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Extended to November 15, 2017
Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

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

FOI CAL	¢111	ual year 2010 of tax year beginning		, and e	ituing		
Name	of	foundation				A Employer identification	n number
For	nt	taine Family Foundation	, Inc.			81-3526363	3
		nd street (or P O box number if mail is not delivered to street			Room/suite	B Telephone number	
83	2	Georgia Ave, Ste 400				423-756-52	213
City or	r to	own, state or province, country, and ZIP or foreign p	ostal code			C If exemption application is p	pending, check here
_Cha	at	ttanooga, TN 37402					
G Che	ck	all that apply: X Initial return	Initial return of a fo	ormer public o	charity	D 1. Foreign organization	s, check here
		Final return	Amended return			2. Foreign organizations m	eeting the 85% test
		X Address change	Name change			2. Foreign organizations me check here and attach co	· -
		type of organization: X Section 501(c)(3) e.				E If private foundation sta	
		ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	Accr	und .	under section 507(b)(1	·· ··
		rket value of all assets at end of year J Account	ther (specify) Modific			F If the foundation is in a	
(fron			ımn (d) must be on cash b			under section 507(b)(1)(B), check here
Part	-		(a) Revenue and		vestment	(a) Adjusted not	(d) Disbursements
<u> </u>	-	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books		ome	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	336835.			N/A	(
- 1		Check If the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments					
4	4	Dividends and interest from securities					
. !	5a	Gross rents					
	b	Net rental income or (loss)					
	6 a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all					
evenu		assets on line 6a					
~	-	Capital gain net income (from Part IV, line 2)	<u> </u>		0.		TED_\
1		Net short-term capital gain			 	RECE	101
		Income modifications Gross sales less returns				1	12017
"		and allowances Less Cost of goods sold				18 NUV O	100
		Gross profit or (loss)				181	
1.		Other income		_		OGDE	N. Ui
12		Total. Add lines 1 through 11	336835.		0.		
13	3	Compensation of officers, directors, trustees, etc	0.		0.		0.
14	4	Other employee salaries and wages					
] 18	5	Pension plans, employee benefits			<u>_</u> _		
S 10	6a	Legal fees Stmt 1	10985.		0.	<u> </u>	10985.
pense		Accounting fees					
		Other professional fees				 	
Administrative Ex		Interest Taxes Stmt 2	850.	_	0.	 	0.
istrati		Taxes Stmt 2 Depreciation and depletion	030.			 	
yiui 2		Occupancy				 	
P P 2		Travel, conferences, and meetings				 	
		Printing and publications					
E 2		Other expenses Stmt 3	7071.		0.		7046.
뛽		Total operating and administrative			-		
Operating and		expenses. Add lines 13 through 23	18906.		0.		18031.
O 2		Contributions, gifts, grants paid	0.				0.
2	6	Total expenses and disbursements.	10005		•	1	4000
+		Add lines 24 and 25	18906.		0.	 	18031.
2		Subtract line 26 from line 12:	317929.				
		Excess of revenue over expenses and disbursements	31/343.	<u> </u>	0.	 	
		Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)				N/A	
1	•	Uninoted lief liifallie (ii hafatise, aliter -o-)	1	L		I	1

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

Pert II Balance Sheets Stand standard answers in the department 1 1 1 1 1 1 1 1 1	For	m 99	0-PF(2016) Fontaine Family Foundati			3526363 Page 2
Cash - non-interest-bearing 1.7929	Ê	art		Beginning of year		
Services and temporary cash investments A Prediges receivable	느	<u> </u>	column should be for end-of-year amounts only	(a) Book Value		
Security receivable Less allowance for doubtful accounts Less accounts for such a less allowance		1	Cash - non-interest-bearing		17929.	<u>17929.</u>
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31 Total liabilities and net assets/fund balances Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5 0. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 317929.	Ë	ı	* *			
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 O. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 317929.	Ž	30	Total net assets or fund balances	- 0.	31/929.	
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 O. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 317929.		١			217020	
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 Oc. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 317929.	_	31			31/949.	
(must agree with end-of-year figure reported on prior year's return)10.2 Enter amount from Part I, line 27a2317929.3 Other increases not included in line 2 (itemize)30.4 Add lines 1, 2, and 34317929.5 Decreases not included in line 2 (itemize)50.6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 306317929.	P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 3 0. 4 Add lines 1, 2, and 3 4 317929. 5 Decreases not included in line 2 (itemize) ▶ 5 0. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 317929.	1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
3 0ther increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 0. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 317929.		•	- · · · · · · · · · · · · · · · · · · ·		1	
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 317929.	2	Ente	r amount from Part I, line 27a		2	
5 Decreases not included in line 2 (itemize) ► 5 0. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 317929.	3	Othe	r increases not included in line 2 (itemize)			
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 317929.	4	Add	lines 1, 2, and 3		4	
	<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30		

	aine Family Found Losses for Tax on In	ndation	, Inc.		81-35	26363 Page 3
(a) List and descr	the the kind(s) of property sold (e.grehouse; or common stock, 200 she	., real estate,	Income	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a						
b NOI	NE					
С					ļ	
<u>d</u>					<u> </u>	
<u>e</u>	(A) Depression allowed	T 4-3 0			#1 One of the	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale		(h) Gain or (los (e) plus (f) minus	
<u>a</u>		 		- -		
<u>b</u>						
c d		}				
е				-		_
	g gain in column (h) and owned by	the foundation	on 12/31/69		(I) Gains (Col. (h) ga	n minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any		col. (k), but not less th Losses (from col.	an -0-) or
a		<u> </u>				
b		<u> </u>				
<u> </u>						_
_d	 				 	
<u>e</u>		J				
2 Capital gain net income or (net cap	oital loss) $ \begin{cases} \text{If gain, also ente} \\ \text{If (loss), enter -} \end{cases} $	er in Part I, line D- in Part I, line	7 7) 2	•	
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8		nd (6):		}		
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Investment In	come	
(For optional use by domestic private	foundations subject to the section	4940(a) tax on	net investment in	come.)		N/A
If section 4940(d)(2) applies, leave th	is part blank.	, ,		•		
Was the foundation liable for the sect If "Yes," the foundation does not quali			•	iod?		Yes No
	ach column for each year; see the			ntries.		
(a) Base period years Calendar year (or tax year beginnir	(b) Adjusted qualifying dis	stributions	Net value of no	(c) oncharitable-use asse	ets Distr	(d) ibution ratio ivided by col. (c))
2015						
2014						
2013						
2012		 				
2011						
2 Total of line 1, column (d)					2	
, , ,	5-year base period - divide the total	on line 2 by 5.	or by the number	of vears		
the foundation has been in exister		• • • • • • • • • • • • • • • • • • • •		o. ,	3	
	•					
4 Enter the net value of noncharitab	le-use assets for 2016 from Part X,	line 5			4	
5 Multiply line 4 by line 3					5	
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)				6	
7 Add lines 5 and 6					7	
Enter qualifying distributions for	Part VII. line 4					
8 Enter qualifying distributions from If line 8 is equal to or greater than See the Part VI instructions.	i Part XII, line 4 I line 7, check the box in Part VI, lin	e 1b, and comp	olete that part usir	ng a 1% tax rate.	8	
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Part VI Excise Tax Based on Investment Income (Section		81-35 81-35	26363	ction	Page 4
<u></u>		1 300	- IIISU U	CHOIL	<u> </u>
1a Exempt operating foundations described in section 4940(d)(2), check here					
Date of ruling or determination letter: (attach copy of lett b Domestic foundations that meet the section 4940(e) requirements in Part V, check it		1.1			0.
	nere Light and enter 176	1 -			<u> </u>
of Part I, line 27b	enter 49/ of Port I line 10 and /h)	1			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations e					0.
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	and Others onter ()	3			0.
 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter 		4			0.
	-0-	5			<u> </u>
6 Credits/Payments: a 2016 estimated tax payments and 2015 overpayment credited to 2016	1 6 1	1			
	6a	1			
b Exempt foreign organizations - tax withheld at source	60				
c Tax paid with application for extension of time to file (Form 8868)	6d	ł			
d Backup withholding erroneously withheld	00]	,			0.
 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 222 	20 to attached	7			<u> </u>
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	EV IS attached	8			0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount over	.maid	9		-	
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax	· · · · · · · · · · · · · · · · · · ·	10			
Part VII-A Statements Regarding Activities	Refunded ▶				
1a During the tax year, did the foundation attempt to influence any national, state, or lo	real legislation or did it participate or intervene	ın.	т-	Yes	No
	ical legislation of the it participate of intervene	III	100	103	X
any political campaign?	al nurseage (see instructions for the definition	\ n	1a	-	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political	. , ,		1b_	-	┝≏
If the answer is "Yes" to 1a or 1b, attach a detailed description of the acti	ivities and copies of any materials publish	ed or	1	1	1
distributed by the foundation in connection with the activities					-
c Did the foundation file Form 1120-POL for this year?	and a the same		1c_	 	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed du			1	1	Ì
(1) On the foundation. > \$ 0. (2) On foundation m				1	İ
e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \blacktriangleright \$ 0.	expenditure tax imposed on foundation		-	ļ	[
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 gov	verning instrument, articles of incorporation, o	r			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the			3		Х
4a Did the foundation have unrelated business gross income of \$1,000 or more during	_		4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during t	he 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) sa	tisfied either;				1
By language in the governing instrument, or					1
 By state legislation that effectively amends the governing instrument so that no m 	nandatory directions that conflict with the state	law	- 1	.	
remain in the governing instrument?			6_	Х	L
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Y	es," complete Part II, col (c), and Part XV		7	Х	
8a Enter the states to which the foundation reports or with which it is registered (see ii	netructione)				
DE			_		
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)		⁻		1
of each state as required by General Instruction G? If "No," attach explanation	1		8b_	х	
9 Is the foundation claiming status as a private operating foundation within the meaning		ndar			$\lceil \rceil$
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If			9_		x
10 Did any persons become substantial contributors during the tax year? If "Yes," attact	•		10		Х
			Form 990)-PF	(2016)

	n 990-PF (2016) Fontaine Family Foundation, Inc. 81-352	6363		Page 5
Pá	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	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		X
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 ▶ Brett Rousch Telephone no. ▶ 423-7	56- <u>5</u>	213	
	Located at ▶832 Georgia Ave, Suite 400, Chattanooga, TN ZIP+4 ▶3	7402		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
	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 over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	l	<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
r 5 .	foreign country	<u> </u>		
PE	art 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
18	a During the year did the foundation (either directly or indirectly):	ľ		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	l		
	(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? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	1		
	(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)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
t	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		į	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2016?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			_
	defined in section 4942(j)(3) or 4942(j)(5)):		ı	
8	a 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? Yes X No			
	If "Yes," list the years ▶			
t	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		ľ	
	statement - see instructions.) N/A	2b		
C	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
				
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		l	
	during the year?			
t	b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after	1 1		
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016.) N/A	,		
4.	Form 4720, to determine if the foundation had excess business holdings in 2016) a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b		x
	b Did the foundation mivest during the year arry amount in a mariner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	48		
١	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	Ì	х
		rm 99 0)-PF (

Form 990-RF (2016) Fontaine Family Foundat		 _	<u>81-35263</u>	63	Page 6
Part VII-B Statements Regarding Activities for Which	h Form 4720 May Be R	lequired (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					\top
(1) Carry on propaganda, or otherwise attempt to influence legislation (se	ction 4945(e))?	Y	es X No		
(2) Influence the outcome of any specific public election (see section 495)	5); or to carry on, directly or indir	ectly,			
any voter registration drive?	-		es X No	Ţ	-
(3) Provide a grant to an individual for travel, study, or other similar purpo	oses?		es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization				ŀ	ı
4945(d)(4)(A)? (see instructions)			es X No	ļ	
(5) Provide for any purpose other than religious, charitable, scientific, liter	ary or educational numbers or t			l	
the prevention of cruelty to children or animals?	ary, or concational purposes, or i		es X No	- 1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify	Lunder the eventions described		55 ZZ NU	- 1	
section 53.4945 or in a current notice regarding disaster assistance (see in		iii negulalions	N/A	5b	
				30	
Organizations relying on a current notice regarding disaster assistance che				ŀ	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption			\	1	
expenditure responsibility for the grant?		1/A Y	es L No	ļ	
If "Yes," attach the statement required by Regulations section 53 4	• •				
6a Did the foundation, during the year, receive any funds, directly or indirectly	, to pay premiums on				İ
a personal benefit contract?		Y	es X No	- 1	
b Did the foundation, during the year, pay premiums, directly or indirectly, or	n a personal benefit contract?		L	6b	X
If "Yes" to 6b, file Form 8870				1	
7a At any time during the tax year, was the foundation a party to a prohibited	tax shelter transaction?	Y	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income at			N/A	7b	
Part VIII Information About Officers, Directors, Tru	istees, Foundation Mai	nagers, Highly			
Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and th		Tr. > 0	1 (4) 2	T	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e)	Expense unt, other
	to position	enter -0-)	compensation	allo	wances
John T Fontaine	President		1	ì	
832 Georgia Ave, Ste 400				<u> </u>	
Chattanooga, TN 37402	1.00	0.	0.	<u> </u>	0.
Coy Martin	Secretary				
832 Georgia Ave, Ste 400					
Chattanooga, TN 37402	1.00	0.	0.	1	0.
Brett Rousch	Treasurer				
832 Georgia Ave, Ste 400					
Chattanooga, TN 37402	1.00	0.	0.	İ	0.
	-				
2 Compensation of five highest-paid employees (other than those	included on line 1). If none,	enter "NONE."			
4. No. 11. 11. 11. 11. 11. 11. 11. 11. 11. 1	(b) Title, and average	1	(d) Contributions to employee benefit plans and deferred	(e)	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	l accor	unt, other wances
NONE		+	compensation	-	- Turious
	\neg				
				_	
	 				
		+			
				ľ	
		 		 	
		 		├─-	
	<u> </u>	<u> </u>	<u> </u>	L	
Total number of other employees paid over \$50,000				000 =	0 PF (2016)
			[nem	4411-6	r (001C)

	<u>-35263</u>	63 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	▶	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the	l E	expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	 	
1 <u>N/A</u>	4	
	-	
2	 	
	1	
	1	
3]	
	_	
	 	
4	4	
	1	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	A	Amount
1 N/A		-
	1	
		
2	4	
	1	
All other program-related investments. See instructions.	 	
3	1	
]	
]	
	1	
	4	
Total Addition of the court O	┼	
Total. Add lines 1 through 3	Eorm	990-PF (2016)
	1 01111	· (2010)

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, see	instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	150000.
b	Average of monthly cash balances	1b	55590.
C	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d	205590.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	}	
2	Acquisition indebtedness applicable to line 1 assets	2	_ 0.
3	Subtract line 2 from line 1d	3	205590.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3084.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	202506.
6	Minimum investment return. Enter 5% of line 5	6	10125.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	ıd certain	
	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	10125.
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	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	_ 10125.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	10125.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	10125.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		4 4 4 4 4
8	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	18031.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	_
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	18031.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	18031.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	jualifies for the	e section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,	001740	Toda's prior to 2010	2010	
line 7				_ 10125.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011	İ			
b From 2012				
c From 2013				
d From 2014				
e From 2015				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from	Ì			
Part XII, line 4: ► \$ 18031.			•	
a Applied to 2015, but not more than line 2a			0.	<u> </u>
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)	 		-	
c Treated as distributions out of corpus	0.			
(Election required - see instructions) d Applied to 2016 distributable amount				10125.
e Remaining amount distributed out of corpus	7906.			10125.
5 Excess distributions carryover applied to 2016	0.			0.
(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:				·
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	<u>79</u> 06.			
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 instr.			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
7 Amounts treated as distributions out of	'			
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011	0.			
not applied on line 5 or line 7				
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	7906.			
10 Analysis of line 9:				
a Excess from 2012			i	
b Excess from 2013				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016 7906.				Farry 900-PF (0040)

Part XIV Private Operating For	e ramily ro		NC •	N/A	81-352	26363 Page
1 a If the foundation has received a ruling or	•		-A, question 3)	N/A		
foundation, and the ruling is effective for						
b Check box to indicate whether the found	•	•	n control	4040(-)(0)		10/1/51
2 a Enter the lesser of the adjusted net	Tax year	ig toutidation described	Prior 3 years	4942(j)(3) or	1 494	2(j)(5)
	(a) 2016	(b) 2015	(c) 2014	(d) 20)13	(e) Totai
income from Part I or the minimum	(4) 2010	(5) 25 15	(0) 2011	(0) 20	,,,,	(c) rotar
investment return from Part X for			i			
each year listed b 85% of line 2a			 			·
		-				
c Qualifying distributions from Part XII, line 4 for each year listed						
d Amounts included in line 2c not						
used directly for active conduct of						
exempt activities						
e Qualifying distributions made directly			-		_	
for active conduct of exempt activities.						
Subtract line 2d from line 2c						
3 Complete 3a, b, or c for the						
alternative test relied upon; a "Assets" alternative test - enter;						
(1) Value of all assets						
(2) Value of assets qualifying		,	 			
under section 4942(j)(3)(B)(i)						
b "Endowment" alternative test - enter						
2/3 of minimum investment return shown in Part X, line 6 for each year listed						
c "Support" alternative test - enter:						
(1) Total support other than gross						
investment income (interest,				1		
dividends, rents, payments on securities loans (section						
512(a)(5)), or royalties)					1	
(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		ta Abia mart ambu	 	b - d 65 000		
Part XV Supplementary Information at any time during the			t the toundati	ion nad \$5,000	or more	in assets
		uctions.j	· - - · · · ·			
1 Information Regarding Foundation	•	4baa 00/ af tha tatal agai				
a List any managers of the foundation who year (but only if they have contributed m	onave contributed more nore than \$5,000), (See s	tnan 2% of the total com ection 507(d)(2).)	ributions received by	y the foundation beto	re the close (of any tax
John T Fontaine		201.011 201 (2/(2/1)				
b List any managers of the foundation who	o own 10% or more of th	e stock of a corporation	or an equally large i	nortion of the owners	hin of a part	nershin or
other entity) of which the foundation has			(or an equally fair go)	portion or the owner	anp or a part	noromp or
None						
2 Information Regarding Contribution	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:			
Check here X if the foundation o the foundation makes gifts, grants, etc. (nly makes contributions (see instructions) to indiv	to preselected charitable viduals or organizations i	organizations and d inder other condition	loes not accept unsoli ns, complete items 2a	cited reques	ts for funds. If
a The name, address, and telephone numb	i					
•		. •		- -		
b The form in which applications should b	e submitted and informa	tion and materials they s	nould include:			
c Any submission deadlines:						
d Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields	kinds of institutions	s, or other factors:		
623601 11-23-16						orm 990-PF (2016

Enter gross amounts unless otherwise indicated.	Unrelated t	usiness income		y 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
a					
b					
С					
d					
8					
f					

g Fees and contracts from government agencies 2 Membership dues and assessments

3 Interest on savings and temporary cash investments

4 Dividends and interest from securities

5 Net rental income or (loss) from real estate:

a Debt-financed property

b Not debt-financed property

6 Net rental income or (loss) from personal property

7 Other investment income

8 Gain or (loss) from sales of assets other than inventory

9 Net income or (loss) from special events

10 Gross profit or (loss) from sales of inventory

11 Other revenue:

Part XVI-B

Line No.

	· —			_
	d			
	е			
12	Subtotal	. Add columns	(b), (d), and (e)

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

(See worksheet in line 13 instructions to verify calculations.)

Relationship of Activities to the Accomplishment of Exempt Purposes

	the foundation's exempt purposes (other than by providing funds for such purposes).			
_				
_				
623621 11-23	3-16	Form 990-PF (2016)		

Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of

Form **990-PF** (2016)

Form 990-PF (2016)

Here

Paid Preparer

Use Only

Preparer's signature

Signature of officer or trustee

Firm's name

Firm's address

Print/Type preparer's name

Check

self- employed

Firm's EIN

ıf

Treasurer

Title

Date

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-004

2016

Name of the organization

Employer identification number

F	ontaine Family Foundation, Inc.	81-3526363			
Organization type (check	one)				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	e. See instructions			
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling by one contributor. Complete Parts I and II. See instructions for determining a contributor's	• •			
Special Rules					
sections 509(a)(1) any one contribu	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support of and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, itor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount Z, line 1. Complete Parts I and II.	or 16b, and that received from			
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a outions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ cruelty to children or animals. Complete Parts I, II, and III	•			
year, contributior is checked, enter purpose Don't co	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.				
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

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

Name of organization

Employer identification number

Fontaine Family Foundation, Inc.

81-3526363

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) Total contributions	(d) Type of contribution		
1	John T Fontaine 211 Kinkaid School Drive Houston, TX 77024	\$ 336835.	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 Oncash Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Oncash Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroli Oncash Complete Part II for noncash contributions)		

Employer identification number

Fontaine Family Foundation, Inc.

81-3526363

Part II	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		
		\$			
(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		
		\$	00. 000 F7 a- 000 PF) (0040)		

(e)) Tr	ans	fer	of	gift	
-----	------	-----	-----	----	------	--

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee			

10431101 151418 FONTAINE

Form 990-PF	Legal Fees		Statement 1	
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Legal Fees	10985.	, 0.		10985.
To Fm 990-PF, Pg 1, ln 16a	10985.	0.		10985.
Form 990-PF	Тах	es	S	tatement 2
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Federal Taxes	850.	0.		0.
To Form 990-PF, Pg 1, ln 18	850.	0.		0.
Form 990-PF	Other E	xpenses	s	tatement 3
		· · · · · · · · · · · · · · · · · · ·	•	
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Description Bank Fees Continuing Education Office Supplies	Expenses	Net Invest-	Adjusted	Charitable

Form 990-PF Other	Investments		Statement 4
Description	Valuation Method	Book Value	Fair Market Value
SIGNIX Inc	COST	300000.	300000.
Total to Form 990-PF, Part II, line 1	3	300000.	300000.