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Form **990-PF**

EXTENDED TO NOVEMBER 15, 2 Return of Private Foundation 2017

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.

OMB No 1545-0052

Department of the Treasury

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2016 or tax year beginning and ending Name of foundation A Employer identification number JULIA LEE TAUBERT FOUNDATION 75-2548812 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 2304 MIDWESTERN PKWY, STE 206 940-500-4470 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here WICHITA FALLS, TX 76308 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 X 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: F 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 979, 420. (Part I, column (d) must be on cash basis.) ▶\$ Part I | Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income (cash basis only) 78,171 N/A 1 Contributions, gifts, grants, etc., received 2 Check I if the foundation is not required to attach Sch. 8 Interest on savings and temporary cash investments 65 65 STATEMENT Dividends and interest from securities 20,583. 20,583. STATEMENT 5a Gross rents **b** Net rental income or (loss) <98,764. 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 80,500. 0. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances OGDEN b Less Cost of goods sold c Gross profit or (loss) <21,020. STATEMENT 11 Other income 20,648. 12 Total Add lines 1 through 11 <20,965. 3,200. 1,600. 0. Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits Expenses 16a Legal fees STMT 4 4.775. 2,387. **b** Accounting fees 0. c Other professional fees SCANNED NOW 1 4 2017 17 Interest 225 STMT 5 0. 18 Taxes 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings Printing and publications 21 21 Ω. 23 Other expenses STMT 6 Total operating and administrative 8,221 4,008 expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 84,750. 750. 26 Total expenses and disbursements. 92,971 Add lines 24 and 25 4,008 84,750. Subtract line 26 from line 12: <113,936. a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 16,640

623501 11-23-18 LHA For Paperwork Reduction Act Notice, see instructions.

c Adjusted net income (if negative, enter -0-)

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N/A

orm 9	90-PF (2016) JULIA LEE TAUBERT FOUNDA			2548812 Page
Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
Τ.		(a) Book Value	(b) Book Value	(c) Fair Market Value
i	Cash - non-interest-bearing	235,228.	71,387.	71,387
2	Savings and temporary cash investments	233,440.	11,301.	11,301
3	Accounts receivable			
	Less; allowance for doubtful accounts			
4	Pledges receivable			
_	Less: allowance for doubtful accounts			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
,	disqualified persons			
7	Other notes and loans receivable			
	Less: allowance for doubtful accounts			
8	Inventories for sale or use			
9	Prepaid expenses and deferred charges			
	Investments - U.S. and state government obligations	E01 464	627 264	710 603
	Investments - corporate stock STMT 7	591,464.	637,264.	718,693
	Investments - corporate bonds			
11	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
12	Investments - mortgage loans	105 461	100 701	100 210
13	Investments - other STMT 8	195,461.	199,791.	189,316
14	Land, buildings, and equipment basis		-	
	Less accumulated depreciation			
15	Other assets (describe STATEMENT 9)	249.	24.	24
16	Total assets (to be completed by all filers - see the	1 000 400	000 466	070 400
	instructions. Also, see page 1, item I)	1,022,402.	908,466.	979,420
17	Accounts payable and accrued expenses			
18	Grants payable			
19	Deferred revenue			
20	Loans from officers, directors, trustees, and other disqualified persons			
21	Mortgages and other notes payable			
22	Other liabilities (describe)			
			^	
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
24	Unrestricted			
25	Temporarily restricted			
26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here			
	and complete lines 27 through 31.	0	0	
27	Capital stock, trust principal, or current funds	0.	0.	
28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
29	Retained earnings, accumulated income, endowment, or other funds	1,022,402.	908,466.	
30	Total net assets or fund balances	1,022,402.	908,466.	
٠.		1 000 400	000 466	
	Total liabilities and net assets/fund balances III Analysis of Changes in Net Assets or Fund Ba	1,022,402. lances	908,466.	
_				
	al net assets or fund balances at beginning of year - Part II, column (a), line 3	U		1 022 401
•	ist agree with end-of-year figure reported on prior year's return) er amount from Part I, line 27a		2	1,022,402 <113,936
	er increases not included in line 2 (itemize)		3	VII.3, 330

5 Decreases not included in line 2 (itemize) 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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908,466.

4 Add lines 1, 2, and 3

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.

7

47,451.

84,750.

Add lines 5 and 6

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Part VI Excise Tax Based on Investment Income (Section			948 - see I	nstru	ICTIO	ns)	
1a Exempt operating foundations described in section 4940(d)(2), check here 🕨 🗔			ĺľ				
Date of ruling or determination letter: (attach copy of lett							
b Domestic foundations that meet the section 4940(e) requirements in Part V, check of Part I, line 27b	here ▶ X and	d enter 1%	1		1	.66.	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations	enter 4% of Part I, I	ine 12, col. (b).					
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations	only. Others enter	-0-)	2			0.	
3 Add lines 1 and 2			3		1	66.	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	s only. Others enter	-0-)	4			0.	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-							
6 Credits/Payments:							
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a	24.	1				
b Exempt foreign organizations - tax withheld at source	1			ļ			
c Tax paid with application for extension of time to file (Form 8868)	6c	210.				1	
d Backup withholding erroneously withheld	6d		[
7 Total credits and payments. Add lines 6a through 6d	-		7		2	34.	
8 Enter any penalty for underpayment of estimated tax. Check here if Form 222	0 is attached		8				
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		>	9				
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount ove	rpaid	>	10			68.	
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax	•	68. Refunded	11			0.	
Part VII-A Statements Regarding Activities							
1a During the tax year, did the foundation attempt to influence any national, state, or lo	cal legislation or di	d it participate or intervene	เก	Γ	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)?						X	
If the answer is "Yes" to 1a or 1b, attach a detailed description of the act				1b			
distributed by the foundation in connection with the activities							
c Did the foundation file Form 1120-POL for this year?							
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed di	iring the year*			1c		X	
(1) On the foundation. > \$ 0 . (2) On foundation m		0.		'			
e Enter the reimbursement (if any) paid by the foundation during the year for political				'		1	
managers. > \$ 0.	orpononono tax in	pools on toon action				;	
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.				<u> </u>		 -	
3 Has the foundation made any changes, not previously reported to the IRS, in its go	verning instrument	articles of incorporation (nr		1	1	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the	-	artiolog of moorporation, t	•	3		X	
4a Did the foundation have unrelated business gross income of \$1,000 or more during	=			4a		X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	g and year		N/A	4b		 ^ -	
5 Was there a liquidation, termination, dissolution, or substantial contraction during t	he vear?		14, 11	5		X	
If "Yes," attach the statement required by General Instruction T.	no year			-			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) sa	tisfied either				}	j ,	
By language in the governing instrument, or	distica citrici.					!	
 By state legislation that effectively amends the governing instrument so that no m 	nandatory directions	that conflict with the state	. law	'	[·	
remain in the governing instrument?	ianuatory unconon.	s that commet with the state	ICLAA	6		x	
	as " complete Pa	tll cal (c) and Part VI	,	7	X		
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Ye	es, complete rai	tii, coi (c), and Fait Av			Λ	 	
8a Enter the states to which the foundation reports or with which it is registered (see if \mathbf{TX}	nstructions) >	 					
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF	to the Attorney Ger	neral (or designate)		.]	1	
of each state as required by General Instruction G? If "No," attach explanation	· ·	/		86	х	ļ	
9 Is the foundation claiming status as a private operating foundation within the meaning		(i)(3) or 4942(i)(5) for cale	ndar			 	
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If				9		X	
10. Did any nersons become substantial contributors during the tay year? If type a stand			ጥለጥ 10	10	Y		

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

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	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))?	Y6	s X No		
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire				
, any voter registration drive?			es X No	- }	
(3) Provide a grant to an individual for travel, study, or other similar purposes	5?	Y6	s X No	- 1	- }
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section			- }	
4945(d)(4)(A)? (see instructions)		Ye	s X No	}	- }
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or i]	
the prevention of cruelty to children or animals?		Ye	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 Regulatıons	}]
section 53.4945 or in a current notice regarding disaster assistance (see instr	uctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check	here				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax because it mainta	ined	1		
expenditure responsibility for the grant?	N	I/A 🔲 Ye	s No		
If "Yes," attach the statement required by Regulations section 53.494	!5-5(d)		ĺ		
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	- {	1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		<u></u>	6b	X
If "Yes" to 6b, file Form 8870				1	1
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Ye	s 🗓 No		
b if "Yes," did the foundation receive any proceeds or have any net income attrib				7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors		ınagers, Highly	<i>!</i> 		
1 List all officers, directors, trustees, foundation managers and their			(-0.2	,	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	acco	Expense ount, other owances
ROBERT W GOFF, JR	SEC/TREAS				
2301 KELL BLVD		Ì			
WICHITA FALLS, TX 76308	0.00	0.	0.	İ	0.
DONALD J HUPP	PRESIDENT				
2304 MIDWESTERN PKWY, STE 206	7	ľ			
WICHITA FALLS, TX 76308	0.25	3,200.	0.		0.
		}	1	,	
]				
]	}		,	
	<u> </u>	<u> </u>			
2 Compensation of five highest-paid employees (other than those in		enter "NONE."	1.400	r	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) acco allo	Expense ount, other owances
NONE					
	<u></u>				
]				
	1				
]				
Total number of other employees paid over \$50,000					0
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Part VIII Information About Off Paid Employees, and	ficers, Directors, Trustees, Founda Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contract	tors for professional services. If none, ente	er "NONE."	
(a) Name and address of each	person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total number of others receiving over \$50,000 fo	r professional services		> 0
Part IX-A Summary of Direct Cl	naritable Activities		
List the foundation's four largest direct charitable number of organizations and other beneficiaries s N/A	activities during the tax year. Include relevant statis erved, conferences convened, research papers pro	stical information such as the duced, etc.	Expenses
2			
3			
Part IX-B Summary of Program-	Related Investments ents made by the foundation during the tax year or	n lines 1 and 2	Amount
I N/A	one made by the foundation during the aix year of	Timo Tuto E.	711100111
2			
All other program-related investments. See instru	ctions.		
Total Add lines 1 through 3	_ _ 		

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee instructions.)
1	Fair market Value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	783,119.
	Average of monthly cash balances	1b	153,307
	Fair market value of all other assets	1c	137.
đ	Total (add lines 1a, b, and c)	1d	936,563.
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	936,563.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	14,048.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	922,515.
6	Minimum investment return. Enter 5% of line 5	6	46,126.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	46,126.
2a	100		
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	166.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	45,960.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	45,960.
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	45,960.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	84,750.
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 charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	·
þ	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	84,750.
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	166.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	84,584.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for t	he section

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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				45,960.
2 Undistributed income, if any, as of the end of 2016				237500.
a Enter amount for 2015 only			20,954.	
b Total for prior years:			20,752.	
S results processed		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011				
b From 2012				
c From 2013				
d From 2014				
e From 2015		ł		
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from]			
Part XII, line 4: ► \$ 84,750.				
a Applied to 2015, but not more than line 2a			20,954.	<u></u>
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)				
d Applied to 2016 distributable amount				45,960.
e Remaining amount distributed out of corpus	17,836.			
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	17,836.			
b Prior years' undistributed income. Subtract	17,030.			
-		0.		
line 4b from line 2b	·			
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				
	^	ľ	ļ	
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.	15 000			
Subtract lines 7 and 8 from line 6a	17,836.			
10 Analysis of line 9:				
a Excess from 2012				
b Excess from 2013				
c Excess from 2014		}		
d Excess from 2015				
e Excess from 2016 17,836.				_

Form 990-PF (2016) JULIA L Part XIV Private Operating F	EE TAUBERT		II.A guestion 9)	75-25 N/A	48812 Page 10
1 a If the foundation has received a ruling of			II-A, question 3)	N/A	
foundation, and the ruling is effective for					
b Check box to indicate whether the found		-	in section	4942(j)(3) or 49)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	Todalan Goodiso	Prior 3 years	, <u>10 12()/(0/ 01 </u>	
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for	 		 	 	
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,			 	 	
line 4 for each year listed					
d Amounts included in line 2c not			 		
used directly for active conduct of]			
exempt activities		l			
e Qualifying distributions made directly			<u> </u>	 	
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:(1) Value of all assets					
' '	 	<u> </u>		 	
(2) Value of assets qualifying under section 4942()(3)(B)(i)	 				
b "Endowment" alternative test - enter			 		<u> </u>
2/3 of minimum investment return			1		
shown in Part X, line 6 for each year	Ĺ				
listed c "Support" alternative test - enter:			 	 	
(1) Total support other than gross	 				
investment income (interest,					
dividends, rents, payments on					
securities loans (section		1		}	
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)		 		+	
(3) Largest amount of support from an exempt organization		}			
(4) Gross investment income			<u>-</u>	 	
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5 000 or me	ore in assets
at any time during t					,, , , , , , , , , , , , , , , , , , ,
1 Information Regarding Foundatio					·
a List any managers of the foundation wh	· ·	than 2% of the total cor	atributions received by the	foundation before the clo	se of any tay
year (but only if they have contributed in			in buttons received by the	, roundation before the cio	oc or arry tax
NONE		. ,, , ,			
b List any managers of the foundation wh	n own 10% or more of th	ne stock of a cornoration	(or an equally large port	on of the ownership of a n	artnership or
other entity) of which the foundation has			(or an equally large port	on or the emilerant of a p	artifor strip of
NONE					
2 Information Regarding Contributi	on Grant Gift Loan	Scholarship etc. F	rograms.		
Check here X if the foundation of				not accept unsolicited reni	ests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber or e-mail address of	the person to whom app	lications should be addre	ssed:	
2 7.10 1.2.10, 2.2.2.2.2, 2.1.2 1.1.2, 2.1.2					
b The form in which applications should b	e submitted and informa	ition and materials they	should include:		
c Any submission deadlines:					
			- London of the control	abba da ab	
d Any restrictions or limitations on awards	s, such as by geographic	ai areas, charitable field:	s, kinds of institutions, or	other factors:	

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution ' Name and address (home or business) or substantial contributor recipient a Paid during the year **OPERATIONS** 501(C)(3) BOYS & GIRLS CLUB OF WICHITA FALLS NONE 1318 SIXTH STREET WICHITA FALLS TX 76301 7,000. 501(C)(3) WILSHIRE BAPTIST CHURCH NONE **OPERATIONS** 4316 ABRAMS ROAD DALLAS TX 75214 2,000, ST. THOMAS AQUINAS CHURCH NONE 501(C)(3) **OPERATIONS** 6306 KENWOOD DALLAS, TX 75214 1,000. NORTH TEXAS REHABILITATION CENTER NONE 501(C)(3) OPERATIONS 1005 MIDWESTERN PKWY 3,000. WICHITA FALLS, TX 76302 NONE 501(C)(3) OPERATIONS PROJECT BACK TO SCHOOL PO BOX 9700 7 000 WICHITA FALLS TX 76308 SEE CONTINUATION SHEET(S) **▶** 3a Total 84,750. b Approved for future payment NONE Total **▶** 3b

·					
Form 990-PF (2016) JULIA LEE TAU	BERT FOUNI	DATION		75-	25 48812 Page
Part XVI-A Analysis of Income-Prod	lucing Activitie	es			
Enter gross amounts unless otherwise indicated.	Unrelated t	ousiness income	Excluded I	oy section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
C					
d					
e					
f					
g Fees and contracts from government agencies					
Mambarabia dues and assessments	-				

·	_
g Fees and contracts from government agencies	
2 Membership dues and assessments	
3 Interest on savings and temporary cash	
investments	
4 Dividends and interest from securities	
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

9 Net income or (loss) from special events

10 Gross profit or (loss) from sales of inventory 11 Other revenue:

a	
b	
C	
4	

12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)

14 20,583. 211110 <21,020.> <98,764. 16 <21,020.> <78,116.> <99,136.

14

65.

(See worksheet in line 13 instructions to verify calculations.) Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼_	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Firm's address ► 2304 MIDWESTERN PKWY, STE 206 WICHITA FALLS, TX 76308

orm 99					<u>UNDATION</u>		75-2548			<u>ge 13</u>
Part :	XVII	Information Re Exempt Organ		insfers To	and Transactions a	and Relations	hips With Nonchar	itable	e	
1 Did	the org	jànization directly or indi	irectly engage in ar	ny of the following	ng with any other organization	on described in sect	ion 501(c) of	i	Yes	No
the	Code (other than section 501(c	;)(3) organizations)) or in section 53	27, relating to political organ	nzations?				
a Tra	nsfers i	from the reporting found	lation to a nonchar	itable exempt or	ganization of:			1	}	
(1)	Cash							1a(1)		X
(2)	Other	assets						1a(2)		X
b Oth	er trans	sactions:								
(1)	Sales	of assets to a noncharita	able exempt organı	zation				16(1)		_X_
(2)	Purch	ases of assets from a no	oncharitable exemp	t organization				15(2)		X
(3)	Renta	l of facilities, equipment,	, or other assets					1b(3)		X
(4)	Reimt	oursement arrangements	3					1b(4)		X
(5)	Loans	or loan guarantees						1b(5)		X
(6)	Perfor	mance of services or me	embership or fundi	raising solicitation	ons			1b(6)		X
c Sha	aring of	facilities, equipment, ma	ailing lists, other as	ssets, or paid em	nployees			1c		X
d if ti	he answ	er to any of the above is	Yes," complete th	e following sch	edule. Column (b) should al	ways show the fair r	market value of the goods, o	ther ass	sets,	
					red less than fair market valu					
col	umn (d) the value of the goods,	, other assets, or se	ervices received.	•					
a) Line n	0	(b) Amount involved	(c) Name	of noncharitable	e exempt organization	(d) Description	n of transfers, transactions, and s	haring ar	rangeme	nts
				N/A						
					······································					
			Ţ		<u> </u>					
			1							
			1							
			1							
										
			1							
									-	
		idation directly or indirec 501(c) of the Code (othe	• •	•	e or more tax-exempt organition 5272	zations described		Yes	X] No
		mplete the following sch		(0)(0)) 01 000			_			,
<u> </u>	100, 00	(a) Name of org			(b) Type of organization		(c) Description of relationsh	ıp		
		N/A	<u> </u>	·		-	}	· <u>·</u>		
										
					 					
-						 				
	Under	penalties of perjury, I declare	that I have examined	this return, includi	ng accompanying schedules and	statements, and to the	best of my knowledge			
Sign Here		Donal	17 Hp	preparer (other that	an taxpayer) is based on all inform	PRESI	retui show	n with th	discuss to e prepare (see inst	3.
	Sign	ature of officer or trustee		• 	<u>Date</u>	Title				_
		Print/Type preparer's n	ame	Preparer's s	signature	Date	Check if PTIN			
.				1800	211.0	1116117	self- employed			
Paid		KAYLA R HU Firm's name ► HUF	JPP, CPA	sayla	. R Hupp	1110111		<u>.683</u>		
Prepa		Firm's name 🕨 HUP	PP & HUPP	P, PC	- 1		Firm's EIN ► 81-51	.268	12	

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

2016

75-2548812 JULIA LEE TAUBERT FOUNDATION Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated 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 Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions **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 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), but 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 certify 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

JULIA LÈE TAUBERT FOUNDATION

75-2548812

Part I`	Contributors	(See instructions).	Use duplicate copies	of Part I if addition	al space is needed.
---------	--------------	---------------------	----------------------	-----------------------	---------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JULIA LEE TAUBERT CHARITABLE LEAD TRUST 2304 MIDWESTERN PKWY, STE 206 WICHITA FALLS, TX 76308	\$ 78,171.	Person X Payroll
(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 Onncash 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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash 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)

Name of organization

Employer identification number

JULIA LEE TAUBERT FOUNDATION

75-2548812

Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) (c) (d) No. (b) FMV (or estimate) Date received from Description of noncash property given (See instructions) Part I (a) (c) (d) No. (b) FMV (or estimate) **Date received** from Description of noncash property given (See instructions) Part I (a) (c) (d) No. (b) FMV (or estimate) **Date received** from Description of noncash property given (See instructions) Part I (a) (c) (d) No. (b) FMV (or estimate) Date received from Description of noncash property given (See instructions) Part I (a) (c) (d) No. (b)

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

Description of noncash property given

Date received

FMV (or estimate)

(See instructions)

from

Part 1

Name of org	ganization			Employer identification number				
JULIA Part III	LEE TAUBERT FOUNDATION Exclusively religious, charitable, etc., cont	ributions to organizations described	l in section 501(c)(7)	75-2548812 , (8), or (10) that total more than \$1,000 for				
,	the year from any one contributor. Complete (completing Part III, enter the total of exclusively religious)	s, charitable, etc., contributions of \$1,000 c	WING line entry. For or r less for the year (Enterth	ganizations Is info once) \$				
(a) No.	Use duplicate copies of Part III if addition	al space is needed.						
from Part I	(b) Purpose of gift	(c) Use of gift	(4	d) Description of how gift is held				
Ì								
ŀ		(e) Transfer of gi	 ft					
		.,						
).	Transferee's name, address, a	nd ZIP + 4	Relationship	of transferor to transferee				
ļ								
(a) Na								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(0	d) Description of how gift is held				
Parti		 						
Ì								
f		(e) Transfer of gi	ft					
Ì	(c) transier or girt							
}	Transferee's name, address, a	nd ZIP + 4	Relationship	of transferor to transferee				
1								
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(4	d) Description of how gift is held				
								
		(e) Transfer of gi	ft					
}	Transferee's name, address, a	nd ZIP + 4	Relationship	of transferor to transferee				
1	· 							
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(0	d) Description of how gift is held				
ſ		(e) Transfer of gi	ft					
			5.1					
}	Transferee's name, address, a	na 214 + 4	Helationshij	of transferor to transferee				
ļ								
	<u></u>							

JULIA LEE TAUBERT FOUNDATION **75-2548812** Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient OPERATIONS HANDS TO HANDS NONE 501(C)(3) PO BOX 4641 WICHITA FALLS TX 76308 4.000. SCOTTISH RITE HOSPITAL NONE 501(C)(3) OPERATIONS 2222 WELBORN ST DALLAS TX 75219 750, 501(C)(3) SHRINERS BURN HOSPITAL NONE OPERATIONS 815 MARKET ST 2,500. GALVESTON TX 77550 OUR LADY QUEEN OF PEACE CATHOLIC NONE 501(C)(3) OPERATIONS CHURCH 4040 YORK ST 2,000. WICHITA FALLS TX 76309 NONE 501(C)(3) OPERATIONS CASA OF NWA 3825 CAWOOD LANE SPRINGDALE, AR 72762 1,000. WOUNDED WARRIORS NONE 501(C)(3) OPERATIONS PO BOX 758517 2,000. TOPEKA KS 66675 CAL FARLEY'S BOYS RANCH NONE 501(C)(3) OPERATIONS PO BOX 1890 AMARILLO, TX 79174 3,000. NONE 501(C)(3) OPERATIONS NOCONA MINISTRIES PO BOX 214 NOCONA TX 76255 1,000, 501(C)(3) INHERITANCE OF HOPE NONE OPERATIONS PO BOX 90 PISGAH FOREST NC 28768 2,500,

501(C)(3)

OPERATIONS

7,583.

64.750.

PO BOX 1208 FORTSON, GA 31808

SPASTIC PARAPLEGIA FOUNDATION

Total from continuation sheets

NONE

75-2548812

JULIA LEE TAUBERT FOUNDATION

Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of Amount any foundation manager Name and address (home or business) or substantial contributor recipient UNITED REGIONAL HEALTH CARE NONE 501(C)(3) OPERATIONS FOUNDATTON 1600 11TH STREET WICHITA FALLS TX 76301 6,500. CATHOLIC CHARTTIES 501(C)(3) OPERATIONS NONE 1504 TENTH STREET 2,500. WICHITA FALLS, TX 76301 CHURCH OF THE HEAVENLY REST NONE 501(C)(3) OPERATIONS 602 MEANDER STREET ABILENE TX 79602 750. COMMUNITY FOUNDATION OF ABILENE NONE 501(C)(3) OPERATIONS PO BOX 1001 ABILENE TX 79604 5,167. MIDWESTERN STATE UNIVERSITY NONE 501(C)(3) OPERATIONS 3410 TAFT BLVD 6,000. WICHITA FALLS, TX 76308 ST JOSEPH'S INDIAN SCHOOL NONE 501(C)(3) OPERATIONS PO BOX 300 1,000. CHAMBERLAIN, SD 57326 ST BENEDICTS ORTHODOX CHURCH NONE 501(C)(3) OPERATIONS 3080 OLD SEYMOUR ROAD WICHITA FALLS, TX 76309 1,500. NONCONA RURAL FIRE DEPARTMENT NONE 501(C)(3) OPERATIONS 101 COOK STREET NOCONA, TX 76255 1,500. MONTAGUE COWBOY CHURCH NONE 501(C)(3) OPERATIONS PO BOX 1536 BOWIE, TX 76230 2,000. CENTRAL METHODIST CHURCH NONE 501(C)(3) OPERATIONS 6 W DICKSON ST FAYETTEVILLE AR 72701 2,000. Total from continuation sheets

Part XV

Supplementary Information

75-2548812

JULIA LEE TAUBERT FOUNDATION

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient Purpose of grant or contribution show any relationship to Foundation Amount any foundation manager or substantial contributor status of Name and address (home or business) recipient NONE 501(C)(3) ST LABRE INDIAN SCHOOL OPERATIONS 1000 TONGUE RIVER ROAD ASHLAND MT 59004 1,000. 501(C)(3) ST JUDE'S CHILDREN'S RESEARCH NONE OPERATIONS HOSPITAL PO BOX 1000 MEMPHIS TN 38148 2,000, ST JAMES EPISCOPAL CHURCH NONE 501(C)(3) OPERATIONS VIA BERNADO RUCELLAI, 9 50123 FLORENCE ITALY 4 000. RATHGEBER HOSPITALITY HOUSE NONE 501(C)(3) OPERATIONS 1615 12TH STREET 2,500. WICHITA FALLS, TX 76301 Total from continuation sheets

FORM 990-PF INTERE	ST ON SAVIN	IGS AND TEN	IPORARY	CASH I	NVESTMENTS	STATEMENT	1
SOURCE	REVE			(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME		
MERRILL LYNCH				65.			
TOTAL TO PART I, LI				65.			
FORM 990-PF	DIVIDENDS	AND INTER	REST FRO	OM SECU	RITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAI GAINS DIVIDENI	RI	(A) EVENUE R BOOKS	(B) NET INVEST MENT INCOM		
MERRILL LYNCH	20,583.		0.	20,583	. 20,583	3.	
TO PART I, LINE 4	20,583.		0.	20,583	20,583	3.	
FORM 990-PF		OTHER]	NCOME			STATEMENT	3
DESCRIPTION			(A) REVENT PER BOO		(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOI	
BREITBURN ENERGY PA	RTHERS LP		<2	1,020.>	0.		
TOTAL TO FORM 990-P	F, PART I,	LINE 11	<23	1,020.>	0.	,	
FORM 990-PF		ACCOUNT	ING FEES	S		STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI E PURPOSI	
ACCOUNTING FEES	_	4,775	•	2,387.	 _		0.
TO FORM 990-PF, PG	1, LN 16B	4,775	 ·	2,387.			0.
	=						

. <u></u>					
FORM 990-PF	TAXES			STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
FEDERAL INCOME TAXES	225.	0	•	0.	
FO FORM 990-PF, PG 1, LN 18	225.	0		0.	
FORM 990-PF	OTHER E	XPENSES		STATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
INVESTMENT FEES	21.	21	•	0.	
TO FORM 990-PF, PG 1, LN 23	21.	21		0.	
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 7	
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE	
CORPORATE STOCKS			637,264.	718,693.	
TOTAL TO FORM 990-PF, PART I	718,693.				
FORM 990-PF	M 990-PF OTHER INVESTMENTS			STATEMENT 8	
DESCRIPTION		LUATION ETHOD B	OOK VALUE	FAIR MARKET VALUE	
MUTUAL FUNDS		FMV	199,791.	189,316.	
TOTAL TO FORM 990-PF, PART I	I, LINE 13		199,791.	189,316.	

FORM 990-PF	OTHER ASSETS	STATEMENT 9 FAIR MARKET VALUE		
DESCRIPTION	BEGINNING OF END OF YEAR YR BOOK VALUE BOOK VALUE			
PREPAID FEDERAL INCOME TAX	249.	24.		24.
TO FORM 990-PF, PART II, LINE 15	249.	24.		24.
	STANTIAL CONTRIE VII-A, LINE 10	BUTORS	STATEMENT	10
NAME OF CONTRIBUTOR	ADDRESS			
	2304 MIDWESTERN PKWY, STE 206			
JULIA LEE TAUBERT CHARITABLE LEAD TRUST	2304 MIDWESTE	ERN PKWY, STE 20	06	