foundation file Form 1120-POL for this year?		1c	*	` ,
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	<u>.</u>		1.18	, m
managers. > \$				
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	K
If "Yes," attach a detailed description of the activities		\ <u>-</u>	<u> </u>	-
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	01	3	2	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		<u>K</u>
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A			_
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	2	X
If "Yes," attach the statement required by General Instruction T				
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			l l	
By language in the governing instrument, or				
 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state. 	te law			,
remain in the governing instrument?		6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part >	v	7	х	_
to the second se	•			\neg
8a Enter the states to which the foundation reports or with which it is registered (see instructions)			Ì	
AL				
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		-		r c
of each state as required by General Instruction G? If "No," attach explanation		8b	x "	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca	lendar		$\neg \vdash$	-
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes, " complete Part XIV		9	1 2	X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		<u>x</u> _
		Form 990 -	PF (20	16)

Form	1990-PF (2016) THE ASHURSI-LANE FAMILI FOUNDATION 63-1280	<u> 10 / U</u>		Page 5
P	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11_		<u> X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A LANE			
14	The books are in care of ► JAMIE LEE ASHURST Telephone no. ► (334)		<u>-17:</u>	<u> 38</u>
	Located at ► 5648 WOODSIDE CIRCLE, MONTGOMERY, AL ZIP+4 ►30	<u> 5117</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		>	Ш
	and enter the amount of tax-exempt interest received or accrued during the year	<u>N</u>	/A_	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		<u> </u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	1 3		3
_	foreign country	3	٠,	
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	<u>No</u>
18	During the year did the foundation (either directly or indirectly):	*	* %	* !
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		i i	Ý.
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		ي ر	` <i>X</i> *
	a disqualified person?	3		, ,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		1	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	\ <u></u>		Ti.;
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?		1 Å t	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			1
	if the foundation agreed to make a grant to or to employ the official for a period after		*	% - 1
	termination of government service, if terminating within 90 days.)			54.
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		Air	*
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		A
	Organizations relying on a current notice regarding disaster assistance check here		, i	1, 11
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	â.]
	before the first day of the tax year beginning in 2016?	1c		<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	2 %	· · ·	
	defined in section 4942(j)(3) or 4942(j)(5)):	3	. 3.4	
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		< *	2
	before 2016? Yes X No		7	
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			1 1
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	£		
	statement - see instructions.) N/A	2b	-	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1 1		Ì
3a	· · · · · · · · · · · · · · · · · · ·	!		,
	during the year? Yes X No			-
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after			i .
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	.		1
	Form 4720, to determine if the foundation had excess business holdings in 2016) N/A	3b		v
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
D	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			v . '
_	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	1 4b rm 99 0	DE	X (0040)
	F6	III) 33C	,-PF (ZU 16)

Form 990-PF (2016) THE ASHURST-LANE FAMILY Part VII-B Statements Regarding Activities for Which F		oguirod .	63-12808	70 Page 6
	Offit 4720 Way be No	equirea (contin	ued)	
5a During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section (22) Influence the outcome of any specific public election (see section 4055); a	, ,,		es X No	
(2) Influence the outcome of any specific public election (see section 4955); o any voter registration drive?(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es X No	,
(4) Provide a grant to an organization other than a charitable, etc., organization		···	10	
4945(d)(4)(A)? (see instructions)		Y	es 🗓 No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo	or		
the prevention of cruelty to children or animals?		Y	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i	n Regulations		
section 53 4945 or in a current notice regarding disaster assistance (see instru	,		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				777
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant?			es 🔲 No	
If "Yes," attach the statement required by Regulations section 53 4945	, ,		1	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<u> </u>	es X No	, , . ,
a personal benefit contract?	Otensteen tribunal bonnatur	Y	1	6b X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		 	6b X
If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?		es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu		·		7b
Part VIII \ Information About Officers, Directors, Truster Paid Employees, and Contractors		agers, Highly		: !
1 List all officers, directors, trustees, foundation managers and their	compensation.			
LANE (a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JAMIE LEE ASHURST	PRESIDENT/TRU			
5648 WOODSIDE CIRCLE	}			
MONTGOMERY, AL 36117	0.00	0.	0.	0.
WINSTON MCCAIN ASHURST	SECRETARY-TRE	ASURER/TRI	PSTE	
5648 WOODSIDE CIRCLE				
MONTGOMERY, AL 36117	0.00	0.	0.	0.
			l i	
			[
			(
		i	1	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none, e	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
			 	
Total number of other employees paid over \$50,000			<u> </u>	0

Form **990-PF** (2016)

Form 990-PF (2016) THE ASHURST-LANE FAMILY FOUNDATION	63-1	1280870 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation N Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NON	E."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		}
		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		▶ 0
	 -	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informumber of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	rmation such as the	Expenses
1 N/A	"	
1		
2		
3		
		
4		
Dort IV D I		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a	.no 2.	Amount
1 N/A		
2		
<u> </u>		
		
All other program-related investments See instructions.		
3		
Total. Add lines 1 through 3	>	0.
		Form 990-PF (2016)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 550,303. a Average monthly fair market value of securities 1a b Average of monthly cash balances 1,832. 1b c Fair market value of all other assets 1c 552,135. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d 135. 3 , 282.Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 543,853. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 27,193. Minimum investment return. Enter 5% of line 5 6 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here

and do not complete this part.) 193. Minimum investment return from Part X, line 6 174. 2a Tax on investment income for 2016 from Part VI, line 5 b Income tax for 2016. (This does not include the tax from Part VI.) 2b 174 c Add lines 2a and 2b 2c 019. Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 019. 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 27,019 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII, Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 1 49,645. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: **W** a Suitability test (prior IRS approval required) 3a **b** Cash distribution test (attach the required schedule) <u>3</u>b 49,645. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 5 Adjusted qualifying distributions. Subtract line 5 from line 4 6

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

Form 990-PF (2016)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,	11 14	11	15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	27.010
line 7	1 11	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	J	27,019.
2 Undistributed income if any as of the end of 2016	r "1"			
a Enter amount for 2015 only		(4 <u>1</u> 41	<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b Total for prior years	*® ,	_	·	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	, "	0.	, ‡	相等 British
3 Excess distributions carryover, if any, to 2016				
a From 2011	i igr		_ # K	1
b From 2012 2,243.			- , "	اب الله الله الله الله الله الله الله ال
c From 2013 7,953.	~ <u>~</u> £	# 31745 }-	<u>-</u>	i=
d From 2014 11,804.	·		#" , ;	\frac{1}{2}
e From 2015 4, 262.	26 262			4
f Total of lines 3a through e	26,262.	7.	_ #	
4 Qualifying distributions for 2016 from		FF2.		# '
Part XII, line 4 ► \$ 49,645.	8	,		17 17 C d
a Applied to 2015, but not more than line 2a		1 1	0.	1 at 1
b Applied to undistributed income of prior	1, 2		- J.	12 m
years (Election required see instructions)	, d	0.	,	, ₆₂
c Treated as distributions out of corpus		रू में इस्त्री	ŢŦ.	- 1
(Election required - see instructions)	0.			<u></u>
d Applied to 2016 distributable amount		in Att	- 1e	27,019.
e Remaining amount distributed out of corpus	22,626.	" 樓好 .		<u>*</u> • 1
5 Excess distributions carryover applied to 2016	0.	- <u>L. 186</u> 5		0.
(If an amount appears in column (d) the same amount must be shown in column (a))	1	# # # # # # # # # # # # # # # # # # #		T. E. T.
6 Enter the net total of each column as	, 5		. r	[重]
indicated below	_ <u>- "arī</u>	, , ,	, j.	4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -
a Corpus Add lines 3f 4c and 4e Subtract line 5	48,888.	= 1 + 3 + 2 · · ·	., - p=	A.a-
b Prior years' undistributed income. Subtract	# . F .		(<u>†</u>	<u>*</u> -
line 4b from line 2b	1,4	0.	C	
c Enter the amount of prior years	,			[]
undistributed income for which a notice of	4		,	
deficiency has been issued, or on which the section 4942(a) lax has been previously	ة 17-14 نر في		1 - 3 ·	
assessed		_ 0.	<u> </u>	<u></u>
d Subtract line 6c from line 6b. Taxable	2		. P	
amount - see instructions		0.	(🖟 🔭	#2
e Undistributed income for 2015. Subtract line		1		- T
4a from line 2a Taxable amount see instr	1 m		0.	
f Undistributed income for 2016. Subtract	* !		, " " 	
lines 4d and 5 from line 1. This amount must	,	7-14		
be distributed in 2017	* E	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ا آهيء ريو	0.
7 Amounts treated as distributions out of		· 12		₹'= , ₹
corpus to satisfy requirements imposed by		1 1 7 7	8 T	1
section 170(b)(1)(F) or 4942(g)(3) (Election		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,,	
may be required see instructions)	0.	de Tale	, , <u>, , , , , , , , , , , , , , , , , </u>	
8 Excess distributions carryover from 2011			10 t 4	
not applied on line 5 or line 7	0.	1.54	~T 11 12	<u> </u>
9 Excess distributions carryover to 2017				· 10-
Subtract lines 7 and 8 from line 6a	48,888.	- 1 - E	* - 15 * - 15 * - 15	, g
10 Analysis of line 9	, i.	Tell m) E	
a Excess from 2012 2,243.	4	The Party of	<i>‡</i> :	
b Excess from 2013 7,953.	41-6 - 2 9		l	[]
c Excess from 2014 11,804.	**	Fr. The	4,7 1	
d Excess from 2015 4,262.	, 3 P		[a	\$ J
e Excess from 2016 22,626.	# 7. 1 2. 1	17 19 19 19 19 19 19 19 19 19 19 19 19 19	# = 4 % % s 1	# F 15-1
623581 11 23 16				Form 990-PF (2016)

Form 990-PF (2016) THE ASH	URST-LANE F	AMILY FOUND	ATION		80870 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling o		, , ,			
foundation, and the ruling is effective fo	-		▶ ـ		
b Check box to indicate whether the found		ng foundation described i		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 0045	Prior 3 years	(4) 0010	(2) 72421
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for		ļ	ļ.	,	d.
each year listed	ļ	 			<u></u>
b 85% of line 2a		 			
c Qualifying distributions from Part XII,		1		1	
line 4 for each year listed		}	ļ		
d Amounts included in line 2c not	į		ļ	,	
used directly for active conduct of	ļ	1	Į	1	
exempt activities	<u> </u>	 	<u> </u>	 	
e Qualifying distributions made directly			1	1	
for active conduct of exempt activities.	ł		,	,	
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:		<u> </u>	 	 	
(1) Total support other than gross investment income (interest, dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)]			 	
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from	1	•	}	}	
an exempt organization			<u></u>		
(4) Gross investment income	L				<u> </u>
Part XV Supplementary Info at any time during t			f the foundation	had \$5,000 or moi	re in assets
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation wh year (but only if they have contributed n			ibutions received by the	foundation before the clos	e of any tax
NONE					
b List any managers of the foundation wh other entity) of which the foundation has			or an equally large porti	on of the ownership of a pa	rtnership or
NONE					
2 Information Regarding Contribution Check here ► X if the foundation of	nly makes contributions	to preselected charitable	organizations and does i		
the foundation makes gifts, grants, etc.	` 				<u>d</u>
a The name, address, and telephone numl	oer or e-mail address of t	he person to whom applic	cations should be addres	ssed;	
b The form in which applications should b	e submitted and informa	tion and materials they sh	ould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields,	kınds of ınstitutions, or	other factors:	

Part XV | Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution show any relationship to Foundation Amount status of recipient any foundation manager Name and address (home or business) or substantial contributor a Paid during the year ALABAMA SHAKESPEARE FESTIVAL INC NONE PUBLIC CHARITY SUPPORT PROFESSIONAL THEATER PRODUCTIONS 1 FESTIVAL DRIVE MONTGOMERY, AL 36117 12,500. NONE PUBLIC CHARITY PROVIDE THERAPEUTIC M.A.N.E. 3699 WALLAHATCHIE ROAD HORSEBACK RIDING PIKE ROAD, AL 36064 DPPORTUNITIES TO PEOPLE WITH DISABILITIES 4,000. SAV-A-LIFE MONTGOMERY INC NONE PUBLIC CHARITY TO REACH THE 380 MENDEL PKWY E ABORTION-VULNERABLE MONTGOMERY, AL 36117 MEMBERS OF OUR COMMUNITY IN THE NAME OF CHRIST 2,000. THE UNIVERSITY OF ALABAMA NONE PUBLIC CHARITY ADVANCE THE PRESIDENT'S OFFICE, BOX 870100 INTELLECTUAL AND SOCIAL CONDITION OF TUSCALOOSA, AL 35487-0100 THE PEOPLE 5,000. BOYS AND GIRLS CLUB NONE PUBLIC CHARITY PROVIDE FACILITIES, 220 CRENSHAW ST PROGRAMS, AND MONTGOMERY, AL 36104 LEADERSHIP THAT MOTIVATE ALL YOUTH TO REACH THEIR FULL 25,000. 48,500. ➤ 3a Total b Approved for future payment NONE Total

Analysis of Income-Producing Activities Part XVI-A

Enter gross amounts unless otherwise indicated	Unrelat	ed business income		ided by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
-			1		
a	<u> </u>	 	 		
			 		
c			┢		
d			-		
f	<u> </u>		 		
g Fees and contracts from government agencies					
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash			T		
investments	}		14		
4 Dividends and interest from securities			14		
5 Net rental income or (loss) from real estate:		1 1 1	1	1 3/1 1 1 1 1	4 3 3
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property		}	1	1	
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	6,223.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a			<u> </u>	L	
b		 			
c		<u> </u>			
d					
e			<u> </u>		
12 Subtotal. Add columns (b), (d), and (e)	1 1: 11	0.	ا,ا	23,710.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	23,710.
(See worksheet in line 13 instructions to verify calculations.)				 	
Part XVI-B Relationship of Activities to					
Explain below how each activity for which income the foundation's exempt purposes (other than by	ne is reported i y providing fui	in column (e) of Part XVI-A nds for such purposes).	contrib	outed importantly to the accom	plishment of
				 	
					
			-		

Form 990					ILY FOUNDATI			280870	Pa	ige 13
		Exempt Organ		3.0.3.10.6			inps with Notici	aritable		
		ganization directly or indi	rectly engage in any		ng with any other organizat 27, relating to political orga		tion 501(c) of		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of:										
	Cash							1a(1)		X
		assets						1a(2)	<u> </u>	X
		sactions: of assets to a noncharita	able exempt organiza	tion				1b(1)	~ ~ • ••••	x
(2)	Purch	nases of assets from a no	ncharitable exempt o	organization				1b(2)	<u> </u>	X
(3)	Renta	al of facilities, equipment,	or other assets					1b(3)		X
(4)	Reım	bursement arrangements	i					1b(4)	1	X
(5)	Loans	s or loan guarantees						1b(5)		X
		rmance of services or me	•	-				1b(6)	<u> </u>	X
	-	f facilities, equipment, ma	- ·					<u>1c</u>	<u> </u>	X
					edule. Column (b) should a				sets,	
					ed less than fair market val	ue in any transaction	n or sharing arrangemer	it, show in		
(a) Line n		 the value of the goods, (b) Amount involved 			e exempt organization	(d) December	on of transfers, transactions,			
(a) Line III	+	(b) Amount mvolved	(c) Name o	N/A	e exempt organization	(u) Description	on of transfers, transactions, a	and snaring ar	angemer	ils
	+		 	M/A						
	十		 				- 			
	+	···								
	\top									
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	_									_
										
		<u> </u>	<u> </u>							
			<u> </u>							
ın s	ection	ndation directly or indirect 501(c) of the Code (othe complete the following sch	r than section 501(c)		e or more tax-exempt organ tion 527?	nizations described		Yes	X	☐ No
		(a) Name of or	ganization		(b) Type of organization	 	(c) Description of relati	onship		
		N/A				-				
					ļ					
						 				
	_					 				
	Under	negatives of persury I declare	that I have examined this	return including	accompanying schedules and s	etatements, and to the h	est of my knowledge			
Sign Here	and be		nplete Declaration of pre		taxpayer) is based on all inform 5 11 17		has any knowledge	May the IRS return with the shown below	e prepare (see inst	er
	L 2.91	Print/Type preparer's na		Preparer's s		Date	Check If PT	IN .		
			·		1		self- employed	-		
Paid		AMY ROBERT	'S	Unes	Kohute CPA	05/04/17	I	00081	126	
Prepa Use C		Firm's name ► WAR		TT, LL	C		Firm's EIN ► 45	40844	37	

Firm's address ► 2500 ACTON ROAD
BIRMINGHAM, AL 35243

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

Name of the organization

Employer identification number

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

T	HE_ASHURST-LANE FAMILY FOUNDATION	63-1280870					
Organization type (check of	one)						
Filers of:	Section:						
Form 990 or 990-EZ 501(c)() (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or							
	one contributor. Complete Parts I and II. See instructions for determining a contributor's	s total contributions					
Special Rules							
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support t and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, o or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amour , line 1 Complete Parts I and II	or 16b, and that received from					
year, total contribu	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.							
but it must answer "No" on	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	· · · · · · · · · · · · · · · · · · ·					

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

Name of organization

Employer identification number

THE	ASHURST-LANE	FAMILY	FOINDATION
TIID	TIME TOTAL	LUMITHI	LOONDALTON

THE A	SHURST-LANE FAMILY FOUNDATION		3-1280870
Part i	Contributors (See instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAMES LANE CHARITABLE LEAD UNITRUST 5648 WOODSIDE CIRCLE MONTGOMERY, AL 36117-2601	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- _ - -	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - - -	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- - \$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

THE ASHURST-LANE FAMILY FOUNDATION

63-1280870

Part II	Noncash Property (See instructions) Use duplicate copies of Pa		-12000/0
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
- - -		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		*	·
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
- -		 s	

Page 4 Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Name of organization Employer identification number THE ASHURST-LANE FAMILY FOUNDATION 63-1280870 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part ! (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

N/A

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold P - Purchase D - Donation 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo, day, yr.) 1a RUSSELL INVT CO 07/12/1610/11/16 P b RUSSELL INVT CO P 06/20/1607/12/16 c RUSSELL GLBL EQTY 04/02/1310/11/16 P 03/02/15/10/11/16 d RUSSELL SHORT DUR BD P e RUSSELL EMERGING MKTS P 04/02/1310/11/16 04/02/1310/11/16 f RUSSELL INVT CO P Q RUSSELL INVT CO P 04/02/1309/26/16 h RUSSELL INVT CO P 04/02/1306/20/16 04/02/1311/04/16 RUSSELL STRATEGIC BOND P 04/02/13/10/11/16 RUSSELL INTL DEVELPD P k RUSSELL US SMALL CAP P 01/03/1409/26/16 | RUSSELL INV GRADE BD 04/02/1311/04/16 Ρ m RUSSELL INVT CO P 04/02/1310/11/16 05/04/1507/12/16 n RUSSELL INVT CO P O CAPITAL GAINS DIVIDENDS (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 1,463. 1,449. 14. a 4,248. 4,219. <29.> b 146. 2,708. 2,562. C 17. 6,575. 6,558. d 2,273. <295.> 2,568. 3,359. <240.> 3,119. 402. 396. 675. 1,087. <412.> h 12,753. 12,885. <132.> 2,530. 2,369. 161. 726. 1,815. <89.> 27,402. 27,189. 213. 1,385. 22,264. 20,879. m 13,677.15,413. <1,736.> n 7,214. 7,214. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any 14. a <29.> b 146. C 17. đ <295.> <240.> 6. <412.> h <132.> 161. <89.> 213. 1,385. m <1,736.> 7,214. 0 $\{\begin{array}{c} \mbox{If gain, also enter in Part I, line 7} \\ \mbox{If (loss), enter "-0-" in Part I, line 7} \end{array}\}$ 2 Capital gain net income or (net capital loss) 6,223. 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c)

If (loss), enter "-0-" in Part I, line 8

		THE ASHU	RST-LANE	FAMILY	FOUND	ATION	63-12808	370
Part XV	Supplementary In	formation						
3a Grants a	nd Contributions Paid I	During the Year Co	ontinuation of P	urpose of Gra	ant or Con	tribution		
NAME_OF	RECIPIENT -	BOYS AND	GIRLS CL	UB				
PROVIDE	FACILITIES,	PROGRAMS,	AND LEA	DERSHIP	THAT	MOTIVATE	ALL YOUTH	то
REACH T	HEIR FULL PO	TENTIAL						
								
				·				
		<u> </u>						
								
			, <u>-</u>					
								
							- 	
						 		
			····					
								

FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SECUE	RITIES ST	PATEMENT 1
SOURCE	CAPITAI GROSS GAINS URCE AMOUNT DIVIDENI		REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
WELLS FARGO	24,701	7,21	4. 17,487.	17,487.	
TO PART I, LINE 4	24,701	7,21	17,487.	17,487.	
FORM 990-PF		ACCOUNTI	NG FEES	S	PATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX PREP FEES	_	2,075.	1,038.		1,037.
TO FORM 990-PF, PG	_ 1, LN 16B	2,075.	1,038.		1,037.
FORM 990-PF	0	THER PROFES	SIONAL FEES	S	ratement 3
		(A)	(B)	(C)	(D)
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D)
DESCRIPTION BROKER FEES	_	EXPENSES	NET INVEST-	ADJUSTED	(D) CHARITABLE PURPOSES
	- L, LN 16C	EXPENSES PER BOOKS	NET INVEST- MENT INCOME	ADJUSTED	(D) CHARITABLE
BROKER FEES	- L, LN 16C =	EXPENSES PER BOOKS 5,096.	NET INVEST- MENT INCOME 5,096.	ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BROKER FEES TO FORM 990-PF, PG	L, LN 16C	EXPENSES PER BOOKS 5,096.	NET INVEST- MENT INCOME 5,096.	ADJUSTED NET INCOME ST (C) ADJUSTED	(D) CHARITABLE PURPOSES 0. 0. TATEMENT 4
BROKER FEES TO FORM 990-PF, PG	L, LN 16C	EXPENSES PER BOOKS 5,096. 5,096. TAX (A) EXPENSES	NET INVEST- MENT INCOME 5,096. 5,096. ES (B) NET INVEST-	ADJUSTED NET INCOME ST (C) ADJUSTED	(D) CHARITABLE PURPOSES 0. 0. CHARITABLE (D) CHARITABLE

FORM 990-PF OTHER	INVESTMENTS		STATEMENT 5
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MUTUAL FUNDS	COST	610,364.	584,947.
TOTAL TO FORM 990-PF, PART II, LINE	13	610,364.	584,947.