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# **Return of Private Foundation**

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

OMB No 1545-0052

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

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Fo	rcale	ndar year 2016 or tax year beginning		, and	ending		
		undation			A Employe	r identification numbe	7
		HE FAMILY FOUNDATION					
		d street (or P O box number if mail is not delivered to street address)	Roo	om/suite	<u>71-094</u>		
		SHANNON DRIVE			B Telephone	e number (see instruction	ns)
		n, state or province, country, and ZIP or foreign postal code					
		eesboro TN	37129	<del>-1334</del>			
For	eign cou	intry name Foreign province/state/county	Foreign po	stal code	C If exempt	ion application is pendir	ng, check here 🕨 🗌
	01 1		<del></del>				
G	Checi		of a former public	c charity	D 1. Foreigi	n organizations, check h	nere ►
		Final return Amended re				n organizations meeting	
		Address change Name change			ł	here and attach comput	<u> </u>
H		k type of organization 🔯 Section 501(c)(3) exempt pr				foundation status was to 07(b)(1)(A), check here	erminated under
$\sqcup$	Section	on 4947(a)(1) nonexempt charitable trust 📙 Other tax		dation	section 50	or (b)(1)(A), check here	
1	Fair n	narket value of all assets at J Accounting method	· 🛛 Cash 🔲	Accrual	F If the four	ndation is in a 60-month	termination
	end o	f year (from Part II, col (c), Other (specify)				tion 507(b)(1)(B), check	
	line 1	6) ▶ \$ 189,375. (Part I, column (d) must be	e on cash basıs )				_
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
	_	amounts in columns (b), (c), and (d) may not necessarily	expenses per	1 ' '	t investment ncome	(c) Adjusted net income	for charitable purposes
		equal the amounts in column (a) (see instructions) )	books	"	Come	income	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	288,135.				
	2	Check ▶☐ if the foundation is <b>not</b> required to attach Sch. B			\$ \$ 4 *	D. C. C.	
	3	Interest on savings and temporary cash investments				RECE	VED
	4	Dividends and interest from securities	9,035.	9	,035.	[ <b>2</b> ]	8
	5a	Gross rents				I AUG 25	2017 9
	b	Net rental income or (loss)					
ne	6a	Net gain or (loss) from sale of assets not on line 10			ż	OGDEN	UT =
E I	b	Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2) .		7	,600.		
Œ	8	Net short-term capital gain				7,600.	
	9	Income modifications .					
	10a	Gross sales less returns and allowances		<u> </u>			
	b	Less Cost of goods sold		<u> </u>			
	C	Gross profit or (loss) (attach schedule)	2 115		115		
	11	Other income (attach schedule) .	3,115.		,115.	7 600	
	12	Total. Add lines 1 through 11	300,285.	1 19	,750.	7,600.	
ß. enses	13	Compensation of officers, directors, trustees, etc.		<u> </u>			
ž.	14 15	Other employee salaries and wages		+			<u> </u>
20% Expe		Pension plans, employee benefits					
$\sim$	16a b	Accounting fees (attach schedule)	618.	1	618.	<u> </u>	618.
<b>S</b>	6	Other professional fees (attach schedule)	010.		010.	<del></del>	010.
30 AUG 25 6 Administrative	17	Interest	844.		844.	<del></del>	844.
Str	18	Taxes (attach schedule) (see instructions)	20.		20.	<del></del>	20.
₹ 🖺	19	Depreciation (attach schedule) and depletion		<del>   </del>			
ω <u>Ē</u>	20	Occupancy			· · · · · · · · · · · · · · · · · · ·	_	
¥ Mil	21	Travel, conferences, and meetings					<del></del>
図す	22	Printing and publications				· · · · · · · · · · · · · · · · · · ·	
图画	23	Other expenses (attach schedule)	3.		3.	\	3.
SCANNED perating and Adn	24	Total operating and administrative expenses.				<u> </u>	
at i		Add lines 13 through 23	1,485.	1	,485.		1,485.
Se C	25	Contributions, gifts, grants paid	1,485. 305,363.				305,363.
ŏ	26	Total expenses and disbursements. Add lines 24 and 25.	306,848.	1	,485.		306,848.
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	(6,563.	<u>)</u>			
	b	Net investment income (if negative, enter -0-)		18	,265.		
	С	Adjusted net income (if negative, enter -0-)		7		7,600.	
For	Paper	work Reduction Act Notice, see instructions.	-t				m <b>990-PF</b> (2016)

		Attached schedules and amounts in the description column	Beginning of year	E	nd of	f year
	art II	Should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash—non-interest-bearing	1,510.	1,700		1,700.
	2	Savings and temporary cash investments	2,119.	2,250	$\cdot $	2,250.
	3	Accounts receivable >				
	1	Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶	·			
	i	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 schedule)				
	)	Less. allowance for doubtful accounts				
ţ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments—U.S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)	147,766.	147,766		185,425.
	С	Investments—corporate bonds (attach schedule)			7	
	11	Investments—land, buildings, and equipment basis				
	J	Less. accumulated depreciation (attach schedule)				
	12	Investments—mortgage loans			$\neg$	
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment: basis			$\neg$	
	ļ	Less. accumulated depreciation (attach schedule)				
	15	Other assets (describe )				
	16	Total assets (to be completed by all filers—see the				
	Į	ınstructions. Also, see page 1, item I)	151,395.	151,716	.	189,375.
	17	Accounts payable and accrued expenses				
10	18	Grants payable				
<u>.</u>	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ä	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe  )				
	23	Total liabilities (add lines 17 through 22)				
		Foundations that follow SFAS 117, check here ▶ □				
alances	i	and complete lines 24 through 26 and lines 30 and 31.	ĺ			i
ĭ	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
Net Assets or Fund B	[	Foundations that do not follow SFAS 117, check here ▶ 🏻				1
Ī	1	and complete lines 27 through 31.	[			
ō	27	Capital stock, trust principal, or current funds				1
ste	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
SS	29	Retained earnings, accumulated income, endowment, or other funds	151,395.	151,716		
ď	30	Total net assets or fund balances (see instructions)	151,395.	151,716		
ě	31	Total liabilities and net assets/fund balances (see				
_		instructions)	151,395.	151,716		<u></u>
	art III			<del></del>		
1	Total	net assets or fund balances at beginning of year-Part II, column (	a), line 30 (must agr	ee with		
	end-	of-year figure reported on prior year's return)			1	151,395.
					2	(6,563.)
3	Othe	r increases not included in line 2 (itemize)   STK SALE GA	IN		3	7,600.
		lines 1, 2, and 3			4	152,432.
5	Decr	eases not included in line 2 (itemize) ► FED_TAX			5	716.
6	Total	net assets or fund balances at end of year (line 4 minus line 5)—P	art II, column (b), line	e 30	6	151,716.

Capital Gains and Losses for Tax on Investment Income

Part IV

-		he kind(s) of property sold (e.g., real estate buse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acqui (mo , day, yr	
1a`	3500 SHARES NH	I STOCK			06/22/20	01606/28/2016
b	500 SHARES NHI	STOCK		D		01610/13/2016
С				<u></u>		
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis inse of sale		n) Gain or (loss) plus (f) minus (g)
а	257,250.			249,410.		7,840.
b	38,485.			38,725.		(240.)
С						
d						
е						
	Complete only for assets sh	nowing gain in column (h) and owned	by the foundation	on 12/31/69	(I) Gair	is (Col. (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) (j), if any		out not less than -0-) or sees (from col (h))
a						7,840.
b						(240.)
_ с		<u> </u>	 			
d						
е					<u> </u>	
2	Capital gain net income o	r (net canital loss) 4	also enter in Pa	· · · · · · · · · · · · · · · · · · ·		7 (00
		t if (loss)	, enter -0- in Pa		2	7,600.
3		n or (loss) as defined in sections			] ]	
	-	l, line 8, column (c) (see instructi	ons). If (loss), ef	nter -U- in		7 600
	Part I, line 8		· · · · · · · · · · · · · · · · · · ·	J	3	7,600.
Part		der Section 4940(e) for Redu				<del></del>
If sec	tion 4940(d)(2) applies, lea	ivate foundations subject to the sive this part blank. • section 4942 tax on the distribut				☐ Yes ☒ No
	s," the foundation does not	qualify under section 4940(e) D	o not complete t	this part		
_ <u>'</u>	(a)	ount in each column for each yea	ir, see the mond		King any entir	(d)
	Base period years	(b) Adjusted qualifying distribution	s Net value	(c) of noncharitable-use a	ssets .	Distribution ratio
Cal	endar year (or tax year beginning ii	n) , , , , , , , , , , , , , , , , , , ,	<del></del>	<del></del>		ol (b) divided by col (c))
	2015 2014	456,49	14	230,59	3	1.000000
	2014	375,83	3	201,18	11.	1.000000
	2013	248,35	<del>(1)</del>	175,82		1.000000
	2012	262,95	2	256,03		1.000000
	2011		<u> </u>			
2	Total of line 1, column (d					4.000000
3	Average distribution ratio	for the 5-year base period-divid	de the total on li	ne 2 by 5, or by t		
	number of years the foun	dation has been in existence if le	ess than 5 years		3	1.000000
4	Enter the net value of nor	ncharitable-use assets for 2016 t	rom Part X, line	5	4	204,913.
						224 242
5	Multiply line 4 by line 3				5	204,913.
6	Enter 1% of net investme	ent income (1% of Part I, line 27b	)		. 6	183.
7	Add lines 5 and 6				7	205,096.
8	Enter qualifying distribution	ons from Part XII, line 4			. 8	306,848.
-	If line 8 is equal to or great	ater than line 7, check the box in			at part using a	1% tax rate. See the
_	Part VI instructions					
						Form <b>990-PF</b> (2016)

Part \		1s)		
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.  Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)			
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check	18	3.	
	here ▶ X and enter 1% 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-)	0		
3	Add lines 1 and 2	18	3.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	0		
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	18	3.	
6	Credits/Payments:			
а	2016 estimated tax payments and 2015 overpayment credited to 2016 <b>6a</b>			
b	Exempt foreign organizations—tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868) 6c 500 .			
_d	Backup withholding erroneously withheld	50	<u></u>	لــــا
7	Total credits and payments Add lines 6a through 6d	30	<u> </u>	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached  Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  9			
9 10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	31	7	
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax  Refunded  11	31		
	VII-A Statements Regarding Activities		<u> </u>	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		İ	
	published or distributed by the foundation in connection with the activities.			لببا
C	Did the foundation file Form 1120-POL for this year?	1c		X
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 ▶\$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
е	on foundation managers. • \$	1		]
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	-		X
4-	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3 4a		$\frac{\lambda}{X}$
4a b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	<u> </u>	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		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.			
	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	7	X	ļ
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		ļ	
_	TN	1		]
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	0 L	Х	
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	_8b	1	
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			<del></del>
	"Yes," complete Part XIV	9	ļ	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	<u> </u>	†	† <del></del>
	names and addresses	. 10	İ	Х
		orm <b>99</b>	0-PF	

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 X
12 `	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	<del>  '''</del>		
12	person had advisory privileges? If "Yes," attach statement (see instructions).	12	ļ	Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
13	Website address	_13_		
14	The books are in care of ▶ RICHARD F LAROCHE  Telephone no ▶ 615-8	93-	849	0
	Located at ▶ 2103 SHANNON DR MURFREESBORO TN ZIP+4 ▶ 37130			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here, , .		(	<b>▶</b> □
	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?	16	Yes	No X
	· · · · · · · · · · · · · · · · · · ·	10		<del>-</del>
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country ▶	ļ	ļ	
Dort	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	L		ــــــــــــــــــــــــــــــــــــــ
rait			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	165	NO
1a	During the year did the foundation (either directly or indirectly):	}		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	(		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?	1		
	(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?			
	(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			1
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days )			
b	If any answer is "Yes" to 1a(1)-(6), did 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)?	1b		ļ
	Organizations relying on a current notice regarding disaster assistance check here			]
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	<u> </u>		
	were not corrected 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)).			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and	1	'	[
	6e, Part XIII) for tax year(s) beginning before 2016?	]		
	If "Yes," list the years  20 , 20 , 20 , 20	}		
b	Are there any years listed in 2a for which the foundation is 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			<u> </u>
	all years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	}		
	<b>▶</b> 20, 20, 20			1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1		
	at any time during the year?			
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			ł
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse	1		
	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.)	3b		<del>  ,, -</del>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
þ	Old the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		X

Part	VILE Statements Regarding Activities	<u>for Whi</u>	ich Form 47	720 Ma	y Be Req	uired (d	<u>continue</u>	<u>a)</u>			
5a	During the year did the foundation pay or incur ar (1) Carry on propaganda, or otherwise attempt to			(sectio	n 4945(e))′	?	Yes	∑ No			
	(2) Influence the outcome of any specific public e directly or indirectly, any voter registration driv						Yes	∑ No			
	(3) Provide a grant to an individual for travel, stud	ly, or otl	ner similar pu	ırposes	?		Yes	X No	}	1 1	1
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? (see instructions)		able, etc., org				Yes	⊠ No			
	(5) Provide for any purpose other than religious, or purposes, or for the prevention of cruelty to ch			_	or educati		Yes	⊠ No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice					•		bed in	5b		
	Organizations relying on a current notice regarding	-	J		•		•	▶ []			
С	If the answer is "Yes" to question 5a(4), does the because it maintained expenditure responsibility	for the g	grant? .		from the to		Yes	□ No			
6a	If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any f				nav nrem	uime			ļ		)
Va				•			Yes	⊠ No		1 1	ļ
b	Did the foundation, during the year, pay premium					enefit c	contract?		6b		X
	If "Yes" to 6b, file Form 8870						_				
	At any time during the tax year, was the foundation a p If "Yes," did the foundation receive any proceeds						Yes	No 🔀 No	7b		
	VIII Information About Officers, Direct									es.	
	and Contractors	···, ··	_						p,-	,	
1	List all officers, directors, trustees, foundation										
		/L\ T.A.				(4)	^				
	(a) Name and address	hou devot	e, and average rs per week ed to position	Ì ``(lfn	mpensation oot paid, ter -0-)	emplo	Contribution byee benefit erred compe	plans	(e) Expe	ense acc allowance	
2103	HARD F LAROCHE B SHANNON DR	hou devot TRUS	rs per week ed to position TEE	Ì ``(lfn	ot paid,	emplo	yee benefit	plans			
2103 GLOI 2103	HARD F LAROCHE  B SHANNON DR  RIA LAROCHE  B SHANNON DR	TRUS	rs per week ed to position TEE	Ì ``(lfn	ot pald, ter -0-)	emplo	yee benefit	plans			
2103 GLOF 2103 DAV	HARD F LAROCHE B SHANNON DR RIA LAROCHE B SHANNON DR ID LAROCHE B WALKING DR	TRUS	rs per week ed to position TEE TEE	Ì ``(lfn	ter -0-)	emplo	yee benefit	plans			
2103 GLOF 2103 DAV 1728 ASHI	HARD F LAROCHE B SHANNON DR RIA LAROCHE B SHANNON DR ID LAROCHE B WALKING DR LEY L HEEREN	TRUS	rs per week ed to position TEE TEE	Ì ``(lfn	0 0	emplo	yee benefit	plans			
2103 GLOF 2103 DAV 1728 ASHI 327	HARD F LAROCHE  3 SHANNON DR  RIA LAROCHE  3 SHANNON DR  ID LAROCHE  8 WALKING DR  LEY L HEEREN  LAUDERDALE RD	TRUS	rs per week ed to position TEE TEE TEE	(If n	0 0	emplo and def	oyee benefit erred compe	plans ensation	other	allowand	ces
2103 GLOF 2103 DAV 1728 ASHI	HARD F LAROCHE B SHANNON DR RIA LAROCHE B SHANNON DR ID LAROCHE B WALKING DR LEY L HEEREN	TRUS	rs per week ed to position TEE TEE TEE	(If n	0 0	emplo and def	oyee benefit erred compe	plans ensation	other	allowand	ces
2103 GLOF 2103 DAV 1728 ASHI 327 2	HARD F LAROCHE  3 SHANNON DR  RIA LAROCHE  3 SHANNON DR  ID LAROCHE  6 WALKING DR  LEY L HEEREN  LAUDERDALE RD  Compensation of five highest-paid employees "NONE."	TRUS TRUS TRUS	rs per week ed to position TEE TEE TEE	include	0 0	emplo and defi	oyee benefit erred compe	plans ensation  ons). If	none,	enter	count,
2103 GLOF 2103 DAV 1728 ASHI 327	HARD F LAROCHE  3 SHANNON DR  RIA LAROCHE  3 SHANNON DR  ID LAROCHE  6 WALKING DR  LEY L HEEREN  LAUDERDALE RD  Compensation of five highest-paid employees "NONE."	TRUS TRUS TRUS	rs per week ed to position TEE TEE TEE than those (b) Title, and a hours per v	include	O O O O O O O O O O O O O O O O O O O	emplo and defi	instructi  (d) Contrib employee plans and	plans ensation  ons). If	none,	enter	count,
2103 GLOF 2103 DAV 1728 ASHI 327 2	HARD F LAROCHE  3 SHANNON DR  RIA LAROCHE  3 SHANNON DR  ID LAROCHE  6 WALKING DR  LEY L HEEREN  LAUDERDALE RD  Compensation of five highest-paid employees "NONE."	TRUS TRUS TRUS	rs per week ed to position TEE TEE TEE than those (b) Title, and a hours per v	include	O O O O O O O O O O O O O O O O O O O	emplo and defi	instructi  (d) Contrib employee plans and	plans ensation  ons). If	none,	enter	count,
2103 GLOI 2103 DAV 1728 ASHI 327 2	HARD F LAROCHE  3 SHANNON DR  RIA LAROCHE  3 SHANNON DR  ID LAROCHE  6 WALKING DR  LEY L HEEREN  LAUDERDALE RD  Compensation of five highest-paid employees "NONE."	TRUS TRUS TRUS	rs per week ed to position TEE TEE TEE than those (b) Title, and a hours per v	include	O O O O O O O O O O O O O O O O O O O	emplo and defi	instructi  (d) Contrib employee plans and	plans ensation  ons). If	none,	enter	count,
2103 GLOI 2103 DAV 1728 ASHI 327 2	HARD F LAROCHE  3 SHANNON DR  RIA LAROCHE  3 SHANNON DR  ID LAROCHE  6 WALKING DR  LEY L HEEREN  LAUDERDALE RD  Compensation of five highest-paid employees "NONE."	TRUS TRUS TRUS	rs per week ed to position TEE TEE TEE than those (b) Title, and a hours per v	include	O O O O O O O O O O O O O O O O O O O	emplo and defi	instructi  (d) Contrib employee plans and	plans ensation  ons). If	none,	enter	count,
2103 GLOF 2103 DAV: 1728 ASHI 327 2	HARD F LAROCHE  3 SHANNON DR  RIA LAROCHE  3 SHANNON DR  ID LAROCHE  6 WALKING DR  LEY L HEEREN  LAUDERDALE RD  Compensation of five highest-paid employees "NONE."	TRUS TRUS TRUS	rs per week ed to position TEE TEE TEE than those (b) Title, and a hours per v	include	O O O O O O O O O O O O O O O O O O O	emplo and defi	instructi  (d) Contrib employee plans and	plans ensation  ons). If	none,	enter	count,

Pai	and Contractors (continued)	oloyees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NC	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	E	
Tota	number of others receiving over \$50,000 for professional services	
Pa	t IX-A Summary of Direct Charitable Activities	· · · · · · · · · · · · · · · · · · ·
	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
•		
2		
3		
4		
Pa	rt IX-B Summary of Program-Related Investments (see instructions)	
	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	NONE	
•		<del></del>
2		
	other program-related investments. See instructions	
3		
Tota	I. Add lines 1 through 3	
	En	m 990-PF (2016)

Form 99			944751 Page <b>8</b>
<b>Part</b>	Minimum Investment Return (All domestic foundations must complete this part. Foreign	found	dations,
	see instructions )		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	1	
•	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	6,729.
С	Fair market value of all other assets (see instructions)	1c	201,305.
d	Total (add lines 1a, b, and c)	1d	208,034.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	208,034.
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	3,121.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	204,913.
6	Minimum investment return. Enter 5% of line 5	6	10,246.
Part			
	foundations and certain foreign organizations check here   and do not complete this part )		
1 -	Minimum investment return from Part X, line 6	1	10,246.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016 (This does not include the tax from Part VI) . 2b	}	
С	Add lines 2a and 2b	2c	183. 10,063.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	10,063.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	10,063.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	} }	
	line 1	7	10,063.
Dort	XII Qualifying Distributions (see instructions)		
ган	All Qualitying Distributions (see instructions)	,	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	306,848.
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	306,848.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	1	
	Enter 1% of Part I, line 27b (see instructions)	5_	183.

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.

Adjusted qualifying distributions. Subtract line 5 from line 4 . . . .

306,665.

air	Will Ollarstribated illootile (acc illatidations)		<del> </del>		
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
	line 7	·			10,063.
2	Undistributed income, if any, as of the end of 2016				
а					
b	Total for prior years. 20, 20, 20				
3	Excess distributions carryover, if any, to 2016.				
а	From 2011				
b	From 2012				
c	From 2013				
_	From 2014	1			
d					
e		1 500 676			
f	_	1,582,676.			
4	Qualifying distributions for 2016 from Part XII,				
	line 4 ▶ \$ 306,848.				
а	Applied to 2015, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required—see instructions)		<u> </u>		
С	Treated as distributions out of corpus (Election				
-	required—see instructions)				
ч	Applied to 2016 distributable amount				10,063.
e	Remaining amount distributed out of corpus .	296,785.			
5	Excess distributions carryover applied to 2016.				<del></del>
J	(If an amount appears in column (d), the same				
	amount must be shown in column (a) )				ļ
_				ļ.	
6	Enter the net total of each column as	j			i :
	indicated below:	1 070 461			
a	,	1,879,461.			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b	<u> </u>			<u></u>
C	Enter the amount of prior years' undistributed	ļ	ļ		
	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				
e	Undistributed income for 2015 Subtract line				
	4a from line 2a Taxable amount—see				
	instructions				{
£	Undistributed income for 2016. Subtract lines	<del> </del>	<del></del>		
•	4d and 5 from line 1. This amount must be	f	{		
		f	<u>{</u>		
-	distributed in 2017		<del> </del>	<del> </del>	
7	Amounts treated as distributions out of corpus	ĺ	[		
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be	(	{	{	
	required—see instructions)	<u> </u>	ļ	<del> </del>	<del> </del>
8	Excess distributions carryover from 2011 not	0.50 0.5			
	applied on line 5 or line 7 (see instructions)	250,301.	<b></b>	<u></u>	<b></b>
9	Excess distributions carryover to 2017.		İ	1	
	Subtract lines 7 and 8 from line 6a	1,629,160.			
10	Analysis of line 9				
а	Excess from 2012	j	į	(	
b	Excess from 2013	]		(	(
C	Excess from 2014 449, 468.		[	(	
d	Excess from 2015	1		1	
е	Excess from 2016 296, 785.	]	[		

Part	XIV Private Operating Foundation	ons (see instruct	ons and Part VI	I-A. guestion 9)	····	7 290 10
	If the foundation has received a ruling					
	foundation, and the ruling is effective for			<b>&gt;</b>		
b	Check box to indicate whether the foundation		•	ribed in section	4942(j)(	3) or 4942(J)(5)
2a		Tax year		Prior 3 years		,
	income from Part I or the minimum investment return from Part X for	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed			L		
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly	'		}		
	for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					1
	alternative test relied upon			}		i
а	"Assets" alternative test—enter.			ì		l
	(1) Value of all assets			<del> </del>		<del> </del>
	(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					
С	"Support" alternative test—enter.					
	(1) Total support other than gross			Ì		
	investment income (interest,			<u> </u>		
	dividends, rents, payments on securities loans (section			)		
	512(a)(5)), or royalties)			ļ		
	(2) Support from general public and 5 or more exempt			}		
	organizations as provided in					
	section 4942(j)(3)(B)(iii) .			<del> </del>	ļ 	<u> </u>
	(3) Largest amount of support from					Ì
	an exempt organization					
D	(4) Gross investment income .  XV Supplementary Information	(Commission 4b)		a farm detion ha	d 65 000 or mo-	
Part				e loundation na	a \$5,000 or moi	e in assets at
1	any time during the year— Information Regarding Foundation		5.)			
a	List any managers of the foundation w		d more than 2% c	of the total contribu	tions received by t	he foundation
4	before the close of any tax year (but or					and realitation
	(	,,		, , , , ,	( /( / /	
b	List any managers of the foundation w	no own 10% or mo	re of the stock of	a corporation (or a	n equally large po	rtion of the
-	ownership of a partnership or other en					
	· · · · ·					
2	Information Regarding Contribution	, Grant, Gift, Loai	n, Scholarship, e	tc., Programs:		
	Check here ▶ ☐ if the foundation or					
	unsolicited requests for funds If the for		fts, grants, etc (se	ee instructions) to i	ndividuals or orga	nizations
	under other conditions, complete items			·	<del></del>	
а	The name, address, and telephone nu	mber or e-mail add	Iress of the perso	n to whom applicat	ions should be add	dressed
			WIID DD DD DD OD O	DO III 2710	0	
				RO TN 3712		
þ	The form in which applications should	be submitted and i	ntormation and m	aterials they shoul	d include.	
AN_	OPEN LETTER WITH A REQ	UEST				
c NON	Any submission deadlines:					
	Any restrictions or limitations on award	s such as by geor	graphical areas	haritable fields, kin	ds of institutions	or other
•	factors.	=, === == », goo;	J. 26 25			- +
NON			_			

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During	the Year or Approve	ed for Fu	uture Payme	nt	
. Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	, l Pu	rpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient			
a Paid dunng the year CITY SCHOOL FOUNDATION 2552 SO CHURCH ST		NON P	PRGENERAL	FUND	10,000.
37127 TN MURFREESBORO AMERICAN HEART ASSOCIAT 1818 PATTERSON ST 37203 TN NASHVILLE		NON P	PRGENERAL	FUND	500.
VANDERBILT UNIVERSITY 2301 VANDERBILT PLACE 37240 TN NASHVILLE		NON P	PRGENERAL	FUND	105,035.
MUSEUM OF MODERN ART 11 W 53RD STREET 10019 NY NEW YORK		NON P	PRGENERAI	FUND	70.
TENN SUPREME COURT 211 UNION STREET STE200 37207 TN NASHVILLE		NON P	PRGENERAL	FUND	1,050.
BOYS AND GIRLS CLUB P O BOX 3343 37133 TN MURFREESBORO		NON F	PRGENERAI	, FUND	3,000.
DISCOVERY CENTER AT 502 SE BROAD ST 37130 TN MURFREESBORO		иои в	PRGENERAI	FUND	700.
FRIENDS OF SEWANEE 735 UNIVERISTY AVE		NON F	PRGENERAL	. FUND	50.
Total	<del>1</del>			. •	<b>33</b> 05,363.
<b>b</b> Approved for future payment					
Total	<u> </u>	<u> </u>		<u>.</u> <b>.</b>	3b

	Analysis of income-Froducing A			<u> </u>		
,	er gross amounts unless otherwise indicated.	(a) Business code	(b) Amount	(c) Excluded by secti	on 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See instructions)
1	Program service revenue	ļ				(888 11011 801101)
	a	.				
	b			ļ		<u> </u>
	c	·	<del> </del>	ļ		
	d	·	<del></del>			
	e	·		<del> </del>		
	·	·				<del></del>
_	g Fees and contracts from government agencies	<del> </del>		<del> </del>		
2	•	<del> </del>		<del> </del>	<del></del>	
3		<del></del>	<del></del>	14	0 025	<del></del>
4		<u> </u>		14	9,035.	<del></del>
5	,	<b>}</b>	<del></del>	<u> </u>	<del></del>	·
	a Debt-financed property	} <del></del>		<del> </del>	<del></del>	<del></del>
	b Not debt-financed property	<del> </del>	<del></del>	<del> </del>	<del></del>	ļ
6	, , , , , , , , , , , , , , , , , , , ,	ļ	<del></del>	<del> </del>	<del></del>	
7		<del></del>		<b> </b>	<del></del>	
8	,			<del></del>		
9		<del> </del>		<del> </del>		
10	, _ , _ ,	<del> </del>		14	2 115	<del> </del>
11		· <del>   </del>	<del></del>	14	3,115.	
	b	· <del>   </del>	<del></del>	<del> </del>	<del></del>	<del></del>
	C	·	<del></del>		<del></del>	<del></del>
	•			1		1
	d			<del></del>		
40	de				12 150	
	e Subtotal Add columns (b), (d), and (e)				12,150.	12 150
13	e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)				12,150. 13	12,150.
<b>13</b> (Se	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations	 ns )				12,150.
13 (Sec Pa Lir	e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lir	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculationart XVI-B Relationship of Activities to the and the No.  Explain below how each activity for which income	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lir	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lir	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lir	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lir	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lin	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lin	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lir	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lir	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lir	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lin	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lin	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lin	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lin	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lin	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lin	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lin	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lin	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lin	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lin	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lin	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lir	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.
13 (Sec Pa Lir	d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations to verify calculations.  Relationship of Activities to the anne No.  Explain below how each activity for which inconaccomplishment of the foundation's exempt put	nns)  Accomplishme	ent of Exempt	Purposes	13	12,150.

Part	XVI		formation cempt Org			fers To	and Trans	action	s and R	elationship	s With No	ncharitab	le	age 10
1	Did					ngage in a	any of the fo	ollowing	with any	other organi	zation desc	ribed	Ye	s No
•			501(c) of the		her than s	ection 501	(c)(3) orga	nization	s) or in se	ection 527, re	elating to			
а			rom the rep		ndation to	a noncha	ritable exer	npt orga	nızation o	of:			_ _	
	(1) (	Cash										. 1a	1)	X
	(2)	Other a	assets .									1a	2)	X
b	_	-	sactions:										_ _	
			of assets to									. <u>1b</u>		X
			ises of asse				_					<u>1b</u>		X
			of facilities,									1b		X
			ursement a	_								. [1b		X
			or loan gua									16		$\frac{1}{X}$
^														
c d													<u>-                                    </u>	
	valu	e of the	e goods, other y transaction	er assets, or or sharing	services g arrangeme	iven by the nt, show in	reporting fo column (d)	undation the value	If the fou of the go	ndation received	ved less than sets, or service	fair market es received.		
(a) Line	no	(b) Am	ount involved	(c) N	ame of nonc	haritable exe	mpt organizati	on	(d) Des	cription of transf	ers, transaction	s, and sharing	arranger	nents
									ļ					
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						<del></del>								
		<u> </u>		L					<u> </u>					
2a b	des	cribed	in section 5	501(c) of th	e Code (d	ated with, other than	or related t section 50°	o, one o I(c)(3)) (	r more ta or in secti	x-exempt orgon 527?	ganizations 	. 🗌 Ye	s 🛛	No
							(b) Type of or	ganization			(c) Description	n of relationship		
										<u>                                       </u>		<del></del>		
								<del></del> -		<b>[</b>				
	T 111.2	4		alam that I base		ativas vastvatas		ah adulas an	d atalamanta	and to the best of m	v knowledge and	haliaf it is toria		
0!	COLL	er penaiti rect and c	es of perjury, i dec omplete Declarat	ciare that i have tion of preparer (	examined this r other than taxp	eturn, including ayer) is based o	accompanying s on all information	cnedules and of which prej	o statements, a parer has any	and to the best of it knowledge	iy knowledge and			
Sign	1 🖍	Ral	12. If	- 12/2=	12			<b>.</b>				with the preparei	shown b	elow
Here	S	ignature	of officer or tru	stee	<del>-</del>				001111	<u> </u>		(see instructions	? ∑Y	es No
	1 3				<del>-</del>	Preparer	's signature			Date		FT PTIN		
Paid		aring of facilities, equipment, mailting lists, other assets, or paid employees  a nawer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market the provided of the provided set of the goods, other assets, or services green by the reporting foundation if the foundation received less than fair market the in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (b) Amount involved  (c) Name of noncharitable exempt organization  (d) Description of transfers, transactions, and sharing arrangements  (d) Description of transfers, transactions, and sharing arrangements  (e) Description of transfers, transactions, and sharing arrangements  (e) Description of transfers, transactions, and sharing arrangements  (e) Transfers, transactions, and sharing arrangements  (f) Description of transfers, transactions, and sharing arrangements  (g) The foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations  (g) Description of transfers, transactions, and sharing arrangements  (g) Type of organization  (g) Description of relationship  (g) Description of relatio												
Prepa										<u></u>	7	iipioyed		
Use C	nly	<u> </u>												

### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

## **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

**Employer identification number** 

Name of the organization  LAROCHE FAMILY FO	71-0944751	
Organization type (check on		/1 0944/31
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treat	ated 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	
	covered by the <b>General Rule</b> or a <b>Special Rule.</b> 7), (8), or (10) organization can check boxes for both the	he General Rule and a Special Rule. See
General Rule		
	ling Form 990, 990-EZ, or 990-PF that received, durin property) from any one contributor. Complete Parts I tributions	
Special Rules		
regulations under sec 13, 16a, or 16b, and	lescribed in section 501(c)(3) filing Form 990 or 990-Ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Sctithat received from any one contributor, during the yea ne amount on (i) Form 990, Part VIII, line 1h, or (ii) Form	hedule A (Form 990 or 990-EZ), Part II, line ir, total contributions of the greater of (1)
contributor, during the	lescribed in section 501(c)(7), (8), or (10) filing Form 9 e year, total contributions of more than \$1,000 exclusions all purposes, or for the prevention of cruelty to children	rively for religious, charitable, scientific,
contributor, during the contributions totaled during the year for ar General Rule applies	lescribed in section 501(c)(7), (8), or (10) filing Form 9 e year, contributions exclusively for religious, charitate more than \$1,000. If this box is checked, enter here the exclusively religious, charitable, etc., purpose Don't is to this organization because it received nonexclusivate during the year	ole, etc., purposes, but no such ne total contributions that were received t complete any of the parts unless the rely religious, charitable, etc., contributions
990-EZ, or 990-PF), but it mu	it isn't covered by the General Rule and/or the Special ust answer "No" on Part IV, line 2, of its Form 990; or o certify that it doesn't meet the filing requirements of \$	check the box on line H of its Form 990-EZ or on its

Name of organization
LAROCHE FAMILY FOUNDATION

Employer identification number 71-0944751

Part I	Contributors (See instructions) Use duplicate copie	es of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LAROCHE ENTERPRISE 2103 SHANNON DRIVE MURFREESBORO TN 37129- Foreign State or Province Foreign Country	\$ 288,135.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Occupation Payroll Payroll Payroll Part II for noncash contributions )

US 990-PF Grants and	If an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or	2016
Recipient name and address MURFREESBORO ART	or substantial contributor	recipient	contribution	Amount
COMMITTEE		}		
111 W VINE ST		)		
MURFREESBORO TN 37130		NON PR	GENERAL FUND	250
BIG BROTHERS BIG SISTER	<del>-                                    </del>	NON PR	GENERAL FUND	250.
BIG BRUINERS BIG SISIER		1 1		
2015 BAILEY AVE		1 1	Ì	
CHATTANOOGA TN 37404		NON PR	GENERAL FUND	500.
CENTER FOR THE ARTS	<del></del>	NON III	GENERAL TOND	
CHAIDR FOR THE MICES		}		
110 W COLLEGE ST		1		
MURFREESBORO TN 37130		NON PR	GENERAL FUND	1,100.
TENNESSEE GREEN		1,01, 21	020021412 10102	1,100.
		1	1	
312 ROSA PARKS AVE			1	
NASHVILLE TN 37243		NON PR	GENERAL FUND	6,500.
VANDERBILT UNIVERSITY		<del> </del>		
ALH		1 1	Ì	
2301 VANDERBILT PLACE		1		
NASHVILLE TN 37240		NON PR	GENERAL FUND	6,000.
		1		
	1	1		
DOMESTIC VIOLENCE				
04.0.6			}	
2106 E MAIN ST		NON DD	COMEDAT DIME	100
MURFREESBORO TN 37130	<del> </del>	NON PR	GENERAL FUND	100.
CHARITY CIRCLE				
P O BOX 111128				
MURFREESBORO TN 37129		NON PR	GENERAL FUND	4,425.
NASHVILLE SYMPHONY	<del></del>	NON 11	GENERAL TOND	4,423.
WIGHT CHILLION				
1 SYMPHONY PL		1		
NASHVILLE TN 37201	ſ	NON PR	GENERAL FUND	2,250.
JPJ FOUNDATION				
		}	}	
926 SCEPTER DR		1 1	l	
MURFREESBORO TN 37129		NON PR	GENERAL FUND	500
DARTMOUTH COLLEGE				
6066 0000000000000000000000000000000000			}	
6066 DEVELOPMENT OFFICE	-	1022	COMPAN DIVID	0 050
HANOVER NH 03755	<del></del>	NON PR	GENERAL FUND	2,950.
PROJECT TRANSFORMATION		[ ]		
522 RUSSELL ST	}	}		
NASHVILLE TN 37206	1	NON PR	GENERAL FUND	500
ST THOMAS RUTHERFORD	<del></del>	1011	CENTICIE L'OND	
AMBASSADOR		1 1	1	
1700 MEDICAL CTR PKWY	<b>\</b>	1	Í	
MURFREESBORO TN 37129		NON PR	GENERAL FUND	75
HOLLINGSBORO IN STIES	<del></del>	F1011 111	CHITTIEL LOND	25,150

US 990-PF Grants and	d Contribution	s Paid I	During the Year	2016
.  Recipient name and address	If an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or	A
TN PARKS AND GREENWAY FOUNDATION	or substantial contributor	recipient	contribution	Amount
117 30TH AVE SO NASHVILLE TN 37212 NASHVILLE REPERTORY	ļ	NON PR	GENERAL FUND	8,000.
THEATRE 161 RAINS AVE				
NASHVILLE TN 37203 LEGAL AID SOCIETY	<del> </del>	NON PR	GENERAL FUND	925.
300 DEADERICK ST NASHVILLE TN 37203		NON PR	GENERAL FUND	250.
FRIENDS OF SOUTH CUMBERLAND P O BOX 816 SEWANEE TN 37375		NON PR	GENERAL FUND	500.
UNITED WAY		NON FI	GENERAL FUND	300.
3050 MEDICAL CTR PKWY MURFREESBORO TN 37129 UNIVER OF THE SOUTH		NON PR	GENERAL FUND	10,000.
735 UNIVERSITY AVE SEWANEE TN 37383 OAKLANDS HISTORIC MUS		NON PR	GENERAL FUND	25.
P O BOX 432 MURFREESBORO TN 37133		NON PR	GENERAL FUND	250.
MAIN STREET				
225 WEST COLLEGE ST MURFREESBORO TN 37130 WEBB SCHOOL	-	NON PR	GENERAL FUND	323.
319 WEBB ROAD EAST BELL BUCKLE TN 37020		NON PR	GENERAL FUND	7,500.
BOY SCOUTS OF AMERICA MIDDLE TN COUNCIL P O BOX 150409				
NASHVILLE TN 37215 ST THOMAS RUTHERFORD FOUNDATION		NON PR	GENERAL FUND	100,100.
1700 MEDICAL CTR PKWY MURFREESBORO TN 37129 FRIENDS OF THE		NON PR	GENERAL FUND	1,520.
GREENWAY 111 W VINE ST MURFREESBORO TN 37130		NON PR	GENERAL FUND	100.
FRIENDS OF SMITHSONIAN	1	INOIN PR	GENERAL FUND	100.
P O BOX 9016 PITTSFIELD MA 01202 Total		NON PR	GENERAL FUND	1,250. 130,743.

•	If an individual, show any relationship to any foundation manager	Foundation status of	Purpose of	grant or	
Recipient name and address	or substantial contributor	recipient	contrib	ution	Amount
ENN HISTORICAL	}	} }			
SOCIETY	li di di di di di di di di di di di di di	ł			
305 6TH AVE NO	1	L			
NASHVILLE TN 37215	<del></del>	NON PR	GENERAL	FUND	75.
CAMPUS SCHOOL PTC					
923 E LYTLE ST					 
MURFREESBORO TN 37130	<u> </u>	NON PR	GENERAL	FUND	500.
THINK TENNESSEE	1	1			l
NUMBER 105		1			ı
1831 12TH AVE SO	<b>1</b>	[			
NASHVILLE TN 37203		NON PR	GENERAL	FUND	10,000.
DOORS OF HOPE	}				
P O BOX 2392					
MURFREESBORO TN 37133		NON PR	GENERAL	FUND	500.
NATIONAL GEOGRAPHIC					
SOCIETY	1	}			
145 17TH ST NW	li .	}			
NASHINGTON DC 20036		NON PR	GENERAL	FUND	1,000.
FRIENDS OF STONES RIVER		I			
BATTLEFIELD		1			1
P O BOX 4092	,	1			
MURFREESBORO TN 37129		NON PR	GENERAL	FUND	100.
SECOND HARVEST FOOD		} }			n
BANK		1			
331 GREAT CIRCLE RD		L			
NASHVILLE TN 37228		NON PR	GENERAL	F.OND	500.
ARTS CENTER OF CANNON		}			
COUNTY		1			
1424 BRAGG HWY				DUND	0.500
WOODBURY TN 37190 READ TO SUCCEED	_	NON PR	GENERAL	FUND	2,500.
NEAD TO SUCCEED	1	}			
P O BOX 12161		L			
MURFREESBORO TN 37129	<del>_</del>	NON PR	GENERAL	FUND	500.
HOLY FAMILY CATHOLIC		1			
CHURCH		<b>j</b>			
9100 CROCKETT ROAD		NOV DD		PUND	0.50
RENTWOOD TN 37027	<del></del>	NON PR	GENERAL	FOND	250.
MOTE MARINE LAB AND	•	}			
AQUARIUM		(			
1600 KEN THOMPSON PKWY		NICAI DD	CEMEDAT	ELIND	110
SARASOTA FL 34236	<del></del>	NON PR	GENERAL	r UND	440
RUTHERFORD CO FOODBANK	}	}			
211 BRIDGE AVE	}		00,100,50	min.	
MURFREESBORO TN 37129	<del></del>	NON PR	GENERAL	F'UND	100
NATIONAL SEPT					
MEMORIAL		{			
180 GREENWICH ST		[			
NEW YORK NY 10007	i	NON PR	GENERAL	רוואור	100

US 990-PF Grants and	If an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	<b>2016</b> Amount
LARKSPUR CONSERVATION	or substantial contributor	recipient	Contribution	Amount
		}	}	
PO BOX 6330B NASHVILLE TN 37235	!	NON PR	GENERAL FUND	10,000.
TENN RESEARCH INSTITUTE	<del></del>	NON FR	GENERAL FUND	10,000.
		1		
P O BOX 210385		NON DD	COMPONI PIMO	2 500
NASHVILLE TN 37221	+	NON PR	GENERAL FUND	2,500.
		<del>  </del>		
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		]		
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		1		
	<del> </del>		<del></del>	
	+	<del>                                     </del>		<del></del>
		) [		
		<del>}</del>		<del></del>