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,		

Forr	" <b>9</b>	90-PF	' ′		Return of Priva				, <del>-</del> 1 ,	CMB No 1545-0052
Depa	artmen	t of the Treasury		N N				and a constitution	1/012	,   ZU ID
		venue Ser ce Idar year 2016 (	or tay yea	► Information about For	m 990-PF and its separa	te instructions	is at <i>www.ir</i> s ending	s.gov/torm95	iupt. ιΨ į N	Open to Public Inspection
_		feundation	or tax yea	ı beğinininğ		, 4114	anding.	A Employer	identification	n number
			н. т	RAMSAY TRUST	I			A Limpioyer	idelitilicatioi	
				ONAL BANK, T				64-6	028902	?
				if mail is not delivered to street			Room/suite	B Telephone		<u>'</u>
2	48	EAST C	APIT	OL STREET			580	, .	208-59	56
_				untry, and ZIP or foreign p	ostal code		.1	1		pending, check here
		KSON, M		9201				,		•
G (	Check	all that apply		Initial return	Initial return of a	former public	charity	D 1. Foreigr	organizations	s, check here
				Fınal return	Amended return					
				Address change	Name change			check he	organizations me ere and attach co	eeting the 85% test, omputation
		type of organiz			empt private foundation		$\mathcal{D}$	E If private f	oundation sta	atus was terminated
				· · · · · · · · · · · · · · · · · · ·	Other taxable private four		00	under sec	tion 507(b)(1	)(A), check here
		irket value of all		·   —	•	Acc	rual	F If the four	idation is in a	60-month termination
		Part II, coi (c),			her (specify)			under sec	tion 507(b)(1)	)(B), check here
	<u> </u>	Analysis of D		7 , 260 . (Part I, colu	mn (d) must be on casi	h basis.)				T (1)
P	art I	<sup>→</sup> (The total of amo	ounts in colu	ımns (b), (c), and (d) may not	(a) Revenue and expenses per books		nvestment come		isted net ome	(d) Disbursements for charitable purposes
	1			nts in column (a) )	expenses per books	- "				(cash basis only)
	1 2			its, etc., received on is not required to attach Sch. B			,=	N/	Α	
	2	Interest on saving	s and temp				,			<del> </del>
	4	cash investments Dividends and		nm securities	3,140		3,140.			STATEMENT 1
	1	Gross rents	microst in	om accuring	3,140	•	J / 1 3 U .			DITTI DITTI I
		Net rental income	or (loss)							1
	l 6a		-	assets not on line 10	<654	.>			-	1
une	Ь	Gross sales price assets on line 6a	for all	92,510.	1333					
Revenue	7	Capital gain net in		-			0.		RFC	FIVED
ď	8	Net short-term	capital ga	1						
	9	Income modific			<u> </u>			0		SS
	10a	Gross sales less i and allowances	returns	STATUTE UNIT				52	JAN (	6 2020 G
	1	Less Cost of goo		RECEIVED		<u> </u>				
	1	Gross profit or	(loss)	= 2020				ļ <b>ļ</b>	OGD	EN. UT
	11	Other income		JAN 15 2020	2 406		2 1 4 0	-		
	12	Total Add line	s 1 throug		2,486		3,140.			2 125
	13	Compensation of	officers, dir	**************************************	3,700	•	1,575.	-	<u> </u>	2,125.
	14	Pension plans,	e salaries	and wag GDEN				<b></b>	<del></del>	<u> </u>
S	15	Legal fees	employee	STMT 2	506	_	0.	<del> </del>	<del></del>	506.
ŠUŠ	I TO a	Accounting fee	ic.	STMT 3	365		0.		-	365.
ra.š	ָּן	Other profession		SIMI 2		<del>'</del>	<u> </u>	_		303.
င္လ်္က	17	Interest	Jilai 1003		<u> </u>	<del>-</del>		<u> </u>		
多讀	18	Taxes								
Administrative Expenses	19	Depreciation ar	nd depletio	on						
떒	20	Occupancy	,							
Ad	21	Travel, confere	nces, and	meetings						
怨	22	Printing and pu	ublications	}						
<u> </u>	23									
Bus Guita 4 2020	24	Total operating	-							
3p€		expenses. Add		_	4,571		1,575.			2,996.
20.5	25	Contributions,			3,000	•	<del></del>			3,000.
0	26	Total expense:		oursements	2		1 686			E 000
		Add lines 24 ar		- 40:	7,571	<del>-</del>	1,575.	<del>\                                    </del>		5,996.
		Subtract line 2			E NOE					
			•	nses and disbursements (if negative, enter -0-)	<5,085	· <u>/</u>	1,565.			
	1	Adjusted net in				+	1,505.	N/	'A	
8225				work Reduction Act Notic	e see instructions					Form <b>990-PF</b> (2016)

THE DR. C. H. RAMSAY TRUST 64-6028902 TRUSTMARK NATIONAL BANK TRUSTEE Page 2 Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only Beginning of year (b) Book Value (c) Fair Market Value (a) Book Value 1 Cash - non-interest-bearing 3,998 2,903. 2,903 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 7 Other notes and loans receivable 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 b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 112,954 STMT 4 116,946 13 Investments - other 14 Land, buildings, and equipment: basis Less accumulated depreciation STATEMENT 5 18. 56 56. 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 120,962 115,913 117,260. instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Net Assets or Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted  $\triangleright \overline{x}$ Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 120,962 115,913 27 Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg., and equipment fund 0. Retained earnings, accumulated income, endowment, or other funds 120,962. 115,913 30∰Total net assets or fund balances Total liabilities and net assets/fund balances 120,962 115,913 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	120,962.
2	Enter amount from Part I, line 27a	2	<5,085.>
3	Other increases not included in line 2 (itemize) NON DIVIDEND DISTRIBUTIONS	3	36.
4	Add lines 1, 2, and 3	4	115,913.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	115,913,

(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			
2014			
2013			
2012			
2011			

- 2 Total of line 1, column (d)
- 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
- 4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5
- 5 Multiply line 4 by line 3
- 6 Enter 1% of net investment income (1% of Part I, line 27b)
- 7 Add lines 5 and 6
- 8 Enter qualifying distributions from Part XII, line 4

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.

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10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresse:

10

TRUSTMARK NATIONAL BANK, TRUSTEE

Pa	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		X
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?  N/A	13		
	Website address ► N/A			
14	The books are in care of ▶ TRUSTMARK NATIONAL BANK C/O C. TODD Telephone no. ▶ 601-20	<u>8 - 5</u>	<u>956</u>	
	Located at ► 248 EAST CAPITOL STREET, SUITE 580, JACKSON, MS ZIP+4 ►39	<u> 201</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	N	/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		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			1
_	foreign country			
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		V	L N.
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	No
1a	During the year did the foundation (either directly or indirectly):	j '		<u>.</u> `. '
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	İ		1 2.1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No	ĺ		' 1
				,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No X Yes No			1
	(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)?		•	
	(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.)			•
H	of any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			ĺĺ
_	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here			.!
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	_		٠, ،
	before the first day of the tax year beginning in 2016?	1c		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)):			1
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	ļ		· [
	before 2016? Yes X No			!
	If "Yes," list the years $\blacktriangleright$ ,,,,,			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect	1		!
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	- <b>-</b>		1
	statement - see instructions ) N/A	2b_		<del> </del> ,
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
_	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3 a				
	during the year?  Yes X No			
C	of "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.)  N/A	3b		
A	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			<u> </u>
•	had not been removed from jennardy before the freet day of the tay year beginning in 2016?	4h		

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Form 990-PF (2016) TRUSTMARK NATIONAL BANK		2 om tiro d	64-60289	UZ Page 6
Part VII-B Statements Regarding Activities for Which	Form 4/20 May Be I	nequirea (contin	<u>ива)</u>	
5a During the year did the foundation pay or incur any amount to:	10.151.330			•   •   .
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir		[ <del>2</del> ]	1,
ahy voter registration drive?	0		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purpose		L Y(	es 🗶 No	'
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section		es X No	
4945(d)(4)(A)? (see instructions)			es LALINO	
(5) Provide for any purpose other than religious, charitable, scientific, literary	y, or educational purposes, or		es X No	
the prevention of cruelty to children or animals?	nder the everetions described		es La No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify us section 53.4945 or in a current notice regarding disaster assistance (see instr		iii neguialions	N/A	5b
Organizations relying on a current notice regarding disaster assistance check	•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		unad		
• • •		I/A □ Y	es No	
expenditure responsibility for the grant?		1/A		
If "Yes," attach the statement required by Regulations section 53 494 6a Did the foundation, during the year, receive any funds, directly or indirectly, to			.	
a personal benefit contract?	o pay promiums on	v	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		-	6b X
If "Yes" to 6b. file Form 8870	personal content contract.			
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?		es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b
Part VIII Information About Officers, Directors, Trus		nagers, Highl		
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their	r compensation.			
( ) Managard address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	and deterred compensation	allowances
TRUSTMARK NATIONAL BANK	TRUSTEE			
248 EAST CAPITOL STREET, SUITE 580	_			
JACKSON, MS 39201	2.00	3,700.	0.	0,
	_			
	_			
			:	
		ļ		
	_			
2 Compensation of five highest-paid employees (other than those in	aludad an line 4). If name	enter INONE II	<u></u>	L
2 Compensation of five highest-paid employees lother than those in	(b) Title, and average	enter NONE.	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	account, other
NONE	devoted to position		compensation	anowances
NONE	-			
	<del></del>		-	
	=			
		<del>                                     </del>		
				<del></del>
	$\dashv$			
		<del>                                     </del>		_
	-			
Total number of other employees paid over \$50,000	<u> </u>	.1		(
Total number of other employees paid over \$50,000			Form	990-PF (2016
			1 01111	755 . 1 (2010

Form 990-PF (2016) TRUSTMARK NATIONAL BANK, TRUSTEE	64-602	28902 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ı Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NC	ONE."	
(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		<u>▶</u> 0
<u> </u>	nformation such as the	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced	i, etc.	Expenses
1 N/A		
2		
3		
4		
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 and 2.	Amount
1 N/A		
2		
· · · · · · · · · · · · · · · · · · ·		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<b>&gt;</b>	0.
		Form <b>990-PF</b> (2016)

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

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6

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

## Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2015	(c) 2015	( <b>d)</b> 2016
Distributable amount for 2016 from Part XI, line 7	•			5,760.
2 Undistributed income, if any, as of the end of 2016				3,100.
a Enter amount for 2015 only			0.	
b Total for prior years:				
b Total for prior years.		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011				
b From 2012				
c From 2013				
d From 2014				
e From 2015 89.	,			
f Total of lines 3a through e	89.			Į.
4 Qualifying distributions for 2016 from				
Part XII, line 4: ►\$ 5,996.				
a Applied to 2015, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior	•			
years (Election required - see instructions)	i	0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount			<u> </u>	5,760.
e Remaining amount distributed out of corpus	236.			<u> </u>
5 Excess distributions carryover applied to 2016	0.			0.
(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:				
	325.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	343.			
line 4b from line 2b		0.		
c Enter the amount of prior years'	<del></del>			
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable	<del> </del>	•		
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.			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)	0.			
8 Excess distributions carryover from 2011		,		,
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	325.			
10 Analysis of line 9:		,		
a Excess from 2012				
b Excess from 2013				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016 236.				

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TRUSTMARK NATIONAL BANK, TRUSTEE

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Yo	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	3371113311311	
a Paid during the year				
		L		
THE UNIVERSITY OF SOUTHERN		PUBLIC CHARITY	SCHOLARSHIPS	
MISSISSIPPI 118 COLLEGE DR				
HATTIESBURG, MS 39406				3,000.
				-
		}	•	
T-A-1			<b>▶</b> 3a	3 000.
Total  b Approved for future payment		<u> </u>		3,000.
• Approved for lattire payment				
NONE				
			1	
	1	<del></del>		
			-	
			1	
Total		<del></del>	<b>▶</b> 3b	

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Part XVI-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated.	Unitale	d business income		ded 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
a			1 1		
b					
C	_ I _ I				
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments	-				
Dividends and interest from securities			14	3,140.	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income			_	<del>,, </del>	
Gain or (loss) from sales of assets other					
than inventory			18	<654.	>
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					-
Other revenue:					
a			-		
b			<del> </del>	<del></del>	
<u> </u>			+		
d	-				
e	-	0		2,486.	
Subtotal. Add columns (b), (d), and (e)		<u> </u>	•		2,48
				· · · · · ·	2,10
Total. Add line 12, columns (b), (d), and (e)					
Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations )	to the Acco	omplishment of E	xemp	t Purposes	
Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations )  Part XVI-B  Relationship of Activities  The No.   Explain below how each activity for which income in the columns in the columns is a second column.	come is reported	ın column (e) of Part XVI-			nplishment of
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities	come is reported	ın column (e) of Part XVI-			nplishment of
Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations )  Part XVI-B  Relationship of Activities  The No.   Explain below how each activity for which income in the columns in the columns is a second column.	come is reported	ın column (e) of Part XVI-			nplishment of
Total. Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions to verify calculations )  Part XVI-B  Relationship of Activities  ine No.   Explain below how each activity for which inc	come is reported	ın column (e) of Part XVI-			nplishment of
Total. Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions to verify calculations )  Part XVI-B  Relationship of Activities  ine No.   Explain below how each activity for which inc	come is reported	ın column (e) of Part XVI-			nplishment of
Total. Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions to verify calculations )  Part XVI-B  Relationship of Activities  ine No.   Explain below how each activity for which inc	come is reported	ın column (e) of Part XVI-			nplishment of
Total. Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions to verify calculations )  Part XVI-B  Relationship of Activities  ine No.   Explain below how each activity for which inc	come is reported	ın column (e) of Part XVI-			nplishment of
Total. Add line 12, columns (b), (d), and (e)  we worksheet in line 13 instructions to verify calculations )  art XVI-B  Relationship of Activities  ne No.   Explain below how each activity for which income	come is reported	ın column (e) of Part XVI-			nplishment of
Total. Add line 12, columns (b), (d), and (e)  we worksheet in line 13 instructions to verify calculations )  art XVI-B  Relationship of Activities  ne No.   Explain below how each activity for which income	come is reported	ın column (e) of Part XVI-			nplishment of
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations ) art XVI-B  Relationship of Activities ne No.   Explain below how each activity for which income	come is reported	ın column (e) of Part XVI-			nplishment of
Total. Add line 12, columns (b), (d), and (e)  we worksheet in line 13 instructions to verify calculations )  art XVI-B  Relationship of Activities  ne No.   Explain below how each activity for which income	come is reported	ın column (e) of Part XVI-			nplishment of
Total. Add line 12, columns (b), (d), and (e)  we worksheet in line 13 instructions to verify calculations )  art XVI-B  Relationship of Activities  ne No.   Explain below how each activity for which income	come is reported	ın column (e) of Part XVI-			nplishment of
Total. Add line 12, columns (b), (d), and (e)  we worksheet in line 13 instructions to verify calculations )  art XVI-B  Relationship of Activities  ne No.   Explain below how each activity for which income	come is reported	ın column (e) of Part XVI-			nplishment of
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities ine No. Explain below how each activity for which inc	come is reported	ın column (e) of Part XVI-			nplishment of
Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations )  Part XVI-B  Relationship of Activities  The No.   Explain below how each activity for which income in the columns in the columns is a second column.	come is reported	ın column (e) of Part XVI-			nplishment of
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities ine No. Explain below how each activity for which inc	come is reported	ın column (e) of Part XVI-			nplishment of
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Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations ) Part XVI-B Relationship of Activities ine No. Explain below how each activity for which inc	come is reported	ın column (e) of Part XVI-			nplishment of

Part XVII		MARK NATIONAL egarding Transfers To		nd Relationships With No	ncharitable		ige 13
	Exempt Organ						
1 Did the o	rganization directly or indi	rectly engage in any of the follo	wing with any other organizatio	n described in section 501(c) of		Yes	No
the Code	(other than section 501(c)	)(3) organizations) or in section	n 527, relating to political organi	zations?			
a Transfers	s from the reporting founda	ation to a noncharitable exempt	t organization of:				ĺ
(1) Cash	1				1a(1)		X_
(2) Othe	er assets				1a(2)	L	X
<b>b</b> Other trai	nsactions:						ĺ
(1) Sale:	s of assets to a noncharita	ble exempt organization			1b(1)		X
(2) Purc	chases of assets from a no	ncharitable exempt organization	n		1b(2)		X
(3) Rent	tal of facilities, equipment,	or other assets			1b(3)		X
(4) Reim	nbursement arrangements				1b(4)		X
(5) Loar	ns or loan guarantees				1b(5)		X
(6) Perfo	ormance of services or me	embership or fundraising solicit	ations		1b(6)		X
c Sharing o	of facilities, equipment, ma	uling lists, other assets, or paid	employees		1c		X
d If the ans	swer to any of the above is	"Yes," complete the following s	chedule. Column (b) should alw	vays show the fair market value of the	goods, other ass	sets,	
or service	es given by the reporting fo	oundation. If the foundation rec	ceived less than fair market value	e in any transaction or sharing arrange	ement, show in		
column (	d) the value of the goods,	other assets, or services receiv	ed.				
(a) Line no	(b) Amount involved	(c) Name of noncharita	able exempt organization	(d) Description of transfers, transacti	ons, and sharing ar	rangeme	nts
		N/A	A		,		
	<del> </del>		<u>-</u>				
	<del></del>	· · · · · · · · · · · · · · · · · · ·					
	*						
		<u> </u>			<del></del>	<u>.</u>	
	-	-	one or more tax-exempt organiz	zations described		1	] No
		r than section 501(c)(3)) or in s	section 527?		L Yes	لما	7 NO
_b it"Yes," c	complete the following sch (a) Name of org		(b) Type of organization	(c) Description of r	elationshin		
	N/A	janization	(b) Type of organization	(e) bescription or r	<u> </u>		-
	N/A	<del></del>					
		· · · · · · · · · · · · · · · · · · ·					
	Tructmark No	ational Bank, Trustee					
Unde	or penalties of perjury. I declare	that I have examined this return, incl	luding accompanying schedules and	statements, and to the best of my knowledge	D	elle erie i	15.0
Sign and b	belief, it is true, correct, and cor	mplete Declaration of preparer (other	than taxpayer) is based on all inform	ation of which preparer has any knowledge	return with th	ne prepar	er
Here	By	A AM	17/20/14	VICE PRESIDENT	shown below		์ ไทง
Sig	nature of officer or trustee	úst Officer '	Date	Title			
	Print/Type preparer's na		's signature	Date Check if	PTIN		
			L-1	self- employed			
Paid	TED B. EDW	ARDS, CPA	7 Y June CPD	06/27/19	P00957	105	
Preparer	Firm's name ► HAD		MK BETTS PLLC	Firm's EIN ► 6	4-04143	29	
Use Only							
	Firm's address ▶ 18	88 EAST CAPITO	L STREET, STE	500			

Form **990-PF** (2016)

Phone no. 601-948-2924

JACKSON, MS 39201

FORM 990-PF	DIVIDENDS	AND II	NTERES	T FROM	SECUR	ITIES	ST	ATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS		AINS REVENUE		(B) NET INVEST- MENT INCOM		(C) T- ADJUST ME NET INC	
DIVIDENDS	4,435.	-	1,295		3,140.	3,1	L40.		
TO PART I, LINE 4	4,435.	-	1,295		3,140.	3,1	140.		
FORM 990-PF		LI	EGAL I	FEES			ST	'ATEMENT	2
DESCRIPTION		(A) EXPENSI PER BOO		(B) NET INVI MENT INC	EST-	(C) ADJUSTI NET INCO		(D) CHARITAI PURPOSI	
LEGAL FEE		(	506.		0.			5(	06.
TO FM 990-PF, PG 1, LN 16A =		506.		0.				506.	
FORM 990-PF		ACCOT	UNTIN(	FEES			ST	ATEMENT	3
DESCRIPTION		(A) EXPENSI PER BOO		(B) NET INVI MENT INC	EST-	(C) ADJUSTI NET INCO	ED	(D) CHARITAI PURPOSI	
ACCOUNTING FEE			365.	-	0.			365.	
TO FORM 990-PF, PG 1,	LN 16B		365.		0.			36!	
FORM 990-PF		OTHER	INVE	STMENTS	· · · · · · · · · · · · · · · · · · ·		ST	ATEMENT	4
DESCRIPTION				JATION THOD	воо	K VALUE	FA	IR MARKE' VALUE	r
FEDERATED STRATEGIC V FUND FIDELITY ADVISOR NEW	INSIGHTS		C	OST OST		15,216	•	17,8	0.
T ROWE PRICE MID CAP DODGE AND COX INC FD EATON VANCE SHORT DUR	ATION		C	OST OST OST		5,629	•	5,5	0.
GOVERNMENT INCOME FUN PRINCIPAL GLOBAL DIVE		NCOME	C	OST		11,744	•	11,5	54.

12,234.

11,554.

FUND

THE DR. C. H. RAMSAY TRUST TRUS	64-6028902		
PRUDENTIAL SHORT-TERM CORPORATE		<del></del>	
BOND FUND ·		0.	0. 5,416. 5,414. 5,811. 17,424. 5,872. 27,748.
JP MORGAN MID CAP VALUE	COST	5,441. 5,662. 5,794. 17,352. 5,812. 28,070.	
T ROWE PRICE NEW HORIZONS	COST		
CREDIT SUISSE FLOATING RATE HIGH	COST		
INCOME FUND			
PIMCO INCOME FUND	COST		
T ROWE PRICE INSTITUTIONAL EMERGI	NG COST		
MARKETS BOND FUND			
VANGUARD SHORT-TERM CORPORATE BON	D COST		
INDEX FUND			
TOTAL TO FORM 990-PF, PART II, LINE 13		112,954.	114,301.
FORM 990-PF	OTHER ASSETS		STATEMENT 5
•	BEGINNING OF	END OF YEAR	FAIR MARKET
DESCRIPTION '	YR BOOK VALUE	BOOK VALUE	VALUE
DIFFERENCE IN INCOME/EXPENSE RECOGNITION AND POSTING DATE TO ACCOUNT	18.	56.	56.
TO FORM 990-PF, PART II, LINE 15	18.	56.	56.