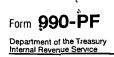


See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490





EXTENDED TO NOVEMBER 15, 20 Return of Private Foundation

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

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

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

For c	alen	dar year 2016 or tax year beginning		, and ending			
Nan	ne of	foundation	OUGE STATE FAIR FOUNDATION P O box number if mail is not delivered to street address) Room/suite				
_B	AT(ON ROUGE STATE FAIR FOU	NDATION		72-1036440		
		nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number		
		. BOX 15010			(225)769-4	911	
_		own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here	
		ON ROUGE, LA 70895					
G C	heck	all that apply: Initial return		ormer public charity	D 1. Foreign organizations	s, check here	
		Final return	Amended return		2. Foreign organizations me	eting the 85% test.	
		Address change	Name change		Foreign organizations me check here and attach co	mputation	
H C	-	type of organization: X Section 501(c)(3) ex	• •		E If private foundation sta		
		ction 4947(a)(1) nonexempt charitable trust Arket value of all assets at end of year J Accounti	Other taxable private foundaring method: X Cash	Accrual	under section 507(b)(1)	•	
		· —	ther (specify)	Accruai	F If the foundation is in a		
(iri		Part II, col (c), line 16) 0i		hasis.)	under section 507(b)(1)	(B), check here	
		Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(a) Adjusted not	(d) Disbursements	
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	(c) Adjusted net income	for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc., received					
	2	Check I if the foundation is not required to attach Sch. B					
3. m.7	3	Interest on savings and temporary cash investments	1,536.	1,536.		STATEMENT 1	
	4	Dividends and interest from securities	29,809.	29,809.		STATEMENT 2	
- ⊃	5a	Gross rents					
	b	Net rental income or (loss)					
5.	6a	Net gain or (loss) from sale of assets not on line 10	-61,714.			RECEIVED	
- nu	b	Gross sales price for all assets on line 6a 1,520,751.				ျပ	
e l	7	Capital gain net income (from Part IV, line 2)		0.	1881	MAY 2 2 2017	
	8 Net short-term capital gain			-	[8]		
A Marie Milli	9	Income modifications Gross sales less returns				DGLEN. UT	
	10a					AGDEIA. OI	
3 5.		Less Cost of goods sold Gross profit or (loss)					
,	11	Other income	985,708.	0.	985 708	STATEMENT 3	
	12	Total. Add lines 1 through 11	955,339.	31,345.	985,708.	DIRITEDIA DI G	
	13	Compensation of officers, directors, trustees, etc	0.	0.	0.	0.	
	14	Other employee salaries and wages					
	15	Pension plans, employee benefits					
ses	16a	Legal fees					
eu	b	Accounting fees STMT 4	3,169.	2,112.	0.	0.	
Ext	C	Other professional fees					
ive	17	Interest					
Operating and Administrative Expens		Taxes STMT 5	89.	0.	0.	0.	
inis	19	Depreciation and depletion					
투	20	Occupancy					
٧p	21	Travel, conferences, and meetings			 	 	
a	22	Printing and publications	487,729.		ADE 154		
ting	23	Other expenses STMT 6	40/,/29.	0.	485,154.	0.	
era	24	Total operating and administrative expenses. Add lines 13 through 23	490,987.	2,112.	485,154.	0.	
Ö	25	Contributions, gifts, grants paid	361,050.	٠, ١١٤٠	403,134.	361,050.	
		Total expenses and disbursements.	301,030.			301,030.	
	20	Add lines 24 and 25	852,037.	2,112.	485,154.	361,050.	
	27	Subtract line 26 from line 12:			100/101		
	ĺ	Excess of revenue over expenses and disbursements	103,302.				
		Net investment income (if negative, enter -0-)		29,233.			
		Adjusted net income (if negative, enter -0-)			500,554.		

Б	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year				
	art	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value				
	1	Cash - non-interest-bearing							
	2	Savings and temporary cash investments	493,873.	683,282.	683,282.				
	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 ▶							
s	8	Inventories for sale or use							
Assets	i -	Prepaid expenses and deferred charges							
As		Investments - U.S. and state government obligations STMT 7	386,275.	446,932.	454,044.				
		Investments - corporate stock STMT 8	182,618.	185,854.	185,168.				
		Investments - corporate bonds STMT 9	230,000.	230,000.	239,412.				
	11	Investments - land, buildings, and equipment basis	250,000.	250,000.	237,4120				
	''	Less accumulated depreciation							
	12	Investments - mortgage loans							
	13	Investments - other STMT 10	150,000.	0.	0.				
	14	Land, buildings, and equipment: basis	130,000.						
	'*	Less accumulated depreciation							
	45	Other assets (describe							
		Total assets (to be completed by all filers - see the							
	סו		1,442,766.	1,546,068.	1,561,906.				
_	47	Instructions. Also, see page 1, item I)	1,442,700.	1,340,000.	1,301,300.				
	l	Accounts payable and accrued expenses							
	18	Grants payable							
ties	19	Deferred revenue							
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons							
E.	21	Mortgages and other notes payable							
	22	Other liabilities (describe							
	22	Total liabilities (add lines 17 through 22)	0.	0.					
_	23	Foundations that follow SFAS 117, check here	0.						
	Ì	and complete lines 24 through 26 and lines 30 and 31.	Ì						
es	24	Unrestricted	1,442,766.	1,546,068.					
Š	25	Temporarily restricted		1,340,000.					
Net Assets or Fund Balanc	26	Permanently restricted							
ਰੂ	20	Foundations that do not follow SFAS 117, check here							
Ξ		and complete lines 27 through 31.							
þ	27	Capital stock, trust principal, or current funds							
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund							
ASS	29	Retained earnings, accumulated income, endowment, or other funds							
et/	30	Total net assets or fund balances	1,442,766.	1,546,068.					
Z	"	Total not assets of fund balances	1/442/1001	1/340/0000					
	31	Total liabilities and net assets/fund balances	1,442,766.	1,546,068.					
P	art		· · · · · · · · · · · · · · · · · · ·		=				
_		net assets or fund balances at beginning of year - Part II, column (a), line 3							
ı		t net assets or fund balances at beginning of year - Part it, column (a), line 3 St agree with end-of-year figure reported on prior year's return)	· ·		1,442,766.				
2		r amount from Part I, line 27a		2	103,302.				
		r increases not included in line 2 (itemize)	• •	3	0.				
		lines 1, 2, and 3		4	1,546,068.				
		eases not included in line 2 (itemize)		5	0.				
-		Last access or fund halances at end of year fline 4 minus line 5) - Part 11, col							

Form **990-PF** (2016)

Form 990-PF (2016) BATON ROUGE STATE FAIR FOUNDATION 72-1036440 Page 2

Part I	/ Capital Gains a	and Los	ses for Tax on In	vestment	Income						
	(a) List and descr 2-story brick was	ibe the kind rehouse; o	d(s) of property sold (e.g. r common stock, 200 shs	, real estate, . MLC Co.)	-	 b 	How ac - Purcl - Dona	hase	(c) Date (mo., c	acquired lay, yr.)	(d) Date sold (mo., day, yr.)
1a CHA	ARLES SCHWAB	- SE	E ATTACHED					P	VARI	OUS	12/29/16
b DIV	ERSIFIED CA	PITAL						P	01/1	5/07	12/16/16
						<u> </u>					
<u>d</u>		_				ļ					
<u>e</u>			· · · · · ·		 	<u> </u>					<u> </u>
(e) Gross sales price		epreciation allowed (or allowable)	plus e	t or other basis xpense of sale				(h) (e) plu	ain or (loss s (f) minus	(g)
<u>a</u>	1,412,882.				1,432,46						<u>-19,583.</u>
<u>b</u>	107,869.			-	150,00	0.					-42,131.
<u> </u>											
<u>d</u>											
e Comm	lete only for appete chayen		alumn (h) and aumad bu	ha favodation	an 10/01/00				0 //		
Comp	lete only for assets showin							((1) Gains ((Col. (h) gain not less tha	minus n -0-) or
(i) F	.M.V. as of 12/31/69		Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any		_		Losses	(from col. ((h))
<u>a</u>											<u>-19,583.</u>
<u>b</u>						ļ					-42,131.
_ <u>d</u>					<u>.</u>						
<u>e</u>						- 1					
2 Capital	gain net income or (net cap	pital loss)	If gain, also enter If (loss), enter -0-	in Part I, line in Part I, line	7 7	}	2				-61,714.
3 Net sh	ort-term capital gain or (los	s) as define	ed in sections 1222(5) an	d (6):							
	also enter in Part I, line 8,			` '		1					
), enter -0- in Part I, line 8		4040(-) 6	D	T N-4		3			N/A	<u> </u>
Part V			ection 4940(e) for					nent in	come		·-··
(For optio	nal use by domestic private	foundation	ns subject to the section 4	1940(a) tax on	net investment ir	ncome	e.)				
If section	4940(d)(2) applies, leave th	ııs part blaı	nk.								
	oundation liable for the sect					riod?					Yes X No
	<u>e foundation does not qual</u> the appropriate amount in e					ntrioc					
1 EIIIEI	(a)	acii coluiii		istructions be	ore making any e				1		(d)
Colond	Base periód years	\	(b) Adjusted qualifying dist	tributions	Net value of no	(c) encha		use asset:	s	Distri	bùtión ratio vided by col. (c))
Calenda	ar year (or tax year beginnir	ig iii)		3,911.				5,02		(coi. (b) di	.320946
	2015 2014			$\frac{3,911}{7,395}$				$\frac{3,02}{3,17}$.170953
	2013			3,600.				$\frac{3}{1}, \frac{1}{67}$.168330
	2012			4,563.				$\frac{3,07}{1,41}$.459787
	2011			3,388.				2,88			.374578
			<u> </u>	<u> </u>							7072070
2 Total	of line 1, column (d)								2		1.494594
	je distribution ratio for the 5	5-vear base	e neriod - divide the total o	on line 2 by 5.	or by the number	r of ve	ears				
-	indation has been in exister	•	•	, ,	,	,			3		.298919
4 Enter t	he net value of noncharitab	le-use asse	ets for 2016 from Part X,	line 5					4		1,205,804.
5 Multip	ly line 4 by line 3								5	<u> </u>	360,438.
6 Enter	1% of net investment incom	ne (1% of F	art I, line 27b)						6		292.
7 Add lir	nes 5 and 6								7		360,730.
8 Enter	qualifying distributions from	n Part XII, I	ine 4						8		<u>361,050.</u>
	B is equal to or greater than e Part VI instructions.	line 7, che	ck the box in Part VI, line	1b, and comp	lete that part usir	ng a 1	% tax	rate.			

	c i				
	1990-PF (2016) BATON ROUGE STATE FAIR FOUNDATION 72-	1036	440		Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see ir	nstru	ıctio	ns)
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)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	<u></u>		2	92.
	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			2	92.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			2	92.
6	Credits/Payments:	ļ			
a	2016 estimated tax payments and 2015 overpayment credited to 2016 6a				
	Exempt foreign organizations - tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868) 6c 0 •				
	Backup withholding erroneously withheld 6d				
7	Total credits and payments. Add lines 6a through 6d				0.
8	Enter any penalty for underpayment of estimated tax. Check here 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	ļ		2	92.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<u> </u>			
	Enter the amount of line 10 to be: Credited to 2017 estimated tax				
	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
	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 published or	<u> </u>			
	distributed by the foundation in connection with the activities.				
	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:	İ			
	(1) On the foundation. ▶ \$ 0.	-			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
•	managers. S 0.	į			7,5
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		•		1,-
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	ł	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year?	I/A	4a		X
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	'/ A	4b 5		x
٠	If "Yes," attach the statement required by General Instruction T.	}	3		<u> </u>
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	1			
	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	Ì	7	X	<u> </u>
•	on the foundation have at least 40,000 in about at any time during the year. If Tee, Complete Fart II, Con. (c), and Fast XV	ŀ			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
-	LA				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
•	of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	-			
-	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	Ì	9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		X
		For)-PF	(2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

Form 990-PF (2016) BATON ROUGE STATE FAIR F	OUNDATION		72-1036	440	Page 6
Part VII-B Statements Regarding Activities for Which		Required (contin	<u>, 2 2000</u> ued)		1 ugo O
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?		es 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir	ectly,			
any voter registration drive?		Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	9	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? (see instructions)		Ye	s 🗓 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	or educational purposes, or t				
the prevention of cruelty to children or animals?		Y6	s X No		
b if any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check t	nere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined			
expenditure responsibility for the grant?	Ŋ	1/A 🗀 Ye	s No		
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	es 🗶 No 📗		
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors		anagers, Highly	y		
1 List all officers, directors, trustees, foundation managers and their		1		1	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	,	(e) Expense ccount, other
	to position	enter -0-)	and deferred compensation	a	allowances
			and deferred compensation	a a	allowances
CPP CMAMPMONT 11		enter -0-)	compensation		allowances
SEE STATEMENT 11			and deterred compensation		allowances 0 .
SEE STATEMENT 11		enter -0-)	compensation		allowances
SEE STATEMENT 11		enter -0-)	compensation		allowances
SEE STATEMENT 11		enter -0-)	compensation		allowances
SEE STATEMENT 11		enter -0-)	compensation		allowances
SEE STATEMENT 11		enter -0-)	compensation		allowances
SEE STATEMENT 11		enter -0-)	compensation		allowances
SEE STATEMENT 11		enter -0-)	compensation		allowances
SEE STATEMENT 11		enter -0-)	compensation		allowances
	to position	enter-0-)	compensation		allowances
Compensation of five highest-paid employees (other than those inc.)	cluded on line 1). If none,	enter "NONE."	Compensation O	•	0.
	cluded on line 1). If none,	enter-0-)	(d) Contributions to employee benefit plans and deferred	•	(e) Expense ccount, other
Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	to position	enter "NONE."	O Contributions to	•	0.
Compensation of five highest-paid employees (other than those inc.)	cluded on line 1). If none,	enter "NONE."	(d) Contributions to employee benefit plans and deferred	•	(e) Expense ccount, other
Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	cluded on line 1). If none,	enter "NONE."	(d) Contributions to employee benefit plans and deferred	•	(e) Expense ccount, other
Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	cluded on line 1). If none,	enter "NONE."	(d) Contributions to employee benefit plans and deferred	•	(e) Expense ccount, other
Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	cluded on line 1). If none,	enter "NONE."	(d) Contributions to employee benefit plans and deferred	•	(e) Expense ccount, other
Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	cluded on line 1). If none,	enter "NONE."	(d) Contributions to employee benefit plans and deferred	•	(e) Expense ccount, other
Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	cluded on line 1). If none,	enter "NONE."	(d) Contributions to employee benefit plans and deferred	•	(e) Expense ccount, other
Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	cluded on line 1). If none,	enter "NONE."	(d) Contributions to employee benefit plans and deferred	•	(e) Expense ccount, other
Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	cluded on line 1). If none,	enter "NONE."	(d) Contributions to employee benefit plans and deferred	•	(e) Expense ccount, other
Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	cluded on line 1). If none,	enter "NONE."	(d) Contributions to employee benefit plans and deferred	•	(e) Expense ccount, other

Form **990-PF** (2016)

Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)			
3 Five highest-paid independent contractors for professional services. If none, enter			
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compens	sation
NONE			
	-		,
Total number of others receiving over \$50,000 for professional services		>	0
Part IX-A Summary of Direct Charitable Activities		_	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers produced to the served of the served	luced, etc.	Expenses	
1 <u>N/A</u>			•
2			0.
3			
1			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on N/A	lines 1 and 2.	Amount	
2			
All other program-related investments. See instructions.			
3			
Total, Add lines 1 through 3		Form 990-PF (0.

P	art X Minimum Investment Return (All domestic foundations	must complete this pa	rt. Foreign four	ndations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charita	ble, etc., purposes:			
a	Average monthly fair market value of securities	,, pa. paooo.		1a	1,029,306.
b	Average of monthly cash balances			1b	194,861.
C	Fair market value of all other assets		•	1c	
d	Total (add lines 1a, b, and c)		••	1d	1,224,167.
e	Reduction claimed for blockage or other factors reported on lines 1a and		••		
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d		••	3	1,224,167.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount	••	4	18,363.	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and	5	1,205,804.		
6	Minimum investment return. Enter 5% of line 5		6	60,290.	
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3)	and (j)(5) private operatin	g foundations an	d certain	
	foreign organizations check here and do not complete this par	t.)	3		
1	Minimum investment return from Part X, line 6			1	60,290.
2a	Tax on investment income for 2016 from Part VI, line 5	2a	292.		
b	Income tax for 2016. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b			2c	292.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	59,998.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	59,998.
6	Deduction from distributable amount (see instructions)		-	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pa	rt XIII, line 1		7	59,998.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	irposes:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	<u>361,050.</u>
b	Program-related investments - total from Part IX-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charit	able, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:				
a	Suitability test (prior IRS approval required)			3a	
b	Cash distribution test (attach the required schedule)			3b	
4	${\bf Qualifying\ distributions}.$ Add lines 1a through 3b. Enter here and on Part V, line 8,			4	361,050.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inv	vestment			
	income. Enter 1% of Part I, line 27b			5	292.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		. [6	360,758.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years 4940(e) reduction of tax in those years.	when calculating whether	the foundation of	jualifies for	the section

Form **990-PF** (2016)

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				59,998.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2015 only			0.	
b Total for prior years:	•	0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011 150,668.				
b From 2012 164, 737.				
c From 2013 96,746.				
d From 2014 147,080.				
e From 2015 315,838.				
f Total of lines 3a through e	875,069.			
4 Qualifying distributions for 2016 from	0,070000			
Part XII, line 4: ►\$361,050.				
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior			<u></u>	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				59,998.
e Remaining amount distributed out of corpus	301,052.		· · · · · · · · · · · · · · · · · · ·	3373300
5 Excess distributions carryover applied to 2018	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:	1 175 101			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,176,121.			
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		_0,		
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 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	150,668.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	1,025,453.			
10 Analysis of line 9:				
a Excess from 2012 164,737.				
b Excess from 2013 96,746.				
c Excess from 2014 147,080.		İ		
d Excess from 2015 315,838.				
e Excess from 2016 301,052.	<u></u>			<u> </u>

	00-PF (2016) BATON R	OUGE STATE	FAIR FOUNDA	TION	72-10	36440 Page 10
Part	XIV Private Operating F	oundations (see in	structions and Part VII	A, question 9)	N/A	
1 a 11	the foundation has received a ruling o	r determination letter that	t it is a private operating			
fo	undation, and the ruling is effective fo	r 2016, enter the date of t	the ruling	▶ <u></u>		
b Ci	neck box to indicate whether the found	lation is a private operatii	ng foundation described in	n section	4942(J)(3) or 494	12(1)(5)
2 a Er	nter the lesser of the adjusted net	Tax year		Prior 3 years		
ın	come from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
IN	vestment return from Part X for					
ea	ch year listed	_	<u> </u>			
b 88	5% of line 2a					
ç Qı	ualifying distributions from Part XII,					
lır	e 4 for each year listed		_			
d A	mounts included in line 2c not					
US	sed directly for active conduct of					
ex	empt activities					
e Qi	ualifying distributions made directly					
fo	r active conduct of exempt activities.					
Sı	ubtract line 2d from line 2c					
3 Co	omplete 3a, b, or c for the ternative test relied upon:					
	ssets" alternative test - enter;					
(1) Value of all assets					
(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
	ndowment" alternative test - enter 3 of minimum investment return			•		
	nown in Part X, line 6 for each year					
	sted					
c "S	upport" alternative test - enter:					
(1) Total support other than gross	1				
	investment income (interest, dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
(2	 Support from general public and 5 or more exempt 					
	organizations as provided in					
	section 4942(j)(3)(B)(III)				<u> </u>	
(3) Largest amount of support from					
	an exempt organization					
) Gross investment income		<u> </u>		1 10 200	_
Part	XV Supplementary Info			if the foundation	n had \$5,000 or mo	re in assets
	at any time during t	he year-see insti	ructions.)			
1 Ir	formation Regarding Foundatio	n Managers:				
	st any managers of the foundation wh			ributions received by the	e foundation before the clos	e of any tax
ye	ear (but only if they have contributed n	nore than \$5,000). (See s	section 507(d)(2).)			
NON:	<u> </u>					
	st any managers of the foundation wh			or an equally large porti	on of the ownership of a pa	rtnership or
ol	her entity) of which the foundation ha	s a 10% or greater intere	st.			
NON	፻					
2 Ir	formation Regarding Contribut	ion, Grant, Gift, Loan	, Scholarship, etc., Pr	ograms:		
	heck here 🕨 🔲 if the foundation o					
th	e foundation makes gifts, grants, etc.	(see instructions) to indi	viduals or organizations u	nder other conditions, c	omplete items 2a, b, c, and	d
a T	ne name, address, and telephone num	ber or e-mail address of	the person to whom appli	cations should be addre	ssed:	
	STATEMENT 12					
b T	he form in which applications should t	e submitted and informa	tion and materials they st	nould include:		
	ny submission deadlines:			·		
d A	ny restrictions or limitations on award	s, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors:	

Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to Foundation Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year 42 SCHOLARSHIPS @ \$500 EACH I SCHOLARSHIP FUNDING VARIOUS VARIOUS 21,000. ALZHEIMER'S SERVICES PC GENERAL PROGRAM 3772 NORTH BLVD BATON ROUGE, LA 70806 5_050. BATON ROUGE GENERAL FOUNDATION PC BURN CAMP 8595 PICARDY AVE, SUITE 410 BATON ROUGE, LA 70809 5_000. CHILDREN'S PROGRAM BATON ROUGE REGIONAL EYE BANK PC 7777 HENNESSY BLVD BATON ROUGE, LA 70808 2,500. CANCER SERVICES OF BATON ROUGE PC GENERAL PROGRAM & CHEF SHOWCASE 550 LOBDELL BLVD BATON ROUGE LA 70806 2,500. SEE CONTINUATION SHEET(S) ➤ 3a 361_050. Total b Approved for future payment NONE **▶** 3b **Total**

Page 11

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		y section 512, 513, or 514	(e)	
	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt	
1 Program service revenue:	code	Amount	sion code	Amount	function income	
a						
b	_					
c						
d		-····				
e	_		<u> </u>			
f			<u> </u>			
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash]]			
investments			14	1,536. 29,809.		
4 Dividends and interest from securities			14	29,809.		
5 Net rental income or (loss) from real estate:			<u> </u>			
a Debt-financed property						
b Not debt-financed property	<u> </u>		<u> </u>			
6 Net rental income or (loss) from personal						
property			 			
7 Other investment income			 			
8 Gain or (loss) from sales of assets other				61 71 1		
than inventory			18	-61,714.	005 700	
9 Net income or (loss) from special events			 		985,708.	
10 Gross profit or (loss) from sales of inventory			 			
11 Other revenue:						
a	-		 			
b	i I		 			
<u> </u>			 			
d	- 	 	} 			
12 Subtotal. Add columns (b), (d), and (e)	- 	0.	 	-30,369.	985,708.	
13 Total. Add line 12, columns (b), (d), and (e)			<u> </u>	13		
(See worksheet in line 13 instructions to verify calculations.)	١			· · · · · · · · · · · · · · · · · · ·		
Part XVI-B Relationship of Activities	to the Acco	mplishment of E	kempt Pi	ırposes		
Line No. Explain below how each activity for which in	come is reported in	column (e) of Part XVI-A	contributed	importantly to the accomp	lishment of	
the foundation's exempt purposes (other the						
		- <u></u>				
				· · · · · · · · · · · · · · · · · · ·		
						

_) DE (ON(0)			_			
	1990-1		ROUGE STATE FA egarding Transfers To izations			Noncharitabl		ige 13
1	Did th	ne organization directly or indi	rectly engage in any of the following	ng with any other organization	n described in section 501(c) of		Yes	No
	the C	ode (other than section 501(c))(3) organizations) or in section 5	27, relating to political organi	zations?	ĺ		
а	Trans	fers from the reporting founda	ation to a noncharitable exempt or	ganization of:				ļ
	(1) (Cash				. 1a(1)		X
	(2) (Other assets				1a(2)		Х
b	Other	transactions:						
	(1) S	Sales of assets to a noncharital	ble exempt organization			1b(1)		Х
	(2) F	urchases of assets from a no	ncharitable exempt organization			1b(2)		X
	(3) F	Rental of facilities, equipment,	or other assets			1b(3)		Х
	(4) F	Reimbursement arrangements				1b(4)		X
	(5) L	oans or loan guarantees				1b(5)		X
	(6) F	erformance of services or me	mbership or fundraising solicitation	ons		. 1b(6)		X
C	Sharı	ng of facilities, equipment, ma	ılıng lists, other assets, or paıd en	ployees		. 1c		X
d	If the	answer to any of the above is	"Yes," complete the following sch	edule. Column (b) should alw	ays show the fair market value of	the goods, other as	sets,	
			oundation. If the foundation receiv		e in any transaction or sharing ari	angement, show in		
	colun	nn (d) the value of the goods,	other assets, or services received					
(a)∟	ne no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, tran	sactions, and sharing a	тапдете	ents
	_		N/A					
			·					
	_							
					<u> </u>			
					<u></u>			
2a	ls the	foundation directly or indirect	l tly affiliated with, or related to, one	or more tax-exempt organiz	ations described			
			r than section 501(c)(3)) or in sec	tion 527?		L Yes	LX	No
<u>b</u>	It Ye	s," complete the following sch		(h) Turn of average land	(-) December			
		(a) Name of org	janization	(b) Type of organization	(c) Description	of relationship		
		N/A						
								
		 						
				 				
	- 1.	Inder nenalties of nervine I declare	that I have examined this return. Include	ng accompanying schedulos and :	statements, and to the heat of my know	ledge ————		
Sig He	gn ª		that I have examined this return, including the Declaration of preparer (other that the Declaration of preparer (other that the Declaration of the				he prepar v (see ins	er
		Signature of officer or trustee	· WI WILL	Date	Title			40

Prepager's signature

Check X if

self- employed

Phone no.

5-15-17

Date

(225)927-6811 Form **990-PF** (2016)

P00852016

PTIN

Firm's EIN ► 72-0999988

Paid

Preparer

Use Only

Print/Type preparer's name

JEREMY KLIBERT

Firm's name ► FAULK & WINKLEK,

Firm's address ▶ 6811 JEFFERSON HIGHWAY

BATON ROUGE, LA 70806

BATON ROUGE STATE FAIR FOUNDATION

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount contribution status of Name and address (home or business) recipient DAVID SCHOLARSHIP CATHOLIC HIGH SCHOOL FOUNDATION PC 855 HEARTHSTONE DR BATON ROUGE LA 70806 150,000. CYSTIC FIBROSIS FOUNDATION GENERAL PROGRAM PC 10532 SOUTH GLENSTONE PLACE, SUITE C 3,000. BATON ROUGE, LA 70810 FOLDS OF HONOR FOUNDATION PC GENERAL PROGRAM 3833 BERKLEY HILL AVE BATON ROUGE, LA 70809 5,000. FROM HUNGER TO HOPE" GREATER BATON ROUGE FOOD BANK PC CAMPAIGN 5546 CHOCTAW DRIVE 2,000. BATON ROUGE, LA 70805 HERITAGE RANCH PC GENERAL PROGRAM 20090 TUCKER RD ZACHARY LA 70791 1,500. PC GENERAL PROGRAM THE JL FOUNDATION 21223 WATERFRONT EAST DR 4,000. MAUREPAS, LA 70449 HIGH SCHOOL LEADERSHIP LA H.O.B.Y. PC CONFERENCE 4626 JAMESTOWN AVE. BATON ROUGE, LA 70808 1,500. ST. VINCENT DE PAUL PC UNIFORMS FOR KIDS PO BOX 127 BATON ROUGE, LA 70821 10,000. SALVATION ARMY - BATON ROUGE CORPS PC GENERAL PROGRAM PO BOX 15467 5,000. BATON ROUGE, LA 70805 THE LIFE OF A SINGLE MOM PC SINGLE PARENTING 101 PROGRAM 11613 NEWCASTLE AVE., SUITE A BATON ROUGE, LA 70816 SING DFFF PPP 2,000. 325,000. Total from continuation sheets

Part XV

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation **Amount** status of Name and address (home or business) recipient MISSION HEART PC GENERAL PROGRAM 9655 PERKINS RD BATON ROUGE, LA 70810 1,000. CITY OF BATON ROUGE WHOLE SCHOOL, WHOLE GOV PO BOX 1471 CHILD BATON ROUGE, LA 70821 5,000. LSU FOUNDATION PC GENERAL PROGRAM 3838 W. LAKESHORE BATON ROUGE, LA 70808 135,000. Total from continuation sheets

Ł

FORM 990-PF INTER	EST ON SAVING	S AND I	EMPORA	RY CASH	INVESTMENTS	STATEM	ENT	1
SOURCE			(A) REVENUE PER BOOKS		(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME	
CAPITAL ONE RED RIVER BANK			17 1,35	8.	178. 1,358.			78.
TOTAL TO PART I, L		1,536. 1,536.			1,536.			
FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM SEC	URITIES	STATEM	ENT	2
SOURCE CHARLES SCHWAB	GROSS AMOUNT	CAPIT GAIN DIVIDE	IS ENDS 0.	(A) REVENUE PER BOOK	S MENT INCO 2. 52	T- AD ME NET		22.
RAYMOND JAMES TO PART I, LINE 4	29,287.		0.	29,28			29,28	
FORM 990-PF		OTHER	RINCOM	Œ		STATEM	ENT	3
DESCRIPTION			REV	A) ENUE BOOKS	(B) NET INVEST- MENT INCOME	ADJ	C) USTED INCOM	
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS			985,708.		0	9	85,70	8.
TOTAL TO FORM 990-PF, PART I, LINE				985,708.	,708. 0		985,708	

						
FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 4			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
ACCOUNTING FEES	3,169.	2,112.	0.	0.		
TO FORM 990-PF, PG 1, LN 16B	3,169.	2,112.	0.	0.		
FORM 990-PF	TAX	ES	STATEMENT 5			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
TAXES	89.	0.	0.	0.		
TO FORM 990-PF, PG 1, LN 18	89.	0.	0.	0.		
FORM 990-PF	OTHER EXPENSES		STATEMENT 6			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
FAIR EXPENSES OFFICE	485,154.	0.	485,154.	0.		
DUES AND SUBSCRIPTIONS	1,352.		0.	0.		
TO FORM 990-PF, PG 1, LN 23	487,729.	0.	485,154.	0.		

FORM 990-PF U.S. AND STA	ATE/CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT	7
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE	I
RAYMOND JAMES TAX-EXEMPT		x	446,932.	454,04	4.
TOTAL U.S. GOVERNMENT OBLIGATION	ons	_			
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS			446,932.	454,044.	
TOTAL TO FORM 990-PF, PART II,	LINE 10A	- -	446,932.	454,04	4.
FORM 990-PF	CORPORATE	STOCK		STATEMENT	8
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE	I
CHARLES SCHWAB		-	185,854.	185,16	8.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	- -	185,854.	185,16	8.
FORM 990-PF	CORPORATE	BONDS		STATEMENT	9
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE	I
RAYMOND JAMES CORP BONDS		-	230,000.	239,41	2.
TOTAL TO FORM 990-PF, PART II,	LINE 10C	=	230,000.	239,41	2.
FORM 990-PF	OTHER INVES	STMENTS		STATEMENT	10
DESCRIPTION		JATION THOD	BOOK VALUE	FAIR MARKET VALUE	1
RAYMOND JAMES RE INVESTMENT	CC	DST	0.		0.
TOTAL TO FORM 990-PF, PART II,	LINE 13	-	0.		0.
		=			

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			STATEMENT 11	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
J.H. MARTIN PO BOX 15010 BATON ROUGE, LA 70895	CHAIRMAN 1.00	0.	0.	0.
DOUGLAS M. GONZALES PO BOX 15010 BATON ROUGE, LA 70895	SECRETARY 1.00	0.	0.	0.
WARREN WILSON PO BOX 15010 BATON ROUGE, LA 70895	BOARD MEMBER 1.00	0.	0.	0.
GREG EDWARDS PO BOX 15010 BATON ROUGE, LA 70895	BOARD MEMBER 1.00	0.	0.	0.
CLIFF BARTON PO BOX 15010 BATON ROUGE, LA 70895	BOARD MEMBER 1.00	0.	0.	0.
STAN PRUTZ PO BOX 15010 BATON ROUGE, LA 70895	BOARD MEMBER 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	5, PART VIII	0.	0.	0.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 12 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

J.H. MARTIN 11051 MOLLYLEA DRIVE BATON ROUGE, LA 70815

TELEPHONE NUMBER NAME OF GRANT PROGRAM

(225)755-3247 N/A

FORM AND CONTENT OF APPLICATIONS

A GRANT APPLICATION OUTLINE CAN BE FOUND AT THE FOUNDATION'S WEBSITE WWW.GBRSF.COM

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE