

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



Foim 990-PF

Return of Private Foundation

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

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

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

		of foundation		D. C. F	7777		and endir	ıg ,	A F. 1	, 20
		of foundation THE CAROLYN J. A	ND	ROE	BERT J. ALLIS	ON, JR.			A Employer identif	
_		ILY FOUNDATION							76-053924	
	dunn	er and street (or P O box number if mail is not de	livered	a to s	treet address)		Room/suite		B Telephone numb	er (see instructions)
	0117	2711227 2722712 217								· = - =
		SEWOOD CROSSING_ONE town, state or province, country, and ZIP or forei				670 —		(832) 63	36-3201	
	City Oi	town, state or province, country, and zir or lorer	gii po	Stal C	ode				C If exemption applic	ation is
	11011	CMON MY 77070							pending, check her	
-		STON, TX 77070			T I la tall astron	6 6		\dashv		. —
G	CHE	eck all that apply Initial return			Initial return o	•	ublic chari	ty	D 1 Foreign organiza	
~		Final return			Amended ret				2 Foreign organiza 85% test, check	
Š	Che	Address char eck type of organization X Section		(-)//	Name change		 	\dashv	computation .	▶ ∟
	\neg				_			- (E If private foundation	n status was terminated
160 1		Section 4947(a)(1) nonexempt charitable tr			Other taxable pr			{	under section 507(I	o)(1)(A), check here . P
ূৰ ভ		market value of all assets at	_			ash Acc	ruai			in a 60-month termination
		of year (from Part II, col (c), line	_		r (specify)			-	under section 507(t	o)(1)(B), check here .
_				_	nn (d) must be on cas	n basis)				(d) Disbursements
11		Analysis of Revenue and Expenses total of amounts in columns (b), (c), and (c)	(Ine f)	'	(a) Revenue and	(b) Net inve	estment	(0	a) Adjusted net	for charitable
#		may not necessarily equal the amounts in			expenses per books	incom	ie	•	income	purposes
		column (a) (see instructions))		╁╌	1,023,626.					(cash basis only)
S ANNELS	1	Contributions, gifts, grants etc., received (attach scheduling) if the foundation is not require	d to	-	1,023,020.					
	2	attach Sch B		-						
•	,	Interest on savings and temporary cash investme		-	409,024.	40	9,024.			ATCH 1
	4	Dividends and interest from securities		-	405,024.		9,024.			ATCH
	5a	Gross rents		\vdash			+			
a)	D	Net rental income or (loss)		┼	764,503.					
Ž	b	Net gain or (loss) from sale of assets not on line Gross sales price for all 4, 993, 9		-						
Revenue	_	assets on the oa		-		76	4,503.			
æ	8	Capital gain net income (from Part IV, line					1,303.			
	9	Net short-term capital game capital game modifications)j .	1	· · · · · · · · · · · · · · · · · · ·					
		Gross sales less returns and allowances Q	Ť	\gt						
	h	Less Cost of goods sold JUN 28 2017		6						
	C	Gross profit or (loss) (attach schedule)		2						
	11	Other income (attach-schedule) ATCH 42	<u>-</u> -	1	36.		36.			
	12	Other income (attach schedule) ATCH Total. Add lines 1 through 11			2,197,189.	1,17	3,563.			
_	13	Compensation of officers, directors, trustees, etc.			0.					
es	14	Other employee salaries and wages								
oenses	15	Pension plans, employee benefits								
		Legal fees (attach schedule)								
Ü	ь	Accounting fees (attach schedule)ATCH.			7,519.					7,519
Ϋ́	С	Other professional fees (attach schedule).			53,192.	5	3,192.			
rat	17	Interest								
Administrative Ex	18	Taxes (attach schedule) (see instructions)[5].	_	75,000.					
π̈́	19	Depreciation (attach schedule) and deplet	ion .	_						
Þ	20	Occupancy		_						
7	21	Travel, conferences, and meetings								
an	21 22	Printing and publications								
na	23	Other expenses (attach schedule)								ļ
ati	23 24 25	Total operating and administrative exper	ses.		1010					_
ber	[Add lines 13 through 23			135,711.	5	3,192.			7,519
Ō		Contributions, gifts, grants paid		_	3,337,100.	·				3,337,100
_	26	Total expenses and disbursements Add lines 24 ar	d 25	_	3,472,811.	5	3,192.		0.	3,344,619
	27	Subtract line 26 from line 12		}						1
	а	·			-1,275,622.					<u></u>
	l	Net investment income (if negative, enter				1,12	0,371.			
	l c	Adjusted net income (if negative, enter -0-	-)	1	į		Į			l

JSA For Paperwork Reduction Act Notice, see instructions. 6E1410 1 000 4342GR 1996 4/6/2017 2:48:

Form **990-PF** (2016)

orm 990	D-PF (2016) THE CAROLYN J. AND F			5-0539246 Page
Part II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
ar C II	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	1,000,900.	179,043.	179,04
3	Accounts receivable			
	Less allowance for doubtful accounts ► Pledges receivable ► Less allowance for doubtful accounts ►			
4	Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
-5-	Less allowance for doubtful accounts ▶			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons (attach schedule) (see instructions)	1		
7	Other notes and loans receivable (attach schedule)			
	Less allowance for doubtful accounts ▶	<u>]</u> ,		
8	Inventories for sale or use			
8 9				
10a	Prepaid expenses and deferred charges	523,741.	237,095.	205,02
Ь	Investments - corporate stock (attach schedule) ATCH. 7	13,636,513.	14,055,222.	17,462,06
C	Investments - corporate bonds (attach schedule) ATCH 8	1,566,866.	965,600.	
11	Investments - land, buildings, and equipment basis	A 2 2 5 5		
	Less accumulated depreciation			
12	(attach schedule)			
13	Investments - mortgage loans	73,826.	74,138.	81,20
14	Land, buildings, and equipment basis			11. 1/2 11
	Less accumulated depreciation (attach schedule)] *** -* **	·W 21.0 /// 2	× × · · · · · · · · · · · · · · · · ·
15	Other assets (describe >			
16	Total assets (to be completed by all filers - see the			
	instructions Also, see page 1, item I)	16,801,846.	15.511.098.	18,850,45
17	Accounts payable and accrued expenses			12 111.
18	Grants payable			
1 -	Deferred revenue			
20	Loans from officers, directors, trustees, and other disqualified persons.			
21	Mortgages and other notes payable (attach schedule)			
19 20 21 22	Other liabilities (describe >)			
	other habilities (designed b			
23	Total liabilities (add lines 17 through 22)	0.1	0.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
24	Unrestricted			
25	Temporarily restricted			
26	Permanently restricted			
	Foundations that do not follow SFAS 117,			
25 26 27	check here and complete lines 27 through 31.			
27	Capital stock, trust principal, or current funds	16,801,846.	15,511,098.	like in the filter
28	Paid-in or capital surplus, or land, bldg, and equipment fund	10/001/010:	10/011/030.	
28 29	Retained earnings, accumulated income, endowment, or other funds			
30	Total net assets or fund balances (see instructions)	16,801,846.	15,511,098.	
30 31	Total liabilities and net assets/fund balances (see	10,001,010.	10,011,000.	
[]	instructions)	16,801,846.	15,511,098.	
art	Analysis of Changes in Net Assets or Fund Bala			<u> </u>
	al net assets or fund balances at beginning of year - Part		must agree with	
	I-of-year figure reported on prior year's return)			16,801,84
	er amount from Part I, line 27a			-1,275,62
				-1,2/5,64
				15 506 06
Haa	d lines 1, 2, and 3	• • • • • • • • • • • • • • • • • • • •		15,526,22
	creases not included in line 2 (itemize) ATCH 10	- L 5\ D (# : :	5_	15,12
o rota	al net assets or fund balances at end of year (line 4 minus	s iine 5) - Part II, column (<u>b), line 30 6_</u>	15,511,09

_	•
Page	Э,

	ick warehouse; or common stock, 200		D - Donation	<u> </u>	
SEE PART IV SCHED	ULE				
					
	(O.D	(g) Cost or other basis		(h) Com on (lo	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
-	_		ļ		,
		J			
Complete only for assets sl	howing gain in column (h) and owner	d by the foundation on 12/31/69		Gains (Col (h) ga	
) 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	col	(k), but not less t Losses (from co	
· · · · · · · · · · · · · · · · · · ·	as 01 12/31/09	over cor (j), it ally			- (//
	.		+		<u>-</u>
			 	···	····
_					
Constal cars not record	or (not constal loss) [If g	gain, also enter in Part I, line 7			
Capital gain net income	l 11 (loss), enter -0- ın Part I, lıne 7	2		764,503
· · · · · · · · · · · · · · · · · · ·	ain or (loss) as defined in sections	· · · · · · · · · · · · · · · · · · ·			
•	, , ,	structions) If (loss), enter -0- in $\}$			
Part I, line 8		,	3		0
optional use by domestic ection 4940(d)(2) applies, the foundation liable for	Inder Section 4940(e) for Reprivate foundations subject to the leave this part blank the section 4942 tax on the distri	ne section 4940(a) tax on net invest but but but but but but but but but but	ncome ment inco		Yes X
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Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948- see in	<u>ıstruc</u>	tions)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		11,2	04.
	here ▶ X and enter 1% of Part I, line 27b			
С	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			
3	Add lines 1 and 2		11,2	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		11,2	04.
6	Credits/Payments			
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 70,159.			
b	Exempt foreign organizations - tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		70,1	59.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		58,9	55.
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ► 58,955. Refunded ► 11	<u></u>		
Pa	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b		<u>X</u>
	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			
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ►\$ (2) On foundation managers ►\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Χ.
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	1		
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	TX,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		,,	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"			.,
	complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			v
	names and addresses	10	O DE	X

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	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)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14_	The books are in care of ▶_DOMINICK_JTRIMARCHI	<u>-509</u>	88	
	Located at ▶54 STATE STREET, SUITE 801 ALBANY, NY ZIP+4 ▶ 12207			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A .		▶	
	and enter the amount of tax-exempt interest received or accrued during the year	N/A		
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of		٠,	, 34
	the foreign country >	,	ž ()	, 1
Par	t 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.		Yes	No
1a	During the year did the foundation (either directly or indirectly)		123	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			, , ,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	(1,83)	(
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			3
	(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)?	7,000	8 8 1	30,31,5
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	(3, 183		_ :
	foundation agreed to make a grant to or to employ the official for a period after	,	. 8	1118
	termination of government service, if terminating within 90 days)			1 2 3 3 3 3
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	13.2		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	N/	A
	Organizations relying on a current notice regarding disaster assistance check here	18163		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	28.8 . 4	, ,	X
_	were not corrected before the first day of the tax year beginning in 2016?	1c	r 2 k	1110
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	46.86 M		12 1 2 1
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	3333	. * *	
а	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?			
		3.	1,3	
	If "Yes," list the years Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		**> - 46 -48	
U	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	''		
	all years listed, answer "No" and attach statement - see instructions)	2b	N/	Α
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1 50	18 38	1418
·	• The provisions of section 4542(a)(2) are being applied to any of the years instead in 2a, list the years need	13.25	1. 3.	83
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		``) *
Ja	at any time during the year?	3 `*		
ь	of "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	ين د	1	
	foundation had excess business holdings in 2016)	3b	N/	A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	[· · · ·	Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		Ž	~ ^ <u>.</u>
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		Х
	=	om 99	n-PF	(2016

Part VIII-S Statements Regarding Activities for Which Form 4720 May Be Required (continued)	Form 9	990-PF (2016) THE CAROLYN J.	AND ROBERT	J. ALLISON, JF	76-0	539246	Page 6
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	Par	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Req	uired (continued)		
(2) Influence the outcome of any specific public election (see section 4955), or to carry on directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for tress, study, or other similar purposes? (4) Provide a grant to an individual for tress, study, or other similar purposes? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (6) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (7) If any aniswer is "Yes" to Sa(1)-(5), did any 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)? (8) If any aniswer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? (9) If "Yes," attach the statement required by Regulations section 53 4945-5(d) (9) If "Yes," attach the statement required by Regulations section 53 4945-5(d) (9) If "Yes," attach the statement required by Regulations section 53 4945-5(d) (9) If "Yes," attach the statement required by Regulations section 53 4945-5(d) (9) If "Yes," attach the statement required by Regulations section 54 (a) the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? (a) If "Yes," attach the statement required by Regulations section 53 4945-5(d) (b) If "Yes," attach the statement required by Regulations sections on a prematical benefit contract? (a) If yes to 56, the Form 85 to 56, the Form 8	5a			 .			
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(3) Provide a grant to an individual for travel, study, or other similar purposes?		• • • • • • • • • • • • • • • • • • • •	•	· · ·			
(4) Provide a grant to an organization other than a charitable, etc. organization described in section 4945(0)4(A)? (see instructions). (5) Provide of any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (b) If any answer is "Yes" to Sa(1)+(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organization disaster instructions and relations on a personal benefit contract? Organization disaster instructions on a personal benefit contract? Organization disaster instruction approach of the grant? If Yes "to 6b, file Form 8870 A 1 any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? Organization and contractors. Information About Officers, Directors, Tirustees, Foundation Managers, Highly Paid Employees and Contractors. Information About Officers, Directors, Tirustees, Foundation Managers, Highly Paid Employees and Contractors. Organization of five highest-paid employees (other than those included on line 1 - see instructions). (e) Expense account, other allowances of sach employee pad more than \$50,000 (b) Title, and average hours per week devoted to position of the page of the page of the page of					·		
section 49.56(1)(4)(A)? (see instructions). (5) Provide for any purpose other han religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals? b if any answer is "Yes" to 5a(1)-(5), clid any 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)? C if the answer is "Yes" to question 53(4), does the foundation claim exemption from the tax because than thantiance expenditure responsibility for the grant? C if the answer is "Yes" to question 53(4), does the foundation claim exemption from the tax because than thantiance expenditure responsibility for the grant? C if the answer is "Yes" to question 53(4), does the foundation claim exemption from the tax because than statement required by Regulations section 53 4945-5(d) B Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? A ray time during the year, pay premiums, directly or indirectly, no apersonal benefit contract? A ray time during the tax year, was the foundation approach of the contract of the foundation, during the year, pay premiums, directly or indirectly, no apersonal benefit contract? A ray time during the tax year, was the foundation approach of the contract of the foundation of the foundatio		-					
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b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6a		•				
At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?						1 1	
ATCH 11 At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	b		ctly or indirectly, on a	personal benefit contra	act?	6b	X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?		•					
Part VIII	-		•		• — —		NT / 75
ATCH 11 2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average devoted to position (l) Compensation (lo)		1.6	•				N/A
(a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances (e) Expense account, other allowances (e) Expense account, other allowances (f) Compensation (g) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances (f) Compensation (g) Contributions to employee benefit plans and deferred compensation (g) Expense account, other allowances (g) Compensation (hours per week devoted to position (g) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances (e) Expense account, other allowances (e) Expense account, other allowances (f) Compensation (hours per week devoted to position (hours per week devoted to position)	Par	and Contractors					
ATCH 11 2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). 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 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee paid more than \$50,000 (c) Compensation (e) Expense account, other allowances		List all officers, directors, trustees, foundation n				(a) Evene	
2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances		(a) Name and address	hours per week	(If not paid,	employee benefit plans		
2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances	ΔΤΟ	H 11		0	0		0.
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"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 account, other allowances							
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NONE (c) Compensation plans and deferred other allowances othe		Name and address of a second s		(a) Oamer		(e) Expens	e account.
NONE	(a)	Name and address of each employee paid more than \$50,000		(c) Compensation	plans and deferred		
					compensation		
		NONE					
Total number of other employees paid over \$50,000.		110112					
Total number of other employees paid over \$50,000.							
Total number of other employees paid over \$50,000.							
Total number of other employees paid over \$50,000		*****					
Total number of other employees paid over \$50,000▶ NONE							
Total number of other employees paid over \$50,000▶ NONE							
Total number of other employees paid over \$50,000			 				
Total number of other employees paid over \$50,000							
	Total	number of other employees paid over \$50 000.			·		NONE

	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		
NONE		
		
tal numl	per of others receiving over \$50,000 for professional services	
art IX-A	Summary of Direct Charitable Activities	
	undation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of one and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
N/A		
·		
-		
	Summary of Program-Related Investments (see instructions)	 ·
art IX-B		
	he two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
Describe	he two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
Describe	he two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
Describe t	he two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
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Describe 1 NONE	he two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	he two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	he two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount

Par	Minimum Investment Return (All domestic foundations must complete this part. Foreisee instructions.)	ign founda	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		<u> </u>
	purposes		
а	Average monthly fair market value of securities	1a	<u>17,345,</u> 479.
b		1b	681,429.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	18,026,908.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)]	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	18,026,908.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	270,404.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	17,756,504.
6	Minimum investment return. Enter 5% of line 5	6	887,825.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here ▶ and do not complete this part)	ndations	
1	Minimum investment return from Part X, line 6	1 1	887,825.
•	Tax on investment income for 2016 from Part VI, line 5		
	Income tax for 2016 (This does not include the tax from Part VI).	1	
c	Add lines 2a and 2b	2c	11,204.
3	Distributable amount before adjustments Subtract line 2c from line 1		876,621.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	5	876,621.
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	876,621.
			
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	I I	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	3,344,619.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	3,344,619.
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	11,204.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,333,415.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	alculating	
	qualifies for the section 4940(e) reduction of tax in those years	J	

Form **990-PF** (2016)

Рa	rt XIII Undistributed Income (see instr	uctions)			
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
-	line 7				876,621.
2	Undistributed income, if any, as of the end of 2016				
	Enter-amount for-2015 only.				
	Total for pnor years 20 14 20 13 20 12				
	Excess distributions carryover, if any, to 2016				
	i ' '				
	From 2011				
	From 2012				
	2 (02 514				
	2 020 256				
		6,787,888.			
	Total of lines 3a through e	0,707,000.			
4	Qualifying distributions for 2016 from Part XII, line 4 > \$3,344,619.				
_					
	Applied to 2015, but not more than line 2a				<u> </u>
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election				
	required - see instructions)				876,621.
	Applied to 2016 distributable amount	2,467,998.			070,021.
	Remaining amount distributed out of corpus	2,407,550.			
9	Excess distributions carryover applied to 2016. (If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as				
_	indicated below:	9,255,886.			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	3/233/000.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
·	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount - see instructions				
е	Undistributed income for 2015 Subtract line				
	4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2016 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2017		[[
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
_	· ·				
8	Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)				
				·	
9	Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	9,255,886.			
10	Analysis of line 9				
	Excess from 2012		[
	Excess from 2013 165,018.	1			
	Excess from 2014 2,693,514.	1			1
	Excess from 2015 3,929,356.	1			
	Excess from 2016 2,467,998.	1]		
6		<u></u>			<u> </u>

			s (see instructions a			NOT APPLICA
	If the foundation has r	· ·		•	•	
	foundation, and the ruling					
b	Check box to indicate w		is a private operating		section 4942((j)(3) or 4942(j)
а	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part I or the minimum investment	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
	return from Part X for each j					
	85% of line 2a					
С	Qualifying distributions from Part					
_	XII, line 4 for each year listed			ļ	<u> </u>	
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					
	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 invest- ment 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 sup- port from an exempt					
	organization					
		tary Information (Complete this part	only if the founda	tion had \$5,000 c	or more in assets
Pai	TXV Supplemer			•	. ,	
Pai		uring the year - see	instructions.)			
		uring the year - see	<u>-</u>			
1	any time du Information Regarding List any managers of	uring the year - see g Foundation Manage the foundation who l	rs:	e than 2% of the total	al contributions rece	ived by the founda
1	any time di Information Regarding	uring the year - see g Foundation Manage the foundation who l	rs:	re than 2% of the tota more than \$5,000) (So	al contributions rece ee section 507(d)(2)	ived by the founda)
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Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid Du	ring the Year or App	roved for F	uture Payment	·
Grants and Contributions Paid Durage Recipient Name and address (home or business)	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
ATCH_12	_ 	ļ.—.		
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			[
			<u></u>	
Total	<u> </u>	·	▶ 3a	3,337,100.
b Approved for future payment				
			1	
NONE			ļ	
			1	
		1		
T-4-1		<u> </u>	L	0.
Total	· · · · · · · · · · · · · · · · · · ·	<u></u>		0. Earm 990 DE (2016

Part XVI-	A Analysis of Income-Prod	ucing Act	ivities			
	amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
•	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
•				 		Tocc mandenons)
						
				-		
		 :	-			
			 	 		
θ f				 		
	and contracts from government agencies					
			 			
	ship dues and assessments	<u> </u>		1	-	
	n savings and temporary cash investments			14	409,024.	
	s and interest from securities			 		
	al income or (loss) from real estate financed property			 		
	ebt-financed property			 		
	income or (loss) from personal property.					
	vestment income		-	<u> </u>		
	oss) from sales of assets other than inventory			18	764,503.	
,	•				, , , , , , , , , , , , , , , , , , , ,	
	me or (loss) from special events · · · · ofit or (loss) from sales of inventory					
•	venue a			-		
	TCH 13				36.	
е						
12 Subtotal	Add columns (b), (d), and (e)				1,173,563.	
13 Total Ac	dd line 12, columns (b), (d), and (e)				13	1,173,563.
(See worksh	eet in line 13 instructions to verify calc	ulations)				
Part XVI-	B Relationship of Activitie	s to the A	ccomplishment of E	xempt Pur	poses	
Line No.	Explain below how each activit	v for whic	h income is reported i	n column (e	e) of Part XVI-A contrib	uted importantly to the
▼	accomplishment of the foundation					
	N/A			·		
		·				
						
						
						
						
					_	
						
				-		
		_				
				-		
			-			

Part XV				ransfers To ar				ve With Non			ge 1.
- art Av		Exempt Orga				ons and	relations in			labie	_
		organization direc					-			Yes	No
		on 501(c) of the Co	ode (other than	section 501(c)(3) organization	s) or in sec	tion 527, relati	ng to political	1		
•		ations?	6 4-4 4								ı
		rs from the reportir	_		. •				40/4)		Х
		h er assets									X
		ansactions -			• • • • • • • • •			<u> </u>	1.0(2)		
		es of assets to a no	ncharitable exe	empt organization					16(1)	ĺ	X
		chases of assets fr									Х
		tal of facilities, equ									X
		nbursement arrang									X
		ns or loan guarante									X
		ormance of service									X
		of facilities, equipring of the control of the cont								four m	
		f the goods, other									
		any transaction o									
(a) Line no	$\neg \neg$	(b) Amount involved		noncharitable exemp			ption of transfers, tra				
	\Box	N/A				N/A					
			<u> </u>								
	\perp										
			 			<u> </u>					
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		oundation directly ed in section 501(c						I		es X	No
		' complete the follo		other than section	11 30 1(0)(3)) 01	iii seciion c	12/ *			عنے ت	,
		(a) Name of organization		(b) Type	of organization		(c) De	scription of relations	hip		
			·								
				ļ							
			_	 							
				 							
	Inde	pendities of perjury I decl	are that I have evan	nined this return includ	ling accompanying so	hadules and ets	stements and to the	hest of my knowledg	e and b	elief it	is thi
c		and complete Declaration						best of my knowledg	je and t	vener, it	13 (14
Sign		LLX NGO	illing?	D. 16-10	6-17		,	May the IRS			
Here	Signa	ature of office of trustee	7	Date		Title		with the pr (see instruction	eparer s)? X	Yes	below
			\mathcal{O}						·	۱ - ۱	
Daid		Print/Type preparer's na	ame	Preparer's sign	Dehin Phin	1 . 11	Date 04/04/47	Check if	MITC		
Paid		JENNIFER D RH	ODERICK	zennya	NEpie	unick	04/24/17	self-employed	P003	9573	5
Prepare	er [Firm's name ► EF	RNST & YOUN	NG U.S. LLP			Firm'	sEIN ► 34-65	655	96	

Form 990-PF (2016)

317-681-7000

Phone no

Use Only Firm's address ▶ 111 MONUMENT CIRCLE, SUITE 4000

INDIANAPOLIS, IN

46204

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

Schedule of Contributors

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Name of the organization		Employer identification number						
THE CAROLYN J. AND ROP								
FAMILY FOUNDATION	FAMILY FOUNDATION 76-0539246							
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 four	ndation						
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion						
	501(c)(3) taxable private foundation							
Note: Only a section 501(c)(7), instructions General Rule	(8), or (10) organization can check boxes for both the General Rule and a S	pecial Rule See						
X For an organization fili	ng Form 990, 990-EZ, or 990-PF that received, during the year, contributoroperty) from any one contributor. Complete Parts I and II. See instruction							
contributor's total con	tributions							
Special Rules								
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II								
contributor, during the	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.								
totaling \$5,000 or more during the year								

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

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

Name of organization THE CAROLYN J. AND ROBERT J. ALLISON, JR. Employer identification number FAMILY FOUNDATION

Part I	Contributors (See instructions) Use duplicate copies of Part I if additional space is needed.								
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contri							
1_	ROBERT J. AND CAROLYN J. ALLISON, JR CHASEWOOD CROSSING ONE 19500 STATE HWY 249, STE 670 HOUSTON, TX 77070	\$ 523,626.	Person X Payroll X Noncash (Complete Part II for noncash contributions)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
2	ROBERT J. AND CAROLYN J. ALLISON, JR. CHASEWOOD CROSSING ONE 19500 STATE HWY 249, STE 670 HOUSTON, TX 77070	\$ \$.	Person X Payroll Noncash (Complete Part II for noncash contributions)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
			Person Payroll Noncash (Complete Part II for noncash contributions)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
			Person Payroll Noncash (Complete Part II for noncash contributions)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
			Person Payroll Noncash (Complete Part II for noncash contributions)						

Name of organization THE CAROLYN J. AND ROBERT J. ALLISON, JR. FAMILY FOUNDATION

Employer identification number

Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	6,860 SHARES OF ANADARKO PETROLEUM STOCK		12/16/2016
(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 I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Employer identification number

Name of organization THE CAROLYN J. AND ROBERT J. ALLISON, JR.

	FAMILY FOUNDATION			
Part III	Exclusively religious, charitable, etc., (10) that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the	ne year from any one completing Part	one contributor. (Complete columns (a) through (e) and of exclusively religious, charitable, etc
	Lise duplicate copies of Part III if addition	year. (Enter this in	ormation once 5	ee instructions.) > \$
(a) No. from	Use duplicate copies of Part III if addition (b) Purpose of gift	(c) Use		(d)_Description_of how-gift is held
Part I				
		(e) Transfe	er of gift	
	Transferee's name, address, and	ZIP + 4	Relatio	nship of transferor to transferee
(a) No. from				
from Part I	(b) Purpose of gift	(c) Use	of gift 	(d) Description of how gift is held
		(e) Transfe	er of gift	L—————————————
	Transferee's name, address, and	nship of transferor to transferee		
(a) No	 			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transfe	er of aift	<u> </u>
)	(e) Hallste	or grit	
	Transferee's name, address, and	ZIP + 4	Relation	nship of transferor to transferee
	1			
(a) No. from	(b) Purpose of gift	(c) Use (of gift	(d) Description of how gift is held
Part I	<u> </u>			
		(e) Transfe	er of gift	
	Transferee's name, address, and	ZIP + 4	Relation	nship of transferor to transferee

L British CEEK	T	

	NET INVESTMENT INCOME 46,884. 361,984.
FROM SECURITIES	REVENUE AND EXPENSES PER BOOKS 46,884. 361,984.
ND INTEREST	TOTAL
FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES	DESCRIPTION_ CHARLES SCHWAB INTEREST INCOME GOLDMAN SACHS INTEREST INCOME CHARLES SCHWAB DIVIDEND INCOME

ATTACHMENT

76-0539246

FORM 990PE, PART I - OTHER INCOME

DESCRIPTION SECURITY LITIGATION INCOME

36. REVENUE AND EXPENSES PER BOOKS

NET INVESTMENT INCOME

36.

36.

36.

TOTALS

76-0539246			CHARITABLE PURPOSES 7,519.
	ATTACHMENT 3		ADJUSTED NET INCOME
4 d			NET INVESTMENT INCOME
2016 FORM 990-PF		ω	REVENUE AND EXPENSES PER BOOKS 7,519.
J. ALLISON, JR.		- ACCOUNTING FEE	TOTALS
THE CAROLYN J. AND ROBERT J. ALLISON, JR.		FORM 990PF, PART I - ACCOUNTING FEES	DESCRIPTION TAX PREPARATION FEES

ATTACHMENT

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

NET INVESTMENT INCOME EXPENSES PER BOOKS REVENUE AND DESCRIPTION

53, 192. 53, 192. 53, 192.

TOTALS

INVESTMENT MANAGEMENT FEE

53,192.

V 16-4.1F 2:48:27 PM 4342GR 1996 4/6/2017

2016 FORM 990-PF THE CAROLYN J. AND ROBERT J. ALLISON, JR. 76-0539246

ATTACHMENT 5

FORM 990PF, PART I - TAXES

REVENUE

AND

EXPENSES

PER BOOKS

FEDERAL TAX PAYMENTS

DESCRIPTION

75,000.

TOTALS

75,000.

2016 FORM 990-PF THE CAROLYN J. AND ROBERT J. ALLISON, JR. 76-0539246
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Gross sake Depreciation price process of sale process of	Kind of F	CAPITAL GAINS AND LOSSES FOR TAX ON INVEST Kind of Property Description						Date acquired	Date sold
PUBLICLY TRADED SECURITIES PROPERTY TYPE: SECURITIES 4,993,916. PUBLICLY TRADED SECURITIES 764,503.	Gross sale price less expenses of sale	allowed/	other	as of	Adj basis as of 12/31/69	Excess of FMV over	υ <u></u>	Gain or	
4,993,916. 4,229,413. 764,503.			PUBLICLY TR	ADED SECURI	TIES				VARIOUS
TAL GAIN(LOSS) — 764,503.	4,993,916.			PE: SECURIT	IES			764,503.	
TAL GAIN(LOSS)						:			
	TAL GAIN(L	oss)						764,503.	n •
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Statement Period December 1-31, 2016

Account Number 7222-1098

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CAROLYN J & R	
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Investment Detail - Fixed Income

	Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
Agency Securities	,		Cost Basis	;	;		Yield to Maturity
FFCB 4.95%17	205,000.0000	100.0123	205,025.22	226,313.38	1%	(21,288.16) ^b	10,147.50
DUE 01/03/17 CUSIP: 31331XFD9			237,095 00 a				2.67%
MOODY'S Aaa S&P' AA+						Accru	Accrued Interest: 5,017.38
Total Agency Securities	205,000 0000		205,025.22	226,313.38	1%	(21,288.16) ^b	10,147.50
	To	Total Cost Basis:	237,095.00				

Total Accrued Interest for Agency Securities: 5,017.38

FORM 990PF, PART II - CORPORATE STOCK		
DESCRIPTION	ENDING BOOK VALUE	ENDING <u>FMV</u>
ANADARKO PETROLEUM CORP AVALONBAY CMNTYS INC EQUITY RESIDENTIAL ISHARE IBOXX INVT GRADE ISHARES RUSSELL 2000 POWERSHARES S&P 500 LOW SCH US MID-CAP ETF SCHW US LCAP ETF SCHW US LCAP ETF SCHW US LCAP ETF VANGUARD MID CAP ETF VANGUARD S&P 500 ETF VANGUARD SAPLL CAP ETF VANGUARD SINDUSTRIALS VANGUARD INDUSTRIALS VANGUARD INFORMATION VANGUARD MATERIALS ETF	654,775. 400,137. 400,172. 1,067,728. 1,161,124. 1,001,069. 49,968. 999,996. 1,450,812. 854,376. 1,761,549. 603,658. 499,736. 499,775. 499,775.	1,736,277. 466,259. 381,590. 1,090,008. 2,065,833. 1,298,128. 1,127,408. 1,998,128. 1,926,128. 493,320. 493,320. 493,856. 491,346.
TOTALS	14,055,222.	17,462,062.

Investment Detail - Fixed Income

Corporate Bonds Cost Basis BHP BILLITON FIN 100,000.0000 100.8807 100,880.70 5.4%17F 100,000.000 100.8807 100,880.70 DUE 03/29/17 AT & T INC 1.77,197.00¹ MOODY'S: A3 S&P: A AT & T INC 1.7%17 100,000.00 AT & T INC 1.7%17 100,000.70 100,000.70 DUE 06/01/17 CUSIP: 00206RBF8 AMHEUSER-BUSCH 150,000.000 100.1115 150,167.25 ANHEUSER-BUSCH 150,000.0000 100.1115 150,167.25 AL375%17 151,368 00¹	Adjusted Market Value Cost Basis	Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
P. A 100,000.0000 100.8807	Cost Basis			Yield to Maturity
100,000.0000 100.0007		~1 %	(6,640.11) ^b	5,400.00
100,000.0000 100.0007	117,197.00 t		-	1.92%
100,000.0000 100.0007			Accrue	Accrued Interest: 1,380.00
P	101,124.76	<1%	(1,124.06) ^b	1,700.00
150,000.0000 100.1115	86.00 '			1.02%
150,000.0000 100.1115			Accri	Accrued Interest: 141.67
117	67.25 150,497.25	<1%	(330.00) b	2,062.50
	151,368 00 ^t			1.17%
GOSIF: USSZSTEN/ MOODY'S: A3 S&P: A-			Accri	Accrued Interest: 951.04

Schwab has provided accurate gain and loss information wherever possible for most investments. Cost basis data may be incomplete or unavailable for some of your holdings Please see "Endnotes for Your Account" section for an explanation of the endnote codes and symbols on this statement

Page 6 of 17

Schwab One® Account of CAROLYN J & ROBERT J ALLISON J

Account Number 7222-1098

Statement Period December 1-31, 2016

Investment Detail - Fixed Income (continued)

A Liberton City	Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
Corporate Bonds (continued)			Cost Basis				Yield to Maturity
}	130,000.0000	100,3605	130,468.65	130,417.99	~1 %	20.66 b	2,600.00
DUE 08/15/17 CUSIP: 48126EAA5			131,050.40 t			•	1.82%
MOODY'S: A3 S&P: A						Acci	Accrued Interest: 982.22
ORACLE CORPORATIO	200,000.0000	100.0041	200,008.20	200,522.61	%1	(514.41)	2,400.00
DUE 10/15/17			201,352.001				1.05%
MOODY'S: A1 S&P: AA-						Acci	Accrued Interest: 506.67
WELLS FARGO BK N 1.5%18	95,000.0000	99.8732	94,879.54	95,220.66	<1%	(341.12) ^b	1,425.00
DUE 01/16/18			95,586.151				1.36%
MOODY'S: A2 S&P: A	,			j		Acci	Accrued Interest: 653.13
VERIZON COMMUNICA 5.5%18	65,000.0000	104.2599	67,768.94	69,651.42	~1 %	(1,882.48) ^b	3,575.00
DUE 02/15/18			76,616.80 ^t				1.69%
MOODY'S Baat S&P						Accru	Accrued Interest: 1,350.56
888+							

Page 7 of 17

Schwab has provided accurate gain and loss information wherever possible for most investments. Cost basis data may be incomplete or unavailable for some of your holdings Please see "Endnotes for Your Account" section for an explanation of the endnote codes and symbols on this statement

Page 8 of 17

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Schwab One® Account of CAROLYN J & ROBERT J ALLISON J

Account Number 7222-1098

Statement Period December 1-31, 2016

Investment Detail - Fixed Income (continued)

Corporate Bonds (continued)	Par	Market Price	Market Value Cost Basis	Cost Basis	Assets	Gain or (Loss)	Estimated Annual Income Yield to Maturity
PARKER-HANNIFIN C 5.5%18	75,000.0000	105.2637	78,947.78	81,272.73	×1×	(2,324.95) ^b	4.125.00
DUE 05/15/18 CUSIP 70109HAH8 MOODY'S A3 S&P: A			89,343.75 t				1.66%
Total Corporate Bonds	915,000.0000		923,121.76	936,228.23	2%	Acc. (13 106 47) b	Accrued Interest: 527.08
	Tot	Total Cost Basis:	965,600.10				79,487.50
					Total Accru	Total Accrued Interest for Corporate Bonds: 6,492.37	rate Bonds: 6,492.37

NA 7 CO 1 Q /		
ATTACHMENT 9	ENDING	81,202.
ATTACH	ENDING BOOK VALUE	74,138.
FORM 990PE, PART II - OTHER INVESTMENTS	DESCRIPTION	GS HEDGE FUND/REAL ESTATE TOTALS

ATTACHMENT 10

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

TRUOMA

ADJUSTMENT TO BASIS OF CONTRIBUTED STOCK

15,126.

TOTAL

15,126.

2016 FORM 990-PF

THE CAROLYN J. AND ROBERT J. ALLISON, JR.

76-0539246

FORM 990PE, PART VIII - LIST OF OFFICERS	CERS, DIRECTORS, AND TRUSTEES		ATTACHMENT	MENT 11
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
ROBERT J. ALLISON CHASEWOOD CROSSING ONE 19500 STATE HIGHWAY 249 STE 670 HOUSTON, TX 77070	PRESIDENT 1.00	·	Ö	. 0
CAROLYN J. ALLISON CHASEWOOD CROSSING ONE 19500 STATE HIGHWAY 249 STE 670 HOUSTON, TX 77070	TREASURER 1.00	Ö	Ċ	· •
JANE S. ALLISON CHASEWOOD CROSSING ONE 19500 STATE HIGHWAY 249 STE 670 HOUSTON, TX 77070	SECRETARY 1.00	Ö	O	· 0
ANN A. STANISLAW CHASEWOOD CROSSING ONE 19500 STATE HIGHWAY 249 STE 670 HOUSTON, TX 77070	DIRECTOR 1.00	Ö	Ö	·
AMY A. WATKINS CHASEWOOD CROSSING ONE 19500 STATE HIGHWAY 249 STE 670 HOUSTON, TX 77070	DIRECTOR 1.00	.0	0.	·
	GRAND TOTALS	0	0	0

76-0539246		CONTRIBUTOR	PURPOSE OF GRAUT OR CONTRIBUTION	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE	CHARITAELE	CHARI TABLE
2016 FORM 990-PF	DNS FAID DURING THE YEAR	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF RECIPIENT	HOME	NONE P.C	HONE PC	NOME SO I	NONE PC	NOHE PC
THE CAROLYN J AND ROBERT J ALLISON, JR	FORM SEAPE, PRAT AV - GRANTS AND CONTRIBUTIONS FAID DURING THE YEAR		RECIPIENT NAME AND ADDRESS	HERITAGE FOUNDATION 214 MASSACHUSETTS AVENUE NE WASHINGTON, DC 20002	BE AN ANGEL FOUNDATION 1003 ALDINE BENDER HOUSTON, TA 77032	THE 100 CLUB, INC 5555 SAN FELIPE ST , STE 1750 HOUSTON, TX 77056	METHODIST HOSPITAL FOUNDATION 1707 SUNSET BLVD HOUSTON, TX 77005	PARKER COUNTY CENTER OF HOPE P O BON 190 WEATHERFORD, TN 76086	JUNIOR ACHIEVEMENT OF SOUTHEAST TEXAS INC 2115 E GOVERNORS CIRCLE HOUSTON, TX 77092

100,000.

250,000

5,000

25,000

AMOUNT

ALTACHMENT 12

5,000

1,100

ATTACHMENT 12

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THE CAROLYN J AND FOBERT J ALLISON, JR	2016 FORM 990-PF	76-0539246	
FORM 940PE, PERT AV = GRANTS AUD CONTRIBUTIONS FAID DURING THE	S PAID DURING THE YEAR		
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR	7	ATTACHMENT 12 (CONT'D)
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	ENGO.
ADVENT PRESBYTERIAN CHURCH 1879 U GERMANTOWN Phwy CORDOVA, TN 38016	HONE PC	CHARITABLE	125,000
SAM HOUSTON AREA COUNCIL BSA P O BOX 924528 HOUSTON, TX 77292-4528	NO!!E PC	CHARITABLE	250,000
UNITED WAY OF GREATER HOUSTON 50 WAUGH DR HOUSTON, IX 77007	HONE PC	CHARITABLE	60,000
TEXAS SCOTTISH RITE HOSPITAL FOR CHILDREN 222 WELBORN STREET DALLAS, TX 75219	NOUE PC	CHARITABLE	235,000
MARBRIDGE FOUNDATION, INC P O BOX 2250 MANCHACA, TX 78652	NONE PC	CHARITABLE	900'05
SHRINERS' HOSPITAL FOR CHILDRE!! P O BOX 31356 TAMPA, FL 33631-3356	HONE P.C	CHARITABLE	10,000

ATTACHMENT 12

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(CONT.D)		AMOUNT	5,000	5,000	200,000	10,000	1,000	1,000,000
ATTACHMENT 12						-		_
स्व।		PURPOSE OF GRANT OR CONTRIBUTION	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF PECIFIENT	ITOWE PC	NOME P.C.	NOJIE PC	NOILE PC	NOLIE PC	HOUE PC
		RECIPIENT NAME AND ADDRESS	SPRING-WOODLANDS MINISTRIES INC 810 EAST LOUETTA RD SPRING, TX 77373	NORTHWEST ASSISTANCE MINISTRIES 15555 KUYKENDAHL RD HOUSTON, TX 77090	LEG UP PROGRAM 1212 EAST LANCASTER FORT WORTH, TX 76102	DEPELCHIN CHILDREN'S CENTER 4950 MEMORIAL DRIVE HOUSTON, TY 77007	CROHN'S & COLITIS FOUNDATION OF AMERICA, INC 733 THIRD AVE SUITE 510 NEW YORA, NY 10017	ROSEHILL CHRISTIAN SCHOOL 19830 FM 2920 RD TOMBALL, TY 77377

2016 FORM 950-PF

THE CAROLYN J AND ROBERT J ALLISON, JR

FORM 990PF, PART NY - GRANTS AUD CONTRIBUTIONS PAID DURIUG THE YEAR

ATTACHMENT 12 (CONT'D)	AMOUNT	1,000,000	3, 337, 100			ENT 12
ATT	PURPOSE OF GRANT OR CONTRIBUTION	CHARITABLE	TOTAL CONTRIBUTIONS PAID			ATTACHMENT 12
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NOHE GOV				V 16-4 1F
		0				2 48 27 PM
	ADDRESS	NTER SAN ANTONI E MC 7835 9				4/6/2017
	RECIPIENT NAME AND ADDRESS	UT HEALTH SCIENCE CENTER SAN ANTONIO 7703 FLOYD CURL DRIVE NC 7835 SAN ANTONIO, TX 78229				4342GR 1996

2016 FORM 950-PF

THE CAROLYN J AND ROBERT J ALLISON, JR

76-0539246	ATTACHMENT 13	AMOUNT FUNCTION INCOME	36.	36.		ATTACHMENT 13
	ATT		01			
		EXCLUSION	0			
		AMOUNT				
		BUSINESS				
- ANALYSIS OF OTHER REVENUE						2:48:27 PM V 16-4.1F
FORM 990-PF, PART XVI-A - A		DESCRIPTION	SECURITY LITIGATION INCOME	TOTALS	4342GR 1996 47672017	/ TO2 /0 /F 0//T 1701:0:

2016 FORM 990-PF

THE CAROLYN J. AND ROBERT J. ALLISON, JR.