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

2016

Open to Public Inspection

For calendar year 2016 or tax year beginning

, 2016, and ending

Name of foundation

WEHADKEE FOUNDATION, INC.

Number and street (or P.O. box number if mail is not delivered to street address)

P. O. BOX 387

City or town state or province, country, and ZIP or foreign postal code

LANETT

AL 36863

G Check all that apply

<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity
<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return
<input type="checkbox"/> Address change	<input type="checkbox"/> Name change

H Check type of organization

<input type="checkbox"/> Section 501(c)(3) exempt private foundation
<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust
<input checked="" type="checkbox"/> Other taxable private foundation

I Fair market value of all assets at end of year
(from Part II, column (c), line 16)

► \$ 1,364,402.

J Accounting method

 Cash Accrual Other (specify)

(Part I, column (d) must be on cash basis)

Part I Analysis of Revenue and

Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))

		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
REVENUE	1 Contributions gifts grants etc received (attach schedule)				
	2 Check ► <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	24,713.			
	5 a Gross rents				
	b Net rental income or (loss)				
	6 a Net gain or (loss) from sale of assets not on line 10	1,538.	L-6a Stmt		
	b Gross sales price for all assets on line 6a	539,224.			
	7 Capital gain net income (from Part IV line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10 a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	CAPITAL GAIN DISTRIBUTION	179.	0		
	12 Total Add lines 1 through 11.	26,430.	0.		
ADMINISTRATIVE AND EXPENSES	13 Compensation of officers directors trustees etc				
	14 Other employee compensation				
	15 Pension plans (employee benefits)				
	16 a Legal fees (attach schedule)				
	b Accounting fees (attach sch)	4,900.			
	c Other professional fees (attach sch)				
	17 Interest				
	18 Taxes (attach schedule) (see also CORPORATE TAXES PAID)	368.			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel conferences and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)				
	OFFICE EXPENSES	201.			
	24 Total operating and administrative expenses Add lines 13 through 23	5,469.			
	25 Contributions, gifts, grants paid	9,100.			
	26 Total expenses and disbursements Add lines 24 and 25	14,569.			
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	11,861.			
	b Net investment income (if negative, enter -0-)		0.		
	c Adjusted net income (if negative, enter -0-)				

920 16

Part II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
A S S E T S	1 Cash - non-interest-bearing		26,269	5,532.	5,532.
	2 Savings and temporary cash investments . . .				
	3 Accounts receivable				
	Less allowance for doubtful accounts ►				
	4 Pledges receivable				
	Less allowance for doubtful accounts ►				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7 Other notes and loans receivable (attach sch) ►				
	Less allowance for doubtful accounts ►				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments - U S and state government obligations (attach schedule)				
	b Investments - corporate stock (attach schedule)	1,290,286.	1,322,884.	1,358,870.	
	c Investments - corporate bonds (attach schedule)				
L I A B L I T I E S	11 Investments - land, buildings, and equipment basis				
	Less accumulated depreciation (attach schedule)				
	12 Investments - mortgage loans				
	13 Investments - other (attach schedule)				
	14 Land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule)				
	15 Other assets (describe ►)				
	16 Total assets (to be completed by all filers - see the instructions Also, see page 1, item I)	1,316,555.	1,328,416.	1,364,402.	
	17 Accounts payable and accrued expenses	175,000.	175,000.		
	18 Grants payable				
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, & other disqualified persons				
	21 Mortgages and other notes payable (attach schedule)				
	22 Other liabilities (describe ►)				
	23 Total liabilities (add lines 17 through 22)	175,000.	175,000.		
	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31 ► <input checked="" type="checkbox"/>				
N F E U T N D A S B S A E L T A S N C O E R S	24 Unrestricted	1,141,555.	1,153,416.		
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ► <input type="checkbox"/>				
	27 Capital stock, trust principal, or current funds				
	28 Paid-in or capital surplus, or land, bldg, and equipment fund				
	29 Retained earnings, accumulated income, endowment, or other funds				
	30 Total net assets or fund balances (see instructions)	1,141,555	1,153,416.		
	31 Total liabilities and net assets/fund balances (see instructions)	1,316,555.	1,328,416.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,141,555.
2 Enter amount from Part I, line 27a	2	11,861.
3 Other increases not included in line 2 (itemize)	3	
4 Add lines 1, 2, and 3	4	1,153,416.
5 Decreases not included in line 2 (itemize)	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,153,416.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo day, yr)	(d) Date sold (mo day, yr)
1 a				
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h)) gain minus col (k), but not less than -0- or Losses (from col (h))	
a				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2	
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) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part

1 Enter the appropriate amount in each column for each year, see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	0.	0.	0.000000
2014	0.	0.	0.000000
2013	0.	0.	0.000000
2012	88,384.	2,350,856.	0.037437
2011	30,500.	1,891,205.	0.016127

2 Total of line 1, column (d) 2 0.053564

3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 0.010713

4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 4 0.

5 Multiply line 4 by line 3 5 0.

6 Enter 1% of net investment income (1% of Part I, line 27b) 6 0.

7 Add lines 5 and 6 7 0.

8 Enter qualifying distributions from Part XII, line 4 8 0.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions

Part VI | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)

1 a Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter 'N/A' on line 1	
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 ► <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1 0.
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 0.
3 Add lines 1 and 2	3 0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4 0.
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5 0.
6 Credits/Payments	
a 2016 estimated tax pmts and 2015 overpayment credited to 2016	6 a
b Exempt foreign organizations – tax withheld at source	6 b
c Tax paid with application for extension of time to file (Form 8868)	6 c 0.
d Backup withholding erroneously withheld	6 d
7 Total credits and payments Add lines 6a through 6d	7 0.
8 Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9 0.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10 0.
11 Enter the amount of line 10 to be Credited to 2017 estimated tax	Refunded ► 11

Part VII-A | Statements Regarding Activities

1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	Yes	No
1 a	X	
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	Yes	No
1 b	X	
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		
c Did the foundation file Form 1120-POL for this year?	Yes	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		
(1) On the foundation ► \$ _____ (2) On foundation managers ► \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities	Yes	No
2	X	
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 conforming copy of the changes	Yes	No
3	X	
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	Yes	No
4 a	X	
b If 'Yes' has it filed a tax return on Form 990-T for this year?	Yes	No
4 b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If 'Yes' attach the statement required by General Instruction T	Yes	No
5	X	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		
• 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 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 XV	Yes	No
7	X	
8 a Enter the states to which the foundation reports or with which it is registered (see instructions)		
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designee) of each state as required by General Instruction G? If 'No,' attach explanation	Yes	No
8 b	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 calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	Yes	No
9	X	
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	Yes	No
10	X	

Part VII-A Statements Regarding Activities (continued)

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	Yes	No
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address	13	X	
14	The books are in care of ► <u>JIM FLOYD</u> Telephone no ► <u>(334) 642-3964</u> Located at ► <u>1702 46TH AVE NW</u> <u>LANETT</u> <u>AL</u> ZIP + 4 ► <u>36863</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year	15		
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country	16	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies

1 a	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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(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)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(6)	Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If any answer is 'Yes' to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	1 b		
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 before the first day of the tax year beginning in 2016?	1 c	X	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? If 'Yes,' list the years ► 20 __ , 20 __ , 20 __ , 20 __	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
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 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)	2 b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20 __ , 20 __ , 20 __ , 20 __			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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 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, Form 4720, to determine if the foundation had excess business holdings in 2016)	3 b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	X	
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4 b	X	

Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5 a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is 'Yes' to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

Organizations relying on a current notice regarding disaster assistance check here

c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No

If 'Yes,' attach the statement required by Regulations section 53.4945–5(d)

6 a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

If 'Yes' to 6b, file Form 8870

7 a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No

Part VIII | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(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
GEORGE LANIER P.O. BOX 387 LANETT AL 36863	PRESIDENT 1.00	0	0.	0.
JOHN LANIER P.O. BOX 387 LANETT AL 36863	V PRES 1.00	0	0.	0.
JIM FLOYD P.O. BOX 387 LANETT AL 36863	SECRETARY 4.00	0	0.	0.
SUSIE LANIER MAXWELL P.O. BOX 387 LANETT AL 36863	V-PRES 1.00	0	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1 – see instructions). If none, 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

None

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

3 **Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

None

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

1	NA	
2		0.
3		
4		

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Amount

1	NA	
2		0.

All other program-related investments See instructions

3 NA _____
Total Add lines 1 through 3 _____ 0.
None

Total Add lines 1 through 3

Form 000 RE (2016)

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, see instructions)

- 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes
 - a Average monthly fair market value of securities
 - b Average of monthly cash balances
 - c Fair market value of all other assets (see instructions)
 - d Total (add lines 1a, b, and c)
 - e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)
- 2 Acquisition indebtedness applicable to line 1 assets
- 3 Subtract line 2 from line 1d
- 4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)
- 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4.
- 6 Minimum investment return. Enter 5% of line 5

1 a	
1 b	
1 c	
1 d	
1 e	
2	
3	0.
4	0.
5	0.
6	0.

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)

- 1 Minimum investment return from Part X, line 6
- 2 a Tax on investment income for 2016 from Part VI, line 5
- 2 b Income tax for 2016 (This does not include the tax from Part VI)
- 2 c Add lines 2a and 2b
- 3 Distributable amount before adjustments Subtract line 2c from line 1
- 4 Recoveries of amounts treated as qualifying distributions
- 5 Add lines 3 and 4
- 6 Deduction from distributable amount (see instructions)
- 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.

Part XII Qualifying Distributions (see instructions)

- 1 Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes
 - a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26.
 - b Program-related investments – total from Part IX-B.
- 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes
- 3 Amounts set aside for specific charitable projects that satisfy the
 - a Suitability test (prior IRS approval required)
 - b Cash distribution test (attach the required schedule)
- 4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part X, I, line 4
- 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)
- 6 Adjusted qualifying distributions. Subtract line 5 from line 4

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 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, line 7				0.
2 Undistributed income, if any, as of the end of 2016				0.
a Enter amount for 2015 only				0.
b Total for prior years 20 20 20				
3 Excess distributions carryover, if any, to 2016				
a From 2011 30,500.				
b From 2012 89,100.				
c From 2013 0.				
d From 2014 0.				
e From 2015 0.				
f Total of lines 3a through e 119,600.				
4 Qualifying distributions for 2016 from Part XII, line 4 ► \$ 0.				
a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2016 distributable amount				
e Remaining amount distributed out of corpus 0.				
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 119,600.				
b Prior years' undistributed income Subtract line 4b from line 2b 0				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount — see instructions 0.				
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount — see instructions 0.				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 0.				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)				
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) 30,500.				
9 Excess distributions carryover to 2017 Subtract lines 7 and 8 from line 6a 89,100.				
10 Analysis of line 9				
a Excess from 2012 89,100.				
b Excess from 2013 0.				
c Excess from 2014 0.				
d Excess from 2015 0.				
e Excess from 2016 0.				

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
CHATTAHOOCHEE HOSPICE VALLEY VALLEY	AL 36854	NONE NONE	NA GENERAL CHARITABLE PURPOSES	2,600.
ALABAMA GEORGIA HOSPITAL AUXILARY VALLEY	AL 36854		NA GENERAL CHARITABLE PURPOSES	500.
CITY OF LANETT POLICE DEPT LANETT LANETT	AL 36863	NONE	NA GENERAL CHARITABLE PURPOSES	5,000.
See Line 3a statement				1,000.
Total				► 3a 9,100.
<i>b Approved for future payment</i>				
Total				► 3b

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities	14	24,713.			
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					1,538.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		24,713.			1,538.
13 Total. Add line 12, columns (b), (d), and (e)					26,251.

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
8	TO PROVIDE FUNDING TO TAX EXEMPT ORGANIZATIONS TO FURTHER THEIR CHARITABLE WORK IN THE AREA.

Name	Employer Identification Number
WEHADKEE FOUNDATION, INC.	63-6049784

Asset Information:

Description of Property	37 SHARES I SHARES		
Date Acquired	08/28/15	How Acquired	Purchased
Date Sold	07/14/16	Name of Buyer	
Sales Price	5,168	Cost or other basis (do not reduce by depreciation)	4,546.
Sales Expense		Valuation Method	
Total Gain (Loss)	622.	Accumulation Depreciation	
Description of Property	588 SHARES I SHARES		
Date Acquired	08/28/15	How Acquired	Purchased
Date Sold	08/04/16	Name of Buyer	
Sales Price	22,527.	Cost or other basis (do not reduce by depreciation)	24,583.
Sales Expense		Valuation Method	
Total Gain (Loss)	-2,056.	Accumulation Depreciation	
Description of Property	310 SHARES I SHARES		
Date Acquired	03/31/15	How Acquired	Purchased
Date Sold	01/22/15	Name of Buyer	
Sales Price	38,374.	Cost or other basis (do not reduce by depreciation)	47,017.
Sales Expense		Valuation Method	
Total Gain (Loss)	-8,643.	Accumulation Depreciation	
Description of Property	107 SHARES I SHARES		
Date Acquired	03/31/16	How Acquired	Purchased
Date Sold	09/06/16	Name of Buyer	
Sales Price	1,995.	Cost or other basis (do not reduce by depreciation)	1,569.
Sales Expense		Valuation Method	
Total Gain (Loss)	426.	Accumulation Depreciation	
Description of Property	2515 SHARES I SHARES		
Date Acquired	03/31/16	How Acquired	Purchased
Date Sold	09/16/16	Name of Buyer	
Sales Price	44,825.	Cost or other basis (do not reduce by depreciation)	36,887.
Sales Expense		Valuation Method	
Total Gain (Loss)	7,938.	Accumulation Depreciation	
Description of Property	552 SHARES I SHARES		
Date Acquired	01/01/16	How Acquired	Purchased
Date Sold	02/16/16	Name of Buyer	
Sales Price	37,587.	Cost or other basis (do not reduce by depreciation)	43,646.
Sales Expense		Valuation Method	
Total Gain (Loss)	-6,059.	Accumulation Depreciation	
Description of Property	2098 SHARES MARKET VECTORS		
Date Acquired	02/11/16	How Acquired	Purchased
Date Sold	03/16/16	Name of Buyer	
Sales Price	40,013.	Cost or other basis (do not reduce by depreciation)	33,080.
Sales Expense		Valuation Method	
Total Gain (Loss)	6,933.	Accumulation Depreciation	
Description of Property	See Net Gain or Loss from Sale of Assets		
Date Acquired		How Acquired	
Date Sold		Name of Buyer	
Sales Price		Cost or other basis (do not reduce by depreciation)	
Sales Expense		Valuation Method	
Total Gain (Loss)		Accumulation Depreciation	

Form 990-PF, Part I, Lines 6a

Net Gain or Loss from Sale of Assets

Asset Information:

Description of Property	57 SHARES VANGUARD		
Business Code	Exclusion Code		
Date Acquired	07/14/16	How Acquired	Purchased
Date Sold	09/06/16	Name of Buyer	
Check Box, if Buyer is a Business	<input type="checkbox"/>		
Sales Price	2,198	Cost or other basis (do not reduce by depreciation)	2,095
Sales Expense		Valuation Method	
Total Gain (Loss)	103	Accumulated Depreciation	
Description of Property	783 SHARES VANGUARD		
Business Code	Exclusion Code		
Date Acquired	01/01/16	How Acquired	Purchased
Date Sold	02/16/16	Name of Buyer	
Check Box, if Buyer is a Business	<input type="checkbox"/>		
Sales Price	57,356	Cost or other basis (do not reduce by depreciation)	62,049
Sales Expense		Valuation Method	
Total Gain (Loss)	-4,693	Accumulated Depreciation	
Description of Property	363 SHARES WISDOMTREE		
Business Code	Exclusion Code		
Date Acquired	10/24/16	How Acquired	Purchased
Date Sold	12/07/16	Name of Buyer	
Check Box, if Buyer is a Business	<input type="checkbox"/>		
Sales Price	17,996	Cost or other basis (do not reduce by depreciation)	16,236
Sales Expense		Valuation Method	
Total Gain (Loss)	1,760	Accumulated Depreciation	
Description of Property	23 SHARES ISHARES		
Business Code	Exclusion Code		
Date Acquired	05/26/15	How Acquired	Purchased
Date Sold	09/06/16	Name of Buyer	
Check Box, if Buyer is a Business	<input type="checkbox"/>		
Sales Price	1,954	Cost or other basis (do not reduce by depreciation)	1,950
Sales Expense		Valuation Method	
Total Gain (Loss)	4	Accumulated Depreciation	
Description of Property	369 SHARES ISSHARES		
Business Code	Exclusion Code		
Date Acquired	06/29/15	How Acquired	Purchased
Date Sold	07/14/16	Name of Buyer	
Check Box, if Buyer is a Business	<input type="checkbox"/>		
Sales Price	51,542	Cost or other basis (do not reduce by depreciation)	43,717
Sales Expense		Valuation Method	
Total Gain (Loss)	7,825	Accumulated Depreciation	
Description of Property	10 SHARES ISHARES		
Business Code	Exclusion Code		
Date Acquired	08/28/15	How Acquired	Purchased
Date Sold	09/06/16	Name of Buyer	
Check Box, if Buyer is a Business	<input type="checkbox"/>		
Sales Price	1,387	Cost or other basis (do not reduce by depreciation)	1,229
Sales Expense		Valuation Method	
Total Gain (Loss)	158	Accumulated Depreciation	

Form 990-PF, Part I, Lines 6a
Net Gain or Loss from Sale of Assets

Continued

Asset Information:

Description of Property 697 SHARES ISHARES
Business Code Exclusion Code
Date Acquired 03/31/15 How Acquired Purchased
Date Sold 08/04/16 Name of Buyer
Check Box, if Buyer is a Business
Sales Price 26,703 Cost or other basis (do not reduce by depreciation) 30,861
Sales Expense Valuation Method
Total Gain (Loss) -4,158. Accumulated Depreciation . . .

Description of Property 38 SHARES ISHARES
Business Code Exclusion Code . . .
Date Acquired 08/28/15 How Acquired Purchased
Date Sold 09/06/16 Name of Buyer
Check Box, if Buyer is a Business
Sales Price 1,926 Cost or other basis (do not reduce by depreciation) 1,921
Sales Expense Valuation Method . . .
Total Gain (Loss) . . . 5. Accumulated Depreciation . . .

Description of Property 46 SHARES ISHARES
Business Code Exclusion Code
Date Acquired 03/31/15 How Acquired Purchased
Date Sold 09/06/16 Name of Buyer
Check Box, if Buyer is a Business
Sales Price 5,679 Cost or other basis (do not reduce by depreciation) 5,588
Sales Expense Valuation Method . . .
Total Gain (Loss) 91. Accumulated Depreciation . . .

Description of Property . . . 22 SHARES ISHARES
Business Code Exclusion Code . . .
Date Acquired 03/31/15 How Acquired Purchased
Date Sold 09/06/16 Name of Buyer
Check Box, if Buyer is a Business
Sales Price 584 Cost or other basis (do not reduce by depreciation) 658
Sales Expense Valuation Method . . .
Total Gain (Loss) . . . -74. Accumulated Depreciation . . .

Description of Property 88 SHARES ISHARES
Business Code Exclusion Code . . .
Date Acquired 03/31/15 How Acquired Purchased
Date Sold 09/06/16 Name of Buyer
Check Box, if Buyer is a Business
Sales Price 9,224 Cost or other basis (do not reduce by depreciation) 8,737
Sales Expense Valuation Method . . .
Total Gain (Loss) . . . 487. Accumulated Depreciation . . .

Description of Property . . . 341 SHARES ISHARES
Business Code Exclusion Code
Date Acquired 03/31/15 How Acquired Purchased
Date Sold 09/06/16 Name of Buyer
Check Box, if Buyer is a Business
Sales Price 33,578 Cost or other basis (do not reduce by depreciation) 33,509
Sales Expense Valuation Method . . .
Total Gain (Loss) . . . 69. Accumulated Depreciation . . .

Form 990-PF, Part I, Lines 6a

Continued

Net Gain or Loss from Sale of Assets**Asset Information:**

Description of Property . . . 10 SHARES ISHARES
 Business Code . . . Exclusion Code.
 Date Acquired 03/31/15 How Acquired Purchased
 Date Sold 09/06/16 Name of Buyer
 Check Box, if Buyer is a Business
 Sales Price 774. Cost or other basis (do not reduce by depreciation) 753.
 Sales Expense . . . Valuation Method
 Total Gain (Loss) . . . 21. Accumulated Depreciation . . .

Description of Property . . . 97 SHARES ISSHARES
 Business Code . . . Exclusion Code . . .
 Date Acquired 03/31/15 How Acquired Purchased
 Date Sold 09/06/16 Name of Buyer
 Check Box, if Buyer is a Business
 Sales Price 10,381. Cost or other basis (do not reduce by depreciation) . . . 10,026.
 Sales Expense . . . Valuation Method
 Total Gain (Loss) . . . 355. Accumulated Depreciation . . .

Description of Property . . . 468 SHARES VANGUARD
 Business Code . . . Exclusion Code . . .
 Date Acquired 03/31/15 How Acquired Purchased
 Date Sold 09/06/16 Name of Buyer
 Check Box, if Buyer is a Business . . .
 Sales Price 39,350. Cost or other basis (do not reduce by depreciation) . . . 38,993.
 Sales Expense . . . Valuation Method
 Total Gain (Loss) . . . 357. Accumulated Depreciation . . .

Description of Property . . . 156 SHARES VANGUARD
 Business Code . . . Exclusion Code. . .
 Date Acquired . . . 03/31/15 How Acquired . . Purchased
 Date Sold . . . 09/06/16 Name of Buyer
 Check Box, if Buyer is a Business . . .
 Sales Price . . . 13,686. Cost or other basis (do not reduce by depreciation) . . . 13,078.
 Sales Expense . . . Valuation Method . . .
 Total Gain (Loss) . . . 608. Accumulated Depreciation . . .

Description of Property . . . 505 SHARES VANGUARD
 Business Code . . . Exclusion Code. . .
 Date Acquired . . . 03/31/15 How Acquired . . Purchased
 Date Sold . . . 11/18/16 Name of Buyer
 Check Box, if Buyer is a Business . . .
 Sales Price . . . 43,477. Cost or other basis (do not reduce by depreciation) . . . 42,336.
 Sales Expense . . . Valuation Method . . .
 Total Gain (Loss) . . . 1,141. Accumulated Depreciation . . .

Description of Property . . . 134 SHARES VANGUARD
 Business Code . . . Exclusion Code . . .
 Date Acquired . . . 03/31/15 How Acquired . . Purchased
 Date Sold . . . 09/06/16 Name of Buyer
 Check Box, if Buyer is a Business . . .
 Sales Price . . . 11,488. Cost or other basis (do not reduce by depreciation) . . . 10,843.
 Sales Expense . . . Valuation Method . . .
 Total Gain (Loss) . . . 645. Accumulated Depreciation . . .

Form 990-PF, Part I, Lines 6a

Continued

Net Gain or Loss from Sale of Assets**Asset Information:**

Description of Property . . . 22 SHARES WISDOMTREE
Business Code Exclusion Code
Date Acquired . . . 03/31/15 How Acquired . . Purchased
Date Sold 09/06/16 Name of Buyer
Check Box, if Buyer is a Business . . .
Sales Price 960 Cost or other basis (do not reduce by depreciation) 1,213.
Sales Expense Valuation Method
Total Gain (Loss) -253. Accumulated Depreciation

Description of Property . . . 373 SHRES WISDOMTREE
Business Code Exclusion Code
Date Acquired . . . 03/31/15 How Acquired . . Purchased
Date Sold 12/07/16 Name of Buyer
Check Box, if Buyer is a Business . . .
Sales Price 18,492 Cost or other basis (do not reduce by depreciation) 20,566.
Sales Expense Valuation Method
Total Gain (Loss) -2,074. Accumulated Depreciation

Form 990-PF, Page 11, Part XV, Line 3a

Line 3a statement

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox
Name and address (home or business)				Amount
a Paid during the year				Person or Business <input type="checkbox"/>
-----	-----	-----	-----	Person or Business <input type="checkbox"/>
-----	-----	-----	-----	Person or Business <input type="checkbox"/>
-----	-----	-----	-----	Person or Business <input checked="" type="checkbox"/>
CHAMBERS COUNTY SHERIFFS DEPT LAFAYETTE AL 36862		NA	CHARITABLE PURPOSES	1,000.

Total

1,000.

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
1774 SHARES CLAYMORE	38,351.	37,236.
784 SHARES ISHARES	95,246.	91,869.
409 SHRES ISHARES	49,950.	48,724.
1005 SHARES ISHRES	110,965.	105,344.
406 SHARES ISHARES	34,420.	34,287.
659 SHARES ISHARES	33,315.	33,431.
608 SHAREZS VANGUARD	50,366.	49,120.
370 SHARES ISHARES	11,006.	9,798.
173 SHARES ISHARES	13,033.	13,914.
620 SHARES ISHARES	59,347.	60,382.
92 SHARES ISHARES	24,734.	24,415.
1680 SHARES ISHARES	172,008.	188,210.
1515 SHARES ISHARES	140,007.	158,924.
1720 SHARES VANECK	36,546.	35,982.
1426 SHARES VANGUARD	111,432.	121,467.
889 SHARES VANGUARD	75,393.	77,441.
1402 SHARES VANGUARD	50,453.	50,164.
961 SHARES VANGUARD	45,879.	46,070.
475 SHARES VANGUARD	37,543.	39,202.
CASH	132,890.	132,890.

Total

1,322,884. 1,358,870.