CHANGE IN ACCOUNTING PERIOD
Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

2016

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For cal	endar year 2016 or tax year beginnin	g	7/01 , 2016	, and ending 12	2/3	1 , 2016	
HARO	LD B & ELEANOR M CAMEROI	N FOU	NDATION		Α	Employer identification num 75–2699508	
	POUNDS AVENUE				В	Telephone number (see inst (903) 533-940	•
TYLE	R, TX 75701			·	С	If exemption application is	pending, check here 🕨 🔲
G Che	eck all that apply Initial return Final return	-	Initial return of a form Amended return	mer public charity	D	1 Foreign organizations, chec	k here
H Che	Address chan		Name change (c)(3) exempt private f	foundation	ł	2 Foreign organizations meet here and attach computation	
	Section 4947(a)(1) nonexempt chai	ritable t	rust Other taxable	private foundation	E	If private foundation status under section 507(b)(1)(A)	
	n Part II, column (c), line 16)		ounting method X C		F	If the foundation is in a 60-	-month termination
	162,217.	(Part I,	column (d) must be or	n cash basis)	<u> </u>	under section 507(b)(1)(B)	, check here
Part I	Analysis of Revenue and Expenses (The total of amounts a columns (b), (c), and (d) may not sarily equal the amounts in column (see instructions).)	neces-	(a) Revenue and expenses per books	(b) Net investment income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received (attach sche	dula)	5,000.				
2017	2 Check ► if the foundation is not required to at		3,000.				
7	3 Interest on savings and temporary cash investments		1.		1.	N/A	
	4 Dividends and interest from securities		1,977.	1,97	77.		
e	5 a Gross rents b Net rental income						
	or (loss)	<u> </u>					
Σ, E	6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a						
Ç Ė	7 Capital gain net income (from Part IV, line	e 2)					
¥ N	8 Net short-term capital gain 9 Income modifications						
CANNED	10 a Gross sales less						
N.	returns and allowances						
() ()	b Less Cost of goods sold						
90	C Gross profit or (loss) (attach schedule).						
	11 Other income (attach schedule)						
	12 Total Add lines 1 through 11		6,978.	1,97	78.		
	Compensation of officers, directors, truste	es, etc _	0.				
	14 Other employee salaries and wages						
	15 Pension plans, employee benefits 16a Legal fees (attach schedule)						
A D	b Accounting fees (attach sch)						
₩ I	c Other professional fees (attach sch).						
o N	17 Interest						
P S E T	18 Taxes (attach scheduleXsee instrs) .						
O P E R A T	19 Depreciation (attach		RECI	WED			
i i	schedule) and depletion			IVED 7			
−N ·Ý G €	-20 - Occupancy —	_		10	_		
	22 Printing and publications.		SEP O	1 2017 18	_	 	
A E N X D P	23 Other expenses (attach schedule)			<u> </u>			· · · · · · · · · · · · · · · · · · ·
			DORES	RS-			
E N S E S	24 Total operating and administrative expenses. Add lines 13 through 23			LUI			
	25_ Contributions, gifts, grants paid						
	26 Total expenses and disbursements. Add lines 24 and 25		0.		0.		0.
	27 Subtract line 26 from line 12:			-			
	a Excess of revenue over expenses and disbursements		6,978.				
	b Net investment income (if negative, enter	· -0-)		1,9	78 -		
	C Adjusted net income (if negative, enter -						

Par	4 II	Balance Sheets	Attached schedules and amounts in the description	Beginning of year	End o	f year
- 41		Dalance Sheets	column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	•			
	2	•	ary cash investments .	4,528.	11,506.	11,506.
	3	Accounts receivable				
		Less: allowance for	doubtful accounts •			
	4	Pledges receivable			7 4, 5, 5	
	_	Less: allowance for o	doubtful accounts •			
	5	Grants receivable				
	6	disqualified persons (attac	cers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans rece				
Š		Less allowance for o				
A S E T	8	Inventories for sale of				
Ŧ	9	Prepaid expenses ar				, <u>.</u> .
S		obligations (attach so	· · · · · · · · · · · · · · · · · · ·			
	1	b Investments — corporate s		65,272.	65,272.	150,711.
	i	: Investments — corporate t	` '			
	11	Investments – land, equipment, basis	· • • • • • • • • • • • • • • • • • • •			
		Less: accumulated deprect (attach schedule)	-		i	
	12	Investments - morto				
	13	Investments - other	·			
	14	Land, buildings, and			t open still the section of the sect	
		Less: accumulated deprect (attach schedule)	-			
	15 16	Other assets (describ Total assets (to be of see the instructions	pe ► completed by all filers — — — —) Also, see page 1, item l).	69,800.	76,778.	162,217.
Ļ	17	Accounts payable an	d accrued expenses			
Å	18	Grants payable				
В	19	Deferred revenue				
Ļ	20		ors, trustees, & other disqualified persons			
†	21	Mortgages and other notes				-
I E	22	Other liabilities (desc				
S	23	Total liabilities (add		0.	0.	
		Foundations that foll and complete lines 2	low SFAS 117, check here 24 through 26 and lines 30 and 31.			
N F E U T N	24	Unrestricted				
ΪN	25	Temporarily restricted				
D	26	Permanently restricted				Ì
ASSETS -		Foundations that do and complete lines 2	not follow SFAS 117, check here ►X 7 through 31.			
EL	27	Capital stock, trust p	rincipal, or current funds	69,800.	76,778.	
ŚŅ	28		or land, bldg, and equipment fund			
- E	29		lated income, endowment, or other funds			
R S	30		und balances (see instructions)	69,800.	76,778.	-
	31	Total liabilities and re (see instructions)	net assets/fund balances	69,800.	76,778.	
Parl	t 111 /	Analysis of Chang	ges in Net Assets or Fund Balanc			
1	Total end-	net assets or fund ba	lances at beginning of year – Part II, coli	umn (a), line 30 (must agr	ee with	69,800 .
		r amount from Part I, I		•	2	6,978.
3		increases not included in lin			3	3,3,0.
4		lines 1, 2, and 3				76,778.
5		ases not included in line 2 (i	temize) -		5	
6	Total	net assets or fund ba	lances at end of year (line 4 minus line 5) – Part II, column (b), lin	e 30 6	76,778.

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.

Enter qualifying distributions from Part XII, line 4

Form 990-PF (2016) HAROLD B & ELEANOR M CAMERON FOUNDATION		75-269950	8	Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a),	4940(b), 4940(e), or 4948	- see instruction	ons)	
	er 'N/A' on line 1			
Date of ruling or determination letter. (attach copy of letter if necessary	y – see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V,		1		40.
check here ►and enter 1% of Part I, line 27b				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part	I, line 12, col (b)	 		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
foundations only Others enter -0-).		2		0.
3 Add lines 1 and 2		3		40.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable founda		0-) 4		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, e	enter -0-	5		40.
6 Credits/Payments:				
a 2016 estimated tax pmts and 2015 overpayment credited to 2016	6 a			
b Exempt foreign organizations — tax withheld at source	6 b			
c Tax paid with application for extension of time to file (Form 8868)	6 c			
d Backup withholding erroneously withheld	6 d			
7 Total credits and payments Add lines 6a through 6d		7		0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form	2220 is attached	8		<u> </u>
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		▶ 9		40.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		▶ 10		40.
11 Enter the amount of line 10 to be. Credited to 2017 estimated tax	Refunded	► 11		
Part VII-A Statements Regarding Activities	1101011000			
			Ye	es No
1 a During the tax year, did the foundation attempt to influence any national, state, participate or intervene in any political campaign?	, or local legislation or dic	ıt	1 a	X
			1 4	^_
b Did it spend more than \$100 during the year (either directly or indirectly) for po (see Instructions for the definition)?	olitical purposes		1 ь	
· · · · · · · · · · · · · · · · · · ·			10	<u> </u>
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copie or distributed by the foundation in connection with the activities	es of any materials published	1		-
c Did the foundation file Form 1120-POL for this year?			1 c	
d Enter the amount (if any) of tax on political expenditures (section 4955) impose	ed during the year:		10	X
(1) On the foundation ►\$ 0. (2) On foundation ma	anagers ►\$	0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political ex	xpenditure tax imposed on			-
foundation managers • \$ 0.				
2 Has the foundation engaged in any activities that have not previously been repo	orted to the IRS?		2	X
If 'Yes,' attach a detailed description of the activities				
3 Has the foundation made any changes, not previously reported to the IRS, in its government	rning instrument, articles			
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a confe	ormed copy of the change	?S	3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more du	ring the year?		4 a	X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b	N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? .			5	Х
If 'Yes,' attach the statement required by General Instruction T				
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945)	satisfied either:		_	
 By language in the governing instrument, or 				
By state legislation that effectively amends the governing instrument so that no mar	adatony directions that confl	ıct		
with the state law remain in the governing instrument?	idatory directions that com	ict	6	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part In	I, col (c), and Part XV		7 }	
-8a Enter the states to which the foundation reports or with which it is registered (si			 	
TX	· ····································			
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ge	eneral			
(or designate) of each state as required by General Instruction G? If 'No,' attach explanation	SHOT &		8b }	ζ
9 Is the foundation claiming status as a private operating foundation within the m	eaning of section 4942(i)	(3) or 4942(i)(5)		
for calendar year 2016 or the taxable year beginning in 2016 (see instructions for	or Part XIV)? If 'Yes,' cor	nplete Part XIV	9	X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a	a schedule listing their nam			\mp
and addresses	a somedate nating their Hall		10	Х
AA .	"	F.	orm 990-PF	

Par	T VII-A	Statements Regarding Activities (continued)					
11	At any ti within th	me during the year, did the foundation, directly or indirectly, own a controlled entity e meaning of section 512(b)(13)? If 'Yes,' attach schedule (see instructions)			11	Yes	No X
12	Did the fo	undation make a distribution to a donor advised fund over which the foundation or a disqualified pe privileges? If 'Yes,' attach statement (see instructions)	rson had		12		x
13	Did the f	oundation comply with the public inspection requirements for its annual returns and exempti	on applica	ation?	13	X	
	Website	5/11					
14	The book	s are in care of ► HAROLD CAMERON, JR Telephoi	ne no. 🟲	(903)	533	-940	0
	Located			702	-,-, - ,-		
15		1947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		a= 1	N/A	. •	
		r the amount of tax-exempt interest received or accrued during the year		15		V	N/A
16	At any tin bank, se	ne during calendar year 2016, did the foundation have an interest in or a signature or other authority curities, or other financial account in a foreign country?	over a	1	16	Yes	No X
	enter the	nstructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' name of the foreign country				;	
Par	t VII-B	Statements Regarding Activities for Which Form 4720 May Be Required					
		1 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
1 a	_	e year did the foundation (either directly or indirectly).	г				
	(1) Enga	ge in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No		- ()	
	(2) Borro	ow money from, lend money to, or otherwise extend credit to (or accept it from) a lalified person?	Yes	X No			-
		sh goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			- 1
	(4) Pay	compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No	-1		
	(5) Trans	sfer any income or assets to a disqualified person (or make any of either available benefit or use of a disqualified person)?	Yes	XNo			į
	found	e to pay money or property to a government official? (Exception. Check 'No' if the ation agreed to make a grant to or to employ the official for a period after termination vernment service, if terminating within 90 days.)	Yes	X No	•		
b	If any an Regulation	swer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described ons section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions	in S)?		1 b	N.	/A
	Organiza	tions relying on a current notice regarding disaster assistance check here	•	· 🛮 🔚		-	
С	Did the for that were	oundation engage in a prior year in any of the acts described in 1a, other than excepted acts not corrected before the first day of the tax year beginning in 2016?	5,	_	1 c		X
2	Taxes on private of	failure to distribute income (section 4942) (does not apply for years the foundation was a perating foundation defined in section 4942(j)(3) or 4942(j)(5)).					
а	At the en and 6e, F	d of tax year 2016, did the foundation have any undistributed income (lines 6d Part XIII) for tax year(s) beginning before 2016?	Yes	X No			
	If 'Yes,' I	st the years ► 20 _ , 20 _ , 20 , 20		_		-	
b	(relating	any years listed in 2a for which the foundation is not applying the provisions of section 494 to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 listed, answer 'No' and attach statement — see instructions).	2(a)(2) 2(a)(2) to		2 b	NT.	/3
c	•	visions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years	here		Z D	IN,	/A
•		, 20, 20, 20					
3 a	Did the fo	bundation hold more than a 2% direct or indirect interest in any business at any time during the year?	Yes	X No			
h	-If 'Yes.'-d	lid-it have-excess business-holdings in-2016 as a result-of-(1) any-purchase-by the foundation					-
	or disqua	lified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approvements) approved the section 4943(c)(/)) to dispose of holdings acquired by gift or bequest, or	ed				
	(3) the la	on missioner under section 4943(c)(7)) to dispose of holdings acquired by gift of bequest, or one of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to e if the foundation had excess business holdings in 2016.)		1			
	determin	e if the foundation had excess business holdings in 2016.)			3 b	N	/A
4 a		oundation invest during the year any amount in a manner that would jeopardize its purposes?			4 a		<u> </u>
_ _	Did the fo	oundation make any investment in a prior year (but after December 31, 1969) that could			-		
J	jeopardize	ts charitable purpose that had not been removed from jeopardy before the first day of					
DA A	tne tax ye	ear beginning in 2016?		F	4 b	LPF /	X 2016)
BAA				FOI	・・・・ フブリ	<i>-</i>	ZU 101

Form 990-PF (2016) HAROLD B & ELEANOI Part VII-B Statements Regarding Activit			75-269	99508 F	age 6
		1 4/20 May be key	uireu (continueu)		 -
5a During the year did the foundation pay or incu (1) Carry on propaganda, or otherwise attempt	•	n (section 4945(e))?	☐ Yes 🗓	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section			No	
(3) Provide a grant to an individual for travel,		purposes?		No	
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions	a charitable, etc , organi s)	zation described	Yes X	No	
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the exceding disaster assistance	ptions	5b N	/A
Organizations relying on a current notice rega	rding disaster assistand	ce check here	► []		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?		N/A Yes	No	
If 'Yes,' attach the statement required by Reg 6 a Did the foundation, during the year, receive a		• •	9		
on a personal benefit contract? b Did the foundation, during the year, pay prem			Yes X	No 6 b	X
If 'Yes' to 6b, file Form 8870					
7 a At any time during the tax year, was the found	, ,			No 74	
b If 'Yes,' did the foundation receive any procee				7 b	L
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Hignly Paid E	impioyees,	
1 List all officers, directors, trustees, foundation	n managers and their o	compensation (see inst		Y	
(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	(e) Expense acc other allowar	ount, nces
HAROLD B CAMERON JR	SEC/TREAS	0.	0.	-	0.
_1006 FIRST_PLACETYLER, TX 75702	1.00				
ELEANOR M CAMERON 2818 POUNDS AVENUE	PRESIDENT 1.00	0.	0.		0.
TYLER, TX 75701					
2 Compensation of five highest-paid employees (of	her than those included	on line 1 – see instructio	ns). If none, enter 'NONE	•	
(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) Expense acc other allowa	ount, nces
NONE					
					<u></u>
<u></u>	<u> </u>	<u> </u>			
	-				
Total number of other employees paid over \$50,000)		•		0
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Total. Add lines 1 through 3

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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
ONE		
~		
~		
		
·		
		
· - -		
tal number of others receiving over \$50,000 for professional services		•
t the foundation's four largest direct charitable activities during the tax year. Include relevant statistic panizations and other beneficiaries served, conferences convened, research papers produced, etc.	cal information such as the number of	Expenses
t the foundation's four largest direct charitable activities during the tax year. Include relevant statistic anizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A	cal information such as the number of	Expenses
	cal information such as the number of	Expenses
<u>N/A</u>	cal information such as the number of	Expenses
<u>N/A</u>	cal information such as the number of	Expenses
N/A	cal information such as the number of	Expenses
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N/A	cal information such as the number of	Expenses
N/A	cal information such as the number of	Expenses
N/A	cal information such as the number of	Expenses
N/A		Expenses
N/A	ictions)	
N/A Strict X B Summary of Program-Related Investments (see Instruscribe the two largest program-related investments made by the foundation during the	ictions)	Expenses
N/A Summary of Program-Related Investments (see Instruscribe the two largest program-related investments made by the foundation during the	ictions)	
N/A Stilk*Bi Summary of Program-Related Investments (see instruscribe the two largest program-related investments made by the foundation during the	ictions)	
N/A Solve the two largest program-related investments made by the foundation during the N/A N/A	ictions) le tax year on lines 1 and 2	
N/A Samuel Summary of Program-Related Investments (see instruseribe the two largest program-related investments made by the foundation during the	ictions) le tax year on lines 1 and 2	
N/A Solve the two largest program-related investments made by the foundation during the N/A N/A	ictions) le tax year on lines 1 and 2	

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see instructions.)		andations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes a Average monthly fair market value of securities.		150 510
b Average of monthly cash balances	1 a	152,518.
c Fair market value of all other assets (see instructions)	1 c	6,488.
d Total (add lines 1a, b, and c)	1 d	159,006.
e Reduction claimed for blockage or other factors reported on lines 1a and	- 10	159,006.
1c (attach detailed explanation) 1 e 0		
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	159,006.
•		137,000.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	2,385.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	156,621.
6 Minimum investment return. Enter 5% of line 5 SHORT YEAR MODIFIED PERCENTAGE 2.5137 %	6	3,937.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera and certain foreign organizations check here ► and do not complete this part.)	ting four	ndations
1 Minimum investment return from Part X, line 6	1	3,937.
2a Tax on investment income for 2016 from Part VI, line 5		
b Income tax for 2016 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2 c	40.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	3,897.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	3,897.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	3,897.
Part XII Qualifying Distributions (see instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26		
b Program-related investments — total from Part IX-B	1 a	
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. a Suitability test (prior IRS approval required)	3 a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
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 (see instructions)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four qualifies for the section 4940(e) reduction of tax in those years		
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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
Distributable amount for 2016 from Part XI, line 7				2 907
2 Undistributed income, if any, as of the end of 2016.				3,897.
a Enter amount for 2015 only			0.	
b Total for prior years: 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2016				
a From 2011				
b From 2012				
c From 2013	ļ			
d From 2014	Ì			
e From 2015 3, 001.				
f Total of lines 3a through e	3,001.			
4 Qualifying distributions for 2016 from Part				
XII, line 4 ► \$				
a Applied to 2015, but not more than line 2a			0.	
 Applied to undistributed income of prior years (Election required – see instructions) 		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2016 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2016	3,001.			3,001.
(If an amount appears in column (d), the same amount must be shown in column (a).)	9,302.		 	
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed				
income for which a notice of deficiency has been issued, or on which the section 4942(a)				
tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2015 Subtract line 4a from			•	
line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017				906
7 Amounts treated as distributions out of				896.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)	0.		_	
8_Excess_distributions_carryover_from_2011not- applied on line 5 or line 7 (see instructions)	0.		enema ar remana and enemana	
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	0.			
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				
BAA				Form 990-PF (2016)

	990-PF (2016) HAROLD B & ELEAN				75-2699508	Page 10	
	Private Operating Foundations (see instructions and Part VII-A, question 9) N/A						
1 a	1 a 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 Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)						
2 a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total	
	investment return from Part X for each year listed	(a) 2016	(b) 2015	(c) 2014	(d) 2013		
ь	85% of line 2a						
_	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						
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c						
3	Complete 3a, b, or c for the alternative test relied upon:			-			
а	'Assets' alternative test — enter:						
	(1) Value of all assets			_			
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
b	'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed						
С	'Support' alternative test - enter						
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)						
	(2) Support from general public 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						
Par	Supplementary Information assets at any time during the	(Complete this e year – see in:	part only if the f structions.)	oundation had	\$5,000 or more	in	
	Information Regarding Foundation Manag List any managers of the foundation who have close of any tax year (but only if they have NONE	ers:	an 2% of the total cor	ntributions received t section 507(d)(2))	by the foundation befo	ore the	
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 owners	ship of	
	a partnership or other entity) of which the NONE	foundation has a 10)% or greater intere	st	•	, ,	
2	Information Regarding Contribution, Grant, G	ift, Loan, Scholarsh	ip, etc., Programs:				
	Check here ► X if the foundation only mal requests for funds. If the foundation makes gift complete items 2a, b, c, and d	kes contributions to	preselected charitable				
а	The name, address, and telephone number or	e-mail address of th	e person to whom ap	plications should be	addressed:		
			'				
	The farmer is subself and leading about the			- 16 - T 16 - 19	d		
O	The form in which applications should be s	abinited and infor	nation and materials	s triey snoula includ	ue.		
- c	Any submission deadlines						
d	Any restrictions or limitations on awards, s	uch as by geograph	nical areas, charitab	le fields, kinds of it	nstitutions, or other	factors:	
							

Page 11

3 Grants and Contributions Faid During the 16	If recipient is an individual	are rayinen	1	
Recipient	show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	recipient	contribution	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
a Paid during the year				
	,			
			}	
	i			
		ĺ		
Total			► 3a	
b Approved for future payment	·		- 3a	
				. – – – – –
				-
		}		
		_		
1			ļ	
Total			b 31	
Total		 .	. ► 3b	5 000 PF (0016)

⊏nter	gross amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)
1	Program service revenue·	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
а						
b						•
c						
d					7	
e						
f.						
g	Fees and contracts from government agencies					
2	Membership dues and assessments					· · ·
3	nterest on savings and temporary cash investments		*	14	1.	
-	Dividends and interest from securities			14	1,977.	
	Net rental income or (loss) from real estate					
	Debt-financed property					
	Not debt-financed property					
	Net rental income or (loss) from personal property					
-	Other investment income					
	Gain or (loss) from sales of assets other than inventory					
	Net income or (loss) from special events		74			
10	Gross profit or (loss) from sales of inventory				· " [
11 (Other revenue:	-				
a						
b						
c						•
d_						
е					_	
12 :	Subtotal Add columns (b), (d), and (e)				1,978.	
-	Total Add Inc. 10 columns (b) (d) and (c)				13	1 070
	fotal. Add line 12, columns (b), (d), and (e)				13 _	1,978.
See v	vorksheet in line 13 instructions to verify calculation				-	1,978.
See v	worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the	Accomplish	<u>-</u> <u>-</u>	•	es -	
See v Part Line	xVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplish	<u>-</u> <u>-</u>	•	es -	
See v Part Line	xVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplish	<u>-</u> <u>-</u>	•	es -	
See v Part Line	xVI-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplish	<u>-</u> <u>-</u>	•	es -	
See v Part Line	xVI-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplish	<u>-</u> <u>-</u>	•	es -	
See v Part Line	xVI-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplish	<u>-</u> <u>-</u>	•	es -	
See v Part Line	xVI-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplish	<u>-</u> <u>-</u>	•	es -	
See v Part Line	xVI-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplish	<u>-</u> <u>-</u>	•	es -	
See v Part Line	xVI-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplish	<u>-</u> <u>-</u>	•	es -	
See v Part Line	xVI-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplish	<u>-</u> <u>-</u>	•	es -	
See v Part Line	xVI-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplish	<u>-</u> <u>-</u>	•	es -	
See v Part Line	xVI-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplish	<u>-</u> <u>-</u>	•	es -	
See v Part Line	xVI-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplish	<u>-</u> <u>-</u>	•	es -	
See v Part Line	xVI-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accomplish	<u>-</u> <u>-</u>	•	es -	
See v	xVI-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accomplish ncome is reporte purposes (othe	ed in column (e) of r than by providing	•	es -	
See v Part Line	vorksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt TA	e Accomplish ncome is reporte purposes (othe	ed in column (e) of r than by providing	•	es -	
See v Part Line	vorksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt TA	e Accomplish ncome is reporte purposes (othe	ed in column (e) of r than by providing	•	es -	
See v Part Line	vorksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt TA	e Accomplish ncome is reporte purposes (othe	ed in column (e) of r than by providing	•	es -	
See v	vorksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt TA	e Accomplish ncome is reporte purposes (othe	ed in column (e) of r than by providing	•	es -	
See v	vorksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt TA	e Accomplish ncome is reporte purposes (othe	ed in column (e) of r than by providing	•	es -	
See v	vorksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt TA	e Accomplish ncome is reporte purposes (othe	ed in column (e) of r than by providing	•	es -	
See v	vorksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt TA	e Accomplish ncome is reporte purposes (othe	ed in column (e) of r than by providing	•	es -	
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See v	vorksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt TA	e Accomplish ncome is reporte purposes (othe	ed in column (e) of r than by providing	•	es -	
See v	vorksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt TA	e Accomplish ncome is reporte purposes (othe	ed in column (e) of r than by providing	•	es -	
See v	vorksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt TA	e Accomplish ncome is reporte purposes (othe	ed in column (e) of r than by providing	•	es -	

01111 330 1 1	(COLO) TIVITOTIO D OF I	TIPUMON IN CUMPING	N LOONDALION	13 2033300
Part XVII	Information Regarding	Transfers To and 1	Fransactions and	Relationships With Noncharitable
CIC XVII	intormation regarding	i i i ali sici si i o alia i	nansactions and	reactions from nononanable
	Exempt Organizations			

	-				Yes No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?					Tes No
_			a noncharitable exempt organiz	zation of:	
(1) Cash					1 a (1) X
(2) Oth	ner assets				1 a (2) X
b Other to	ransactions.				
(1) Sales of assets to a noncharitable exempt organization					1 b (1) X
(2) Pur	(2) Purchases of assets from a noncharitable exempt organization				
(3) Rental of facilities, equipment, or other assets					1 b (2) X 1 b (3) X
(4) Reimbursement arrangements					1 b (3) X 1 b (4) X 1 b (5) X 1 b (6) X
(5) Loa	(5) Loans or loan guarantees .				
(6) Per	rformance of services	or membersh	nip or fundraising solicitations		1 b (6) X
c Sharing	g of facilities, equipme	ent, mailing lis	sts, other assets, or paid employ	yees	1c X
the acco	ds, other assets, or ser	rvices aiven by	complete the following schedule the reporting foundation. If the foundation is the f	ndation received less than fair ma	arket value in
	nsaction or sharing ai		how in column (d) the value of t		
(a) Line no.	(b) Amount involved	(c) Name	of noncharitable exempt organization	(d) Description of transfers, tra	nsactions, and sharing arrangements
N/A					
				ļ	
				<u> </u>	
		ļ			
				 	
describ	oundation directly or incoded in section 501(c) o	of the Code (o	d with, or related to, one or more to ther than section 501(c)(3)) or it	ax-exempt organizations n section 527?	Yes XNo
	a) Name of organizati		(b) Type of organization	n (c) Descr	iption of relationship
N/A					
					
					
Under	penalties of perjury, I declar	re that I have exam	nined this return, including accompanying s	schedules and statements, and to the best	of my knowledge and belief, it is true,
· — — J-correc	penaities of perjury, I declar ct _r -and complete .Declaration	re that I have exam	nined this return, including accompanying s than taxpayer) is based on all information	schedules and statements, and to the best of which preparer has any knowledge	
Sign correc	penalties of perjury, I declar st, and complete Declaration	re that I have exam	nined this return, including accompanying s than taxpayer) is based on all information	of which preparer has any knowledge	- — — - May the IRS discuss this return with the
Sign Correct	ct_and complete Declaration	of preparer (other	than taxpayer) is based on all information	SECRETARY/TREA:	- May the IRS discuss this return with the preparer shown below (see instructions)?
Sign Correct	nature of officer or trustee	n of preparer (other	than taxpayer) is based on all information (N) Ob(N) Date	SECRETARY/TREA:	SURER May the IRS discuss this return with the preparer_shown below (see instructions)? X Yes No
Sign Correct	ct_and complete Declaration	n of preparer (other	than taxpayer) is based on all information	SECRETARY/TREA: Title Date Che	SURER HAY the IRS discuss this return with the preparer shown below (see instructions)? X Yes No
Sign Correct Correct	nature of officer or trustee	n of preparer (other	than taxpayer) is based on all information (N) Ob(N) Date	SECRETARY/TREA: Title Date Che	SURER — May the IRS discuss this return with the preparer shown below (see instructions)? X Yes No
Sign Here	nature of officer or trustee Print/Type preparer's nar GINNY RAGLAN	me (other	Than taxpayer) is based on all information One of the preparer's signature	SECRETARY/TREA: Title Date Che	SURER PTIN - May the IRS discuss this return with the preparer, shown below (see instructions)? X Yes No
Sign Here Sign Paid Preparer	Print/Type preparer's nam GINNY RAGLAN Firm's name	me ND HENRY & PI	Preparer's signature ETERS P.C.	SECRETARY/TREA: Title Date Che sell	SURER This return with the preparer shown below (see instructions)? X Yes No eck of PTIN P00160325
Sign Here	nature of officer or trustee Print/Type preparer's nar GINNY RAGLAN Firm's name Firm's address 3	me ND HENRY & PI 3310 S BR	Than taxpayer) is based on all information One of the preparer's signature ETERS P.C.	SECRETARY/TREA: Title Date Che sell	SURER May the IRS discuss this return with the preparer shown below (see instructions)? X Yes No eck of PTIN P00160325

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Employer identification number

Name of the organization HAROLD B & ELEANO	R M CAMERON FOUNDATION	Employer identification number	
INC		75-2699508	
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 priv	ate foundation	
	501(c)(3) taxable private foundation		
Check if your organization is covered by the General	Rule or a Special Rule.		
	anization can check boxes for both the General Rule and a S	Special Rule. See instructions	
·	anization car check boxes for both the deficial rate and a c	pecial Naie God instructions	
General Rule V For an organization filing Form 990, 990.F7	, or 990-PF that received, during the year, contributions tota	alina \$5.000 or more (in money or	
property) from any one contributor Comple	te Parts I and II See instructions for determining a contribu	tor's total contributions	
Special Rules			
For an organization described in section 50	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supp that checked Schedule A (Form 990 or 990-EZ), Part II, line 13,	oort test of the regulations	
received from any one contributor, during the	that checked scriedule A (10th) 990 01 990-22), Fait in, the 19, the year, total contributions of the greater of (1) \$5,000 or (2) 0-EZ, line 1 Complete Parts I and II) 2% of the amount on (i)	
Form 990, Part VIII, line 1h, or (ii) Form 99	0-EZ, line 1 Complete Parts I and II		
For an organization described in section 50	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received than \$1,000 exclusively for religious, charitable, scientific, li	from any one contributor,	
during the year, total contributions of more	than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lib children or animals. Complete Parts I, II, and III.	terary, or educational	
purposes, or for the prevention of cracity to	of animals complete value if it, and in		
For an organization described in section 50	11(c)(7), (8), or (10) filing Form 990 or 990-EZ that received	from any one contributor,	
during the year, contributions exclusively for	or religious, charitable, etc., purposes, but no such contributi	ons totaled more than	
\$1,000 If this box is checked, enter here the	ne total contributions that were received during the year for a my of the parts unless the General Rule applies to this organ	an <i>exclusively</i> religious, lization because	
it received nonexclusively religious, charitat	ole, etc., contributions totaling \$5,000 or more during the ye	ar \$	
-			
	III. O I O	Nuls B (Form 000, 000 F7, 57	
990-PF), but it must answer 'No' on Part IV, lin	the General Rule and/or the Special Rules doesn't file Sche ne 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 99	U-PF)	
BAA For Paperwork Reduction Act Notice, see the Instr	uctions for Form 990, 990-EZ, or 990-PF. Schedule B	(Form 990, 990-EZ, or 990-PF) (2016)	
	·	·	

Name of org		,	Employer identification number
	D B & ELEANOR M CAMERON FOUNDATION		75-2699508
	Contributors (see instructions) Use duplicate copies of Part I if additional space		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
1	ELEANOR M. CAMERON	_	Person X Payroll
	2818 POUNDS AVE	\$5,	000. Noncash
	TYLER, TX 75701	_	(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		-	Person Payroll Noncash
		-	(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution s
		- \$\$	Person
			(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
-		 \$	Person Payroll Noncash
			(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
- <i></i>	 	 \$	Person
			(Complete Part II fornoncash_contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
	· · · · ·		Person Payroll
		\$	Noncash
			(Complete Part II for noncash contributions)
BAA	TEEA0702L 08/09/16	Schedule B (F	orm 990, 990-EZ, or 990-PF) (2016)

Page

1 of

1 of Part I

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

1 to

1 of Part II

Name of organization

HAROLD B & ELEANOR M CAMERON FOUNDATION

75-2699508

Employer identification number

	Noncash Property (see instructions) Use duplicate copies of Part II if additional		,
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part-l	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
BAA		Schedule B (Form 990, 990-	 EZ, or 990-PF) (2016)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

of Part III

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

HAROLD B & ELEANOR M CAMERON FOUNDATION

Parallel Exclusively religious should be a second or s

Employer identification number 75-2699508

	or (10) that total more than \$1,000 for the following line entry. For organizations contributions of \$1,000 or less for the year	he year from any one contribution ompleting Part III, enter the total (Enter this information once. See	of exclusively religious, charitable, etc.,	
(a) No. from Part I	Use duplicate copies of Part III if additional space is needed. (b) (c) Purpose of gift Use of gift		(d) Description of how gift is held	
	N/A			
	Transferee's name, addres	(e) Transfer of gift ss, 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	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	
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee	