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For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016

Name of foundation ROBERT S AND JOYCE PATE CAPPER CHARITABLE FOUNDATION		A Employer identification number 75-2692199	
Number and street (or P O box number if mail is not delivered to street address) 48 VALLEY RIDGE ROAD		Room/suite	B Telephone number (see instructions) (817) 738-8600
City or town, state or province, country, and ZIP or foreign postal code FORT WORTH, TX 761073109		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <div><input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 850,833	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis )	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	92,734			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments . . . . .	2	2		
	4 Dividends and interest from securities . . . . .	24,119	24,119		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	72,182			
	b Gross sales price for all assets on line 6a _____ 142,907				
	7 Capital gain net income (from Part IV, line 2) . . . . .		72,182		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .	760	0		
	12 Total. Add lines 1 through 11 . . . . .	189,797	96,303		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .	2,785	2,785		0
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . . .	132	0		0
	19 Depreciation (attach schedule) and depletion . . . . .	18	0		
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	3,869	618		0
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	6,804	3,403		0
	25 Contributions, gifts, grants paid . . . . .	121,496			121,496
	26 Total expenses and disbursements. Add lines 24 and 25	128,300	3,403		121,496
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	61,497			
	b Net investment income (if negative, enter -0-)		92,900		
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1	Cash—non-interest-bearing . . . . .	10,688	22,220	22,220		
	2	Savings and temporary cash investments . . . . .	14,665	16,737	16,737		
	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 (attach schedule) (see instructions) . . . . .					
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____					
	8	Inventories for sale or use . . . . .					
	9	Prepaid expenses and deferred charges . . . . .					
	10a	Investments—U S and state government obligations (attach schedule)	119,970	119,970	107,802		
	b	Investments—corporate stock (attach schedule) . . . . .	445,819	438,517	620,868		
	c	Investments—corporate bonds (attach schedule) . . . . .					
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	12	Investments—mortgage loans . . . . .					
	13	Investments—other (attach schedule) . . . . .	20,988	21,494	83,206		
	14	Land, buildings, and equipment basis ▶ _____ 1,148 Less accumulated depreciation (attach schedule) ▶ _____ 1,133	34	15	0		
15	Other assets (describe ▶ _____)						
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	612,164	618,953	850,833			
Liabilities	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 (attach schedule) . . . . .					
	22	Other liabilities (describe ▶ _____)					
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0			
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/></b> <b>and complete lines 24 through 26 and lines 30 and 31.</b>						
	24	Unrestricted . . . . .					
	25	Temporarily restricted . . . . .					
	26	Permanently restricted . . . . .					
	<b>Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/></b> <b>and complete lines 27 through 31.</b>						
	27	Capital stock, trust principal, or current funds . . . . .	562,209	562,209			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0			
	29	Retained earnings, accumulated income, endowment, or other funds	49,955	56,744			
	30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	612,164	618,953			
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	612,164	618,953				

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	612,164
2	Enter amount from Part I, line 27a . . . . .	2	61,497
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3 . . . . .	4	673,661
5	Decreases not included in line 2 (itemize) ▶ _____	5	54,708
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	618,953

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss) <div style="float: right; font-size: small;">             { If gain, also enter in Part I, line 7              If (loss), enter -0- in Part I, line 7           } </div>	<b>2</b>	72,182
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	<b>3</b>	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	180,294	860,148	0 209608
2014	138,923	942,207	0 147444
2013	109,920	906,412	0 121269
2012	74,698	793,646	0 094120
2011	100,978	775,980	0 130130

<b>2</b> Total of line 1, column (d)	<b>2</b>	0 702571
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	0 140514
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	<b>4</b>	808,701
<b>5</b> Multiply line 4 by line 3	<b>5</b>	113,634
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	929
<b>7</b> Add lines 5 and 6	<b>7</b>	114,563
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	121,496

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

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	929
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	929
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	929
<b>6</b>	Credits/Payments		
<b>a</b>	2016 estimated tax payments and 2015 overpayment credited to 2016	<b>6a</b>	360
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	360
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . ▶	<b>9</b>	569
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . ▶	<b>10</b>	
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2017 estimated tax</b> ▶ <b>Refunded</b> ▶	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ 0 (2) On foundation managers ▶ \$ _____ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____ 0		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>	No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	Yes
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ TX _____		
<b>b</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? <i>If "No," attach explanation</i> .	<b>8b</b>	Yes
<b>9</b> 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)? <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions). . . . .	<b>11</b>		<b>No</b>
<b>12</b>	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) . . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ▶ <u>ROBERT S CAPPER JOYCE PATE CAPPER</u> Telephone no ▶ <u>(817) 738-8600</u>			

Located at ▶ 48 VALLEY RIDGE ROAD FORT WORTH TX ZIP+4 ▶ 761073109

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/>	<b>15</b>	
<b>16</b>	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	<b>16</b>	<b>Yes</b> <b>No</b>
See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ▶			

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(6)	Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? . . . . . <input type="checkbox"/>	<b>1b</b>		
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? . . . . . <input type="checkbox"/>	<b>1c</b>		<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
<b>a</b>	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions) . . . . . <input type="checkbox"/>	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016). . . . . <input type="checkbox"/>	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	<b>4b</b>		<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (Continued)

<b>5a</b> During the year did the foundation pay or incur any amount to <b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> Organizations relying on a current notice regarding disaster assistance check here. <span style="float:right;">▶ <input type="checkbox"/></span> <b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <span style="float:right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span> If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<b>5b</b>		
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> If "Yes" to 6b, file Form 8870	<b>6b</b>		<b>No</b>
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>	<b>7b</b>		

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).</b>				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JOYCE PATE CAPPER 48 VALLEY RIDGE ROAD FORT WORTH, TX 761073109	TRUSTEE----NOMINAL HOURS 0 50	0	0	0
ROBERT S CAPPER 48 VALLEY RIDGE ROAD FORT WORTH, TX 761073109	TRUSTEE----NOMINAL HOURS 0 50	0	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				
<b>Total</b> number of other employees paid over \$50,000. <span style="float:right;">▶</span>				0

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "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 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 statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
<b>1</b> N/A	0
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b> N/A	0
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b> 	0
Total. Add lines 1 through 3 . . . . .	0



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	774,200
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	46,816
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	821,016
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	821,016
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	12,315
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	808,701
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	40,435

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	40,435
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5.	<b>2a</b>	929
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	929
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	39,506
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	39,506
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	39,506

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	121,496
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	121,496
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	<b>5</b>	929
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	120,567

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
<b>1</b> Distributable amount for 2016 from Part XI, line 7				39,506
<b>2</b> Undistributed income, if any, as of the end of 2016				
<b>a</b> Enter amount for 2015 only. . . . .			0	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011. . . . .	62,303			
<b>b</b> From 2012. . . . .	35,415			
<b>c</b> From 2013. . . . .	65,504			
<b>d</b> From 2014. . . . .	93,377			
<b>e</b> From 2015. . . . .	137,987			
<b>f</b> Total of lines 3a through e. . . . .	394,586			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 121,496				
<b>a</b> Applied to 2015, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2016 distributable amount. . . . .				39,506
<b>e</b> Remaining amount distributed out of corpus	81,990			
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	476,576			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions. . . . .		0		
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions. . . . .			0	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017. . . . .				0
<b>7</b> 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			
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions). . . .	62,303			
<b>9</b> Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a. . . . .	414,273			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2012. . . .	35,415			
<b>b</b> Excess from 2013. . . .	65,504			
<b>c</b> Excess from 2014. . . .	93,377			
<b>d</b> Excess from 2015. . . .	137,987			
<b>e</b> Excess from 2016. . . .	81,990			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

<b>1a</b> If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. . . . . ▶					
<b>b</b> Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**

<b>1 Information Regarding Foundation Managers:</b>	
<b>a</b> List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )	
<b>b</b> List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	
<b>2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:</b>	
Check here <input type="checkbox"/> if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.	
<b>a</b> The name, address, and telephone number or e-mail address of the person to whom applications should be addressed JOYCE PATE CAPPER 48 VALLEY RIDGE ROAD FORT WORTH, TX 761073109 (817) 738-8600	
<b>b</b> The form in which applications should be submitted and information and materials they should include WRITTEN	
<b>c</b> Any submission deadlines NONE	
<b>d</b> Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors NONE	

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	121,496
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	0

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	2	
<b>4</b> Dividends and interest from securities. . . . .			14	24,119	
<b>5</b> Net rental income or (loss) from real estate					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .			18	760	
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			18	72,182	
<b>9</b> Net income or (loss) from special events					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal Add columns (b), (d), and (e). . .		0		97,063	0
<b>13 Total.</b> Add line 12, columns (b), (d), and (e). . . . .			<b>13</b>		97,063

(See worksheet in line 13 instructions to verify calculations )

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

## Part XVII

- |       | Yes | No |
|-------|-----|----|
| 1a(1) |     | No |
| 1a(2) |     | No |
| 1b(1) |     | No |
| 1b(2) |     | No |
| 1b(3) |     | No |
| 1b(4) |     | No |
| 1b(5) |     | No |
| 1b(6) |     | No |
| 1c    |     | No |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below (see instr )? ☒ Yes ☐ No

**Paid  
Preparer  
Use Only**

Print/Type preparer's name  PATRICK H ADMIRE	Preparer's Signature	Date  2017-05-12	Check if self-employed <input type="checkbox"/>	PTIN  P00514421
Firm's name ► ADMIRE SANFORD & ASSOCIATES PLLC				Firm's EIN ► 46-1281344
Firm's address ► 3430 HILLDALE ROAD SUITE 100  FORT WORTH, TX 761165414				Phone no (817) 735-1840

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
ROYAL BANK OF SCOTLAND	P	2009-09-30	2016-01-15
CHUBB - FRACTIONAL SHARE	D	2014-12-04	2016-01-19
CHUBB	D	2014-12-04	2016-01-19
ADVANSIX - FRACTIONAL SHARE	D	2013-12-17	2016-10-06
MACQUARIE INFRA	D	2016-11-15	2016-11-18
ENERGY TRANSFER PARTNERS LP	P	2008-06-30	2016-12-31
ENERGY TRANSFER EQUITY LP	P	2007-02-16	2016-12-31

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
9,749		9,712	37
19			19
79,820		36,422	43,398
6			6
51,608		24,564	27,044
1,705			1,705
		27	-27

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			37
			19
			43,398
			6
			27,044
			1,705
			-27

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ALS ASSN - TEXAS CHAPTER 1231 GREENWAY DRIVE 295 IRVING, TX 76038	NONE	PUBLIC CHARITY	UNRESTRICTED	100
AMON CARTER MUSEUM 3501 CAMP BOWIE BLVD FORT WORTH, TX 76107	NONE	PUBLIC CHARITY	UNRESTRICTED	3,000
BALLET CONCERTO 3803 CAMP BOWIE BLVD FORT WORTH, TX 76107	NONE	PUBLIC CHARITY	UNRESTRICTED	200
BARRETT HAVRAN MEMORIAL 1300 HOUSTON STREET FORT WORTH, TX 76102	NONE	PUBLIC CHARITY	UNRESTRICTED	500
BETHEL CONGREGATION 4900 BRIARHAVEN ROAD FORT WORTH, TX 76109	NONE	RELIGIOUS ORGANIZATI	UNRESTRICTED	3,880
BOSQUE CONSERVATORY ARTS CENTER BOX 373 CLIFTON, TX 76634	NONE	PUBLIC CHARITY	UNRESTRICTED	150
BOTANICAL RESEARCH INSTITUTE OF TEXAS 1700 UNIVERSITY DRIVE FORT WORTH, TX 76107	NONE	PUBLIC CHARITY	UNRESTRICTED	100
CAMP JOHN MARC 2824 SWISS AVE DALLAS, TX 75204	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000
CANCER CARE SERVICES 623 S HENDERSON STREET FORT WORTH, TX 76104	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000
CATHOLIC CHARITIES 249 THORNHILL DR FORT WORTH, TX 76115	NONE	PUBLIC CHARITY	UNRESTRICTED	100
COVENANT CLASSICAL SCHOOL 126 N JUDD STREET FORT WORTH, TX 76108	NONE	EDUCATIONAL	UNRESTRICTED	5,000
DOCTORS WITHOUT BORDERS BOX 5022 HAGERSTOWN, MD 21741	NONE	PUBLIC CHARITY	UNRESTRICTED	250
FIRST CHRISTIAN CHURCH 612 THROCKMORTON STREET FORT WORTH, TX 76102	NONE	RELIGIOUS ORGANIZATI	UNRESTRICTED	500
FIRST METHODIST CHURCH 800 W 5TH ST FORT WORTH, TX 76102	NONE	RELIGIOUS ORGANIZATI	UNRESTRICTED	100
FORT WORTH GARDEN CLUB 3330 BOTANIC GARDEN DRIVE FORT WORTH, TX 76107	NONE	PUBLIC CHARITY	UNRESTRICTED	2,600
<b>Total . . . . . ►</b> <b>3a</b>				121,496



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
FORT WORTH MUSEUM OF SCIENCE & HISTORY 1600 GENDY STREET FORT WORTH, TX 76107	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000
FORT WORTH OPERA 1300 GENDY STREET FORT WORTH, TX 76107	NONE	PUBLIC CHARITY	UNRESTRICTED	6,816
FORT WORTH POLICE FOUNDATION P O BOX 17659 FORT WORTH, TX 76102	NONE	PUBLIC CHARITY	UNRESTRICTED	10,000
FORT WORTH PUBLIC LIBRARY 500 W 3RD STREET FORT WORTH, TX 76102	NONE	EDUCATIONAL	UNRESTRICTED	1,100
FORT WORTH SYMPHONY 330 W 4TH STREET FORT WORTH, TX 76102	NONE	PUBLIC CHARITY	UNRESTRICTEDUNRESTRICTED	2,000
FRIENDS OF FTW PUBLIC LIBRARY 500 W 3RD STREET FORT WORTH, TX 76102	NONE	PUBLIC CHARITY	UNRESTRICTED	200
GEORGE BUSH PRESIDENTIAL CENTER BOX 560887 DALLAS, TX 753569733	NONE	PUBLIC CHARITY	UNRESTRICTED	250
GOODFELLOW FUND FORT WORTH PO BOX 1870 FORT WORTH, TX 76101	NONE	SOCIAL WELFARE	UNRESTRICTED	3,000
HILLSDALE COLLEGE 33 E COLLEGE STREET HILLSDALE, MI 492429989	NONE	EDUCATIONAL	UNRESTRICTED	500
HISTORIC FORT WORTHINC 1100 PENN STREET FORT WORTH, TX 76102	NONE	PUBLIC CHARITY	UNRESTRICTED	2,500
HISTORIC PRESERVATION TRUST 1316 PENNSYLVANIA FORT WORTH, TX 76104	NONE	PUBLIC CHARITY	UNRESTRICTED	500
JAMES J WEST ALZHEIMER CENTER 1111 SUMMIT FORT WORTH, TX 76102	NONE	PUBLIC CHARITY	UNRESTRICTED	100
JEWEL CHARITY BALL BOX 472149 FORT WORTH, TX 76147	NONE	PUBLIC CHARITY	UNRESTRICTED	3,000
JUNIOR LEAGUE OF FORT WORTH 255 BAILEY FORT WORTH, TX 76107	NONE	PUBLIC CHARITY	UNRESTRICTED	50
KAY JONES SCHOLARSHIP FUND UTA BOX 19222 600 S WEST STREET STE 100 ARLINGTON, TX 76109	NONE	EDUCATIONAL	UNRESTRICTED	200
Total . . . . . ►				121,496
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
KERA BOX 200224 DALLAS, TX 75320	NONE	PUBLIC CHARITY	UNRESTRICTED	500
KIMBELL ART MUSEUM 3333 CAMP BOWIE BLVD FORT WORTH, TX 76107	NONE	PUBLIC CHARITY	UNRESTRICTED	2,000
LENA POPE HOME 3131 SAGUINET FORT WORTH, TX 76107	NONE	PUBLIC CHARITY	UNRESTRICTED	500
LORDS OF THE STREETS - EPISCOPAL CHURCH 3401 FANNIN ST HOUSTON, TX 77004	NONE	RELIGIOUS ORGANIZATI	UNRESTRICTED	500
MIAMI UNIVERSITY 725 E CHESTNUT STREET OXFORD, OH 45056	NONE	EDUCATIONAL	UNRESTRICTED	500
MUSEUM OF MODERN ART FORT WORTH FOUNDATION 3200 DARNELL FORT WORTH, TX 76107	NONE	PUBLIC CHARITY	UNRESTRICTED	20,100
NATIONAL ASSOCIATION OF WATCH & CLOCK COLLECTORS 513 POPLAR STREET COLUMBIA, PA 17512	NONE	PUBLIC CHARITY	UNRESTRICTED	200
OAKWOOD CEMETERY 701 GRAND AVENUE FORT WORTH, TX 76106	NONE	CEMETERY ASSOCIATION	UNRESTRICTED	100
PERFORMING ARTS FORT WORTH 330 E 4TH ST FORT WORTH, TX 76102	NONE	PUBLIC CHARITY	UNRESTRICTED	500
PHILOSOPHICAL OF TEXAS BOX 160144 AUSTIN, TX 78716	NONE	PUBLIC CHARITY	UNRESTRICTED	600
RIDGLEA PRESBYTERIAN CHURCH 6201 CAMP BOWIE BLVD FORT WORTH, TX 76116	NONE	RELIGIOUS ORGANIZATI	UNRESTRICTED	5,000
SALVATION ARMY PO BOX 99400 FORT WORTH, TX 761990400	NONE	PUBLIC CHARITY	UNRESTRICTED	500
SMILE TRAIN PO BOX 96231 WASHINGTON, DC 200906231	NONE	SOCIAL WELFARE	UNRESTRICTED	200
ST JOHN ANGLICAN CHURCH 2700 MCPHERSON FORT WORTH, TX 76109	NONE	RELIGIOUS ORGANIZATI	UNRESTRICTED	200
TARRANT AREA FOOD BANK BOX 11527 FORT WORTH, TX 76110	NONE	PUBLIC CHARITY	UNRESTRICTED	500
Total . . . . . ► 3a				121,496

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TARRANT COUNTY HISTORICAL SOCIETY BOX 100074 FORT WORTH, TX 76185	NONE	PUBLIC CHARITY	UNRESTRICTED	1,400
TCU ATHLETIC SCHOLARSHIP DRAWER 32924 FORT WORTH, TX 76130	NONE	EDUCATIONAL	SCHOLARSHIP	3,900
TCU LIBRARY FOUNDATION PO BOX 298400 FORT WORTH, TX 76129	NONE	EDUCATIONAL	UNRESTRICTED	100
TCU-CLIBURN PIANO INSTITUTE PO BOX 297500 FORT WORTH, TX 76129	NONE	EDUCATIONAL	UNRESTRICTED	1,000
TEXAS BALLET THEATRE 1540 MALL CIRCLE FORT WORTH, TX 76116	NONE	PERFORMING ARTS	UNRESTRICTED	1,800
TEXAS HEALTH RESOURCES FOUNDATION 512 E LAMAR STE 200 ARLINGTON, TX 76011	NONE	HEALTH EDUCATION	UNRESTRICTED	25,000
TEXAS HISTORICAL ASSN 3001 LAKE AUSTIN BLVD 3116 AUSTIN, TX 78705	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000
TEXAS MEDICAL ASSN ALLIANCE 401 W 15TH STREET AUSTIN, TX 787011680	NONE	HEALTH EDUCATION	UNRESTRICTED	200
THE ART STATION 1616 PARK PLACE FORT WORTH, TX 76110	NONE	PUBLIC CHARITY	UNRESTRICTED	5,500
<b>Total . . . . .</b> ► <b>3a</b>				121,496

**TY 2016 Accounting Fees Schedule**

**Name:** ROBERT S AND JOYCE PATE CAPPER  
CHARITABLE FOUNDATION

**EIN:** 75-2692199

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	2,785	2,785		0

**TY 2016 All Other Program Related Investments Schedule**

**Name:** ROBERT S AND JOYCE PATE CAPPER  
CHARITABLE FOUNDATION  
**EIN:** 75-2692199

Category	Amount
N/A	0

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2016 Depreciation Schedule

**Name:** ROBERT S AND JOYCE PATE CAPPER  
CHARITABLE FOUNDATION

**EIN:** 75-2692199

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
OFFICE EQUIPMENT	2011-05-26	967		SL	5 0000000000000	0	0		
PRINTER	2012-12-12	181	56	SL	5 0000000000000	18	0		

**TY 2016 Investments Corporate Stock Schedule**

**Name:** ROBERT S AND JOYCE PATE CAPPER  
CHARITABLE FOUNDATION

**EIN:** 75-2692199

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
495 CULLEN FROST BANKERS	13,983	43,674
2000 GENERAL ELECTRIC CO	67,140	63,200
1600 ROYAL BANK OF SCOTLAND GROUP PLC	38,848	38,112
700 MCDONALDS CORP	39,256	85,204
1000 KIMBERLY CLARK CORP	54,804	114,120
805 EXXON MOBIL CORP	71,191	72,659
620 AUTOMATIC DATA PROCESSING	36,074	63,724
585 HONEYWELL INTL INC	50,840	67,772
370 CHUBB CORP	41,118	48,884
23 ADVANSIX INC	271	509
200 FACEBOOK INC	24,992	23,010

**TY 2016 Investments Government Obligations Schedule**

**Name:** ROBERT S AND JOYCE PATE CAPPER  
CHARITABLE FOUNDATION

**EIN:** 75-2692199

**US Government Securities - End  
of Year Book Value:**

0

**US Government Securities - End  
of Year Fair Market Value:**

0

**State & Local Government  
Securities - End of Year Book  
Value:**

119,970

**State & Local Government  
Securities - End of Year Fair  
Market Value:**

107,802



**TY 2016 Investments - Other Schedule**

**Name:** ROBERT S AND JOYCE PATE CAPPER  
CHARITABLE FOUNDATION

**EIN:** 75-2692199

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
1600 ENERGY TRANSFER PARTNERSHIP	AT COST	11,978	71,620
600 ENERGY TRANSFER EQUITY	AT COST	9,516	11,586

**TY 2016 Land, Etc.  
Schedule**

**Name:** ROBERT S AND JOYCE PATE CAPPER  
CHARITABLE FOUNDATION

**EIN:** 75-2692199

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
OFFICE EQUIPMENT	967	967	0	
PRINTER	181	165	16	

**TY 2016 Other Decreases Schedule**

**Name:** ROBERT S AND JOYCE PATE CAPPER  
CHARITABLE FOUNDATION

**EIN:** 75-2692199

Description	Amount
DIFFERENCE BETWEEN BASIS & FMV OF CONTRIBUTED STOCK THAT WAS SOLD	54,708

**TY 2016 Other Expenses Schedule**

**Name:** ROBERT S AND JOYCE PATE CAPPER  
CHARITABLE FOUNDATION

**EIN:** 75-2692199

**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ENERGY TRANSFER PARTNERS	2,996	0		0
ENERGY TRANSFER EQUITY LP	255	0		0
OFFICE EXPENSE	118	118		0
REPAIRS & MAINTENANCE	500	500		0

**TY 2016 Other Income Schedule**

**Name:** ROBERT S AND JOYCE PATE CAPPER  
CHARITABLE FOUNDATION

**EIN:** 75-2692199

**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
EXCISE TAX REFUND	760	0	760

**TY 2016 Taxes Schedule**

**Name:** ROBERT S AND JOYCE PATE CAPPER  
CHARITABLE FOUNDATION

**EIN:** 75-2692199

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	132	0		0

<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF)  Department of the Treasury Internal Revenue Service	<b>Schedule of Contributors</b>  ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> .	OMB No 1545-0047  <b>2016</b>
	<b>Name of the organization</b> ROBERT S AND JOYCE PATE CAPPER CHARITABLE FOUNDATION	<b>Employer identification number</b> 75-2692199

Organization type (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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 other 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<sup>1</sup>/<sub>3</sub>% 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. Do not 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 is not covered by the General Rule and/or the Special Rules does not 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> ROBERT S AND JOYCE PATE CAPPER CHARITABLE FOUNDATION	<b>Employer identification number</b> 75-2692199
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<b>Part I</b> <b>Contributors</b> (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOYCE PATE CAPPER 48 VALLEY RIDGE ROAD  FORT WORTH, TX 76107	\$ 51,994	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input checked="" type="checkbox"/> (Complete Part II for noncash contributions )
2	ROBERT S CAPPER 48 VALLEY RIDGE ROAD  FORT WORTH, TX 76107	\$ 24,992	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input checked="" type="checkbox"/> (Complete Part II for noncash contributions )
3	ROBERT S CAPPER 48 VALLEY RIDGE ROAD  FORT WORTH, TX 76107	\$ 9,948	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input checked="" type="checkbox"/> (Complete Part II for noncash contributions )
4	ROBERT S CAPPER 48 VALLEY RIDGE ROAD  FORT WORTH, TX 76107	\$ 5,800	<b>Person</b> <input checked="" type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	<b>Person</b> <input type="checkbox"/> <b>Payroll</b> <input type="checkbox"/> <b>Noncash</b> <input type="checkbox"/> (Complete Part II for noncash contributions )



<b>Name of organization</b> ROBERT S AND JOYCE PATE CAPPER CHARITABLE FOUNDATION	<b>Employer identification number</b> 75-2692199
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<b>Part II Noncash Property</b>			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	650 SHARES MACQUARIE INFRASTRUCTURE CORP	\$ 51 994	2016-11-14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	200 SHARES FACEBOOK	\$ 24 992	2016-08-24
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	600 UNITS ENERGY TRANSFER EQUITY LP	\$ 9 948	2016-09-29
(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
		\$	

**Name of organization**ROBERT S AND JOYCE PATE CAPPER  
CHARITABLE FOUNDATION**Employer identification number**

75-2692199

**Part III** *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ► \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	