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Form **990-PF**

Extended to November 15, 2 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.irs.gov/form990pf.

Department of the Treasury Internal Revenue Service For calendar year 2016 or tax year beginning , and ending Name of foundation A Employer identification number The Wailes Family Foundation 72-1487356 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 11 LaSalle Place 504-524-0770 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here New Orleans, LA 70118 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here 1 Fair market value of all assets at end of year | J Accounting method: | X | Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here (Part I, column (d) must be on cash basis) ▶\$ 9<u>9,057.</u> Analysis of Revenue and Expenses Part I (b) Net investment (c) Adjusted net (d) Disbursements (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not expenses per books for charitable purposes income income necessarily equal the amounts in column (a)) (cash basis only) 8,376 N/A Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 100 100. Statement Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 13,785 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 26,004. 13,785 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications Gross sales less returns 10a and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 22,261 13,885 12 Total Add lines 1 through 11 0 0 ٥. Compensation of officers, directors, trustees, etc Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20, Occupancy 21 ravel, conferences, and meetings 22@Printing and publications 643 643. Stmt 2 0 23 v=Other expenses 24 OTotal operating and administrative cexpenses. Add lines 13 through 23 643 0 643. 25 Contributions, gifts, grants paid 21,500. 21,500. 26 Total expenses and disbursements. 22,143 22,143. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements 118 13,885 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

For	m 99	0-PF(2016) The Walles Family Found			87356 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of yea	
<u>-</u>		Column Should be for early year amounts only	(a) Book Value	(b) Book Value	c) Fair Market Value
		Cash - non-interest-bearing			
i	2	Savings and temporary cash investments			
	3	Accounts receivable ►			
	}	Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶	1		
	5	Grants receivable			
	-	Receivables due from officers, directors, trustees, and other			
	ľ	disqualified persons	1	į	
	,				
	7	Other notes and loans receivable	-		
	_	Less: allowance for doubtful accounts	<u> </u>		
ets	1 -	Inventories for sale or use			
Assets	i	Prepaid expenses and deferred charges			
•	ı	Investments - U.S. and state government obligations			
	b	Investments - corporate stock Stmt 3	12,219.	12,974.	99,057.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
		Investments - other			
	1	Land, buildings, and equipment: basis			
	17	Less accumulated depreciation			
	4-		 		
		Other assets (describe)			
	16	Total assets (to be completed by all filers - see the	10 010	10 074	00 055
_		instructions. Also, see page 1, item I)	12,219.	12,974. 637.	<u>99,057.</u>
	17	Accounts payable and accrued expenses		637.	
	18	Grants payable			
es.	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable			
⊐	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	637.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.		İ	
es S	24	Unrestricted			
Ē	1				
ag	25	Temporarily restricted			
В	26	Permanently restricted			
Š	ĺ	Foundations that do not follow SFAS 117, check here			
Ä	ļ	and complete lines 27 through 31.			
ţ	27	Capital stock, trust principal, or current funds	0.	0.	
šše	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ž	29	Retained earnings, accumulated income, endowment, or other funds	12,219.	12,337.	
Net Assets or Fund Balances	30	Total net assets or fund balances	12,219.	12,337.	
_					
	31	Total liabilities and net assets/fund balances	12,219.	12,974.	
<u> </u>	art	III Analysis of Changes in Net Assets or Fund I	Balances		
_	_				
1		I net assets or fund balances at beginning of year - Part II, column (a), lini	e 30		
	•	st agree with end-of-year figure reported on prior year's return)		1	12,219.
2	Ente	r amount from Part I, line 27a		2	118.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	12,337.
5.	Decr	eases not included in line 2 (itemize)		5	0.
-		net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (b), line 30	6	12,337.
_					Form 990-PF (2016)

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

5 Multiply line 4 by line 3

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

7 Add lines 5 and 6

7 27, 363.

8 Enter qualifying distributions from Part XII, line 4
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.
See the Part VI instructions.

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22,143.

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Pa	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),	or 4948	- see	instr	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)	V				
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1			2	78.
	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).		Ì			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	-			<u>0.</u>
_	Add lines 1 and 2	3			2	<u>78.</u>
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				<u>0.</u>
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	 -		2	<u>78.</u>
	Credits/Payments:					
	2016 estimated tax payments and 2015 overpayment credited to 2016 6a					
	Exempt foreign organizations - tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868) 6c					
	Backup withholding erroneously withheld Table and as we see Add leave Code and Code Table and as we see Add leave Code and Code Table and the code and the code and the code Code and Code an					^
	Total credits and payments. Add lines 6a through 6d	7		—		0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				78.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			4	78.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2017 estimated tax ► Refunder ort VII-A Statements Regarding Activities	1 11				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inte	irvene in		Т —	Yes	No
10	any political campaign?	N VCHC III		1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the defi	nution)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials p		nr.	10	٠.	
	distributed by the foundation in connection with the activities.			-		l
C	Did the foundation file Form 1120-POL for this year?			10		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ O • (2) On foundation managers. ▶ \$	0.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			1		1
	managers. ▶ \$ 0 .					
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 incorpora	tion, or				l
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
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 second and the second state of the s	e state law			v	
-	remain in the governing instrument?			6	X	
1	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Pa	ert XV		7	Λ	
0.	Enter the ctates to which the foundation reports or with which it is registered (see instructions)					İ
04	Enter the states to which the foundation reports or with which it is registered (see instructions)					
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
U	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	or calendar		- 55		
-	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	Jaionoul		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
			Fo	rm 99 0)-PF	

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X

3b

4a

N/A

Form 4720, to determine if the foundation had excess business holdings in 2016.)

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

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (continu	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es 🗶 No	
(2) Influence the outcome of any specific public election (see section 4955); of	r to carry on, directly or indir	ectly,	1	1 1
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio				
4945(d)(4)(A)? (see instructions)		☐ Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or t			1 1
the prevention of cruelty to children or animals?	or oddodional purposos, or		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	tar the exceptions described		3 [21] 110	-
section 53.4945 or in a current notice regarding disaster assistance (see instru	· ·	in riegulations	N/A	5 b
	·		N/A	30
Organizations relying on a current notice regarding disaster assistance check h				1 1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi				
expenditure responsibility for the grant?		I/A ∟ Ye	es L No	
If "Yes," attach the statement required by Regulations section 53 494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			i i
a personal benefit contract?		Ye	s X No	1 1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u> </u>	6b X
If "Yes" to 6b, file Form 8870				ļļ
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🗶 No 📙	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	/	
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their				
(-) 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 account, other
(a) Name and address	to position	enter -0-)	compensation	allowances
Robert P. Wailes	Pres./Treas./	Director		
11 LaSalle Place	i.			
New Orleans, LA 70118	0.00	0.	0.	0.
Martha P. Wailes	Secretary/Dir	ector		
11 LaSalle Place	_		į	
New Orleans, LA 70118	0.00	0.	0.	0.
	Director			
11 LaSalle Place		1	·	
New Orleans, LA 70118	0.00	0.	0.	0.
Robert P. Wailes, III	Director			`
11 LaSalle Place				
New Orleans, LA 70118	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc				<u>·</u>
	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred compensation	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred	account, other allowances
NONE	dovotod to position		Componsacion	anowanioo
ПОПП		1		
		-		
· · · · · · · · · · · · · · · · · · ·				
		 		
		 		
Total number of other employees paid over \$50,000	<u></u>	L		
י סנפו חשווטפו ען טנוופו פוויףוטאַפנים אמוע טאפו שטט,טטט			Form	990-PF (2016)
			1 01111	220 1 (2010)

623551 11-23-16

orm 990-PF (2016) The Wailes Family Foundation		487356 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NO	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced	nformation such as the	Expenses
27/2	, 610.	
1N/A		
3		
4		
	<u></u> <u> </u>	
Part IX-B Summary of Program-Related Investments	4 10	
Describe the two largest program-related investments made by the foundation during the tax year on lines	Tand 2.	Amount
1 N/A		
<u> </u>		
All other program-related investments. See instructions.		
3		

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	62,451.
	Average of monthly cash balances	1b	
	Fair market value of all other assets	10	
ď	Total (add lines 1a, b, and c)	1d	62,451.
е	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	62,451.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	937.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	61,514.
6	Minimum investment return. Enter 5% of line 5	6	3,076.
Р	art XI Distributable Amount (see instructions) (Section 4942(I)(3) and (J)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	3,076.
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.)	l	
C	Add lines 2a and 2b	2c	278.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,798.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,798.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,798.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а		1a	22,143.
þ	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 charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
þ	· · · · · · · · · · · · · · · · · · ·	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	22,143.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	22,143.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies for	r the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				2,798.
2 Undistributed income, if any, as of the end of 2016				<u> </u>
a Enter amount for 2015 only	{		107.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011				
b From 2012				
c From 2013	}			
d From 2014				
e From 2015				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from				-
Part XII, line 4: ►\$ 22,143.				
a Applied to 2015, but not more than line 2a			107.	
b Applied to undistributed income of prior				
years (Election required - see instructions)	į	0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				2,798.
e Remaining amount distributed out of corpus	19,238.	· · · · · · · · · · · · · · · · · · ·		
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	19,238.			
b Prior years' undistributed income. Subtract	23,2000			
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	0.			
9 Excess distributions carryover to 2017.				l
Subtract lines 7 and 8 from line 6a	19,238.			
10 Analysis of line 9:				i
a Excess from 2012				
b Excess from 2013				: :
c Excess from 2014				1
d Excess from 2015				
e Excess from 2016 19,238.			L	50rm 990-DE (2016)

Part XIV Private Operating Fo	Les Family oundations (see ins		I-A guestion 9)	N/A	.87356 Page 10
1 a If the foundation has received a ruling or			111, quodioi10)	N/A	
foundation, and the ruling is effective for					
b Check box to indicate whether the found	•	-	ın saction	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	g louildation described	Prior 3 years	1 4342(J)(3) 01 L14.]
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for	(4) = 1 1		(0,00)	+ (0,-11)	(0) 1000
each year listed					1
b 85% of line 2a			 	 	
c Qualifying distributions from Part XII.					
line 4 for each year listed					
d Amounts included in line 2c not			<u> </u>	 	
used directly for active conduct of					
exempt activities					}
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					į
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					ļ
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)				ļ	ļ————
(3) Largest amount of support from					1
an exempt organization					
Part XV Supplementary Info	rmation (Complet	te this part only	if the foundation	had \$5 000 or m	ore in assets
at any time during the			the realidation		010 111 000015
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who		han 2% of the total con	tributions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed m	ore than \$5,000). (See se	ection 507(d)(2).)	•		·
Robert P. Wailes				····	
b List any managers of the foundation who			(or an equally large port	ion of the ownership of a p	artnership or
other entity) of which the foundation has	a 10% or greater interes	t.			
None					
2 Information Regarding Contribution					
Check here X if the foundation of the foundation makes gifts, grants, etc. (
a The name, address, and telephone numb					<u> </u>
a The name, address, and telephone name	er or e man address or tr	іс регооп то мпоті арр	ications should be addit		
b The form in which applications should b	e submitted and informati	on and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographica	ı areas, charitable fields	, kinds of institutions, or	other factors:	

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation status of Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year Presents Revenue Ctr. None Public 1,500. St. Jude's Children's Research None Public Hospital 1,000. St. Michael's Special School None Public 1,000. Public Trinity Episcopal Church None 7,500. Green Ladies Of Public None 500. See continuation sheet(s) ▶ 3a Total 21 500. **b** Approved for future payment None Total

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Part XVI-A Analysis of Income-Producing Act

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	Cone		Code		
a			-		
b					
c					
d					
e					
f					
g Fees and contracts from government agencies		<u> </u>	 		
2 Membership dues and assessments			L		
3 Interest on savings and temporary cash					
investments			14		
4 Dividends and interest from securities	<u></u>		14	100.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory		L	14	13,785.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
С					
d			1		
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		13,885.	0.
13 Total. Add line 12, columns (b), (d), and (e)					13,885.
(See worksheet in line 13 instructions to verify calculations.)					
	o the Ace	omplishment of Ex		t Dumosoo	
Part XVI-B Relationship of Activities to	o the Acc	omplishment of Ex	temp	t Purposes	
Line No. Explain below how each activity for which income	me is reported	ın column (e) of Part XVI-A	contrib	outed importantly to the accord	nplishment of
▼ the foundation's exempt purposes (other than	by providing fu	inds for such purposes).			
				<u> </u>	
					
		- · · ·		· ·····	
					
					· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·			
		·			
					
					

		Vailes Family			487356	
Part >	XVII Information Re Exempt Organ		s To and Transactions an	nd Relationships With Nonc		
	. *		following with any other organization	, ,		Yes No
			ection 527, relating to political organization of	ations?		
	insfers from the reporting founda Cash	ACO STUDING B OF NOITE	ampt organization of.		1a(1)	x
	Other assets				1a(1) 1a(2)	X
٠,	ner transactions:				1:51-4	,
	Sales of assets to a noncharital	ible exempt organization			1b(1)	X
(2)	Purchases of assets from a nor	ncharitable exempt organiz	zation		1b(2)	X
	Rental of facilities, equipment,				1b(3)	X
	Reimbursement arrangements	i.			1b(4)	X
	Loans or loan guarantees	· · · · · · · · · · · · · · · · · · ·			1b(5)	X
	Performance of services or me				1b(6)	X
	aring of facilities, equipment, mai he answer to any of the above is			rays show the fair market value of the good		x etc
				rays show the fair market value of the good e in any transaction or sharing arrangemei		∃IS,
	umn (d) the value of the goods,			III any nunouonon or oneming an anger a	. Ity onon	
(a) Line no			charitable exempt organization	(d) Description of transfers, transactions,	and sharing arr	angements
		N N	N/A			
	1					
						
				-		
		 				
	-					
····		 				
		 				
		1 The state of the second state of		<u> </u>		
ın s	the foundation directly or indirect section 501(c) of the Code (other Yes," complete the following sche	er than section 501(c)(3)) or	d to, one or more tax-exempt organiza or in section 527?	itions described	Yes	X No
	(a) Name of org		(b) Type of organization	(c) Description of relati	.ionship	
	N/A					
		1				
	Trinder consistes of perium I declare	that I have examined this return	n, including accompanying schedules and st	the heat of my knowledge		
Sign Here	and belief, it is true, correct, and con		(other than taxpayer) is based on all informat		May the IRS direturn with the shown below (s	e preparer (see instr.)?

504-566-9388 Form **990-PF** (2016)

P00849091

Firm's EIN $\triangleright 72-0939710$

Paid

Preparer

Use Only

Preparer's signature

Signature of officer or trustee
Print/Type preparer's name

James E. Ryder, Jr.

Firm's name ► James E. Ryder

Firm's address ► 1010 Common St., Suite 1810 New Orleans, LA 70112 Check _____ if self- employed

Date

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization

Employer identification number

	Tì	ne Wailes Family Foundation	72-1487356				
Organiz	zation type (check o	ne)					
Filers o	f:	Section:					
Form 99	00 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
		527 political organization					
Form 99	90-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						
	-	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile See instructions				
Genera	l Rule						
X		n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II See instructions for determining a contributor.	•				
Special	Rules						
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II.						
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III						
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.						
but it m	caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), ut it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to ertify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

The Wailes Family Foundation

72-1487356

Part I	Contributors (See instructions). Use duplicate copies of Part I	ıf addıtıonal space ıs needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Robert P. Wailes 11 LaSalle Place New Orleans, LA 70118	\$\$	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
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

The Wailes Family Foundation

72-1487356

Part II	Noncash Property (See instructions). Use duplicate copies of P		140/330
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	1,000 Moody's Corp.		
_1			
		\$ 94,270.	12/30/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

ame of orga	anization			Employer identification number			
he Wa	iles Family Foundation			72-1487356			
Part III	* Exclusively religious, charitable, etc., contribute the year from any one contributor. Complete co	lumns (a) through (e) and the follo	WING line entry. For organizations				
	completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	charitable, etc., contributions of \$1,000 o	r less for the year (Enter this info once)	> \$			
(a) No.	Use duplicate copies of Part III if additional	space is needed					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
							
							
-		(e) Transfer of git					
	(-,						
L	Transferee's name, address, and	Relationship of tran	Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Descr	iption of how gift is held			
Part I				·			
		(a) Tanantan at air					
į		(e) Transfer of git	ı				
	Transferee's name, address, and	I ZIP + 4	Relationship of tran	sferor to transferee			
1							
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Descr	iption of how gift is held			
Part I							
-							
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of tran	sferor to transferee			
							
			· ·				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descr	iption of how gift is held			
				-			
-	(a) Transfer of gift						
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
							

Form 990-PF	Dividends	and Inter	est	from Secur	ities	St	atement	1
Source	Gross Amount	Capital Gains Dividend		(a) Revenue Per Books	(b) Net Inves ment Inco		(c) Adjuste Net Ince	
Merrill Lynch	100.		0.	100.	10	00.		
To Part I, line 4	100.	•	0.	100.	10	00.		
Form 990-PF		Other E	xpe	nses		St	atement	2
Description		(a) Expenses Per Books		(b) t Invest- nt Income	(c) Adjusted Net Incom		(d) Charital Purpose	
Broker Service Char Miscellaneous	ges	243. 400.		0.				13.
To Form 990-PF, Pg	1, ln 23 =	643.		0.			64	13.
Form 990-PF		Corporat	e S	tock		St	atement	3
Description				Воо	k Value	Fa	ir Market Value	=
Publically Traded Stock				12,974.		99,0	57.	
Total to Form 990-PF, Part II, line 10b					12,974. 99,05			57.

3 Grants and Contributions Paid During the	Year (Continuation)			
, Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
ashiers Community Fund	None	Public		
				50
Jew Orleans Museum Of Art	None	Public		1,500
The Colony Club Community Fund	None	Public		1,000
Phi Bono Public Foundation	None	Public		1,500
Highlands Chamber Festival	None	Public		500
he Greater New orleans Foundation	None	Public		5,000
Total from continuation sheets				10,00