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Form, 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 rmation about Form 990-PF and its separate instructions is at least in Southern

Department of the Treasury

OMB No 1545-0052

_		Revenue Service Information about Form	1 330-PF allu its					Open to Fabric Inspection
_		endar year 2016 or tax year beginning		12/	<u>′01 , 2016,</u>	and endin		12/31, 2016
Name of foundation PAMSAY FAMILY FOLINDATION							1	nufication number
_		SAY FAMILY FOUNDATION				<u> </u>	81-45721	
٨	lumbe	r and street (or P O box number if mail is not delivered	to street address)			Room/suite	B Telephone nu	mber (see instructions)
_	FOU	NDATION SOURCE 501 SILVERSIDE	RD				(800)	839-1754
C	ity or	town, state or province, country, and ZIP or foreign pos	tal code				_	
							C If exemption app pending, check h	
_ 1	WIL	MINGTON, DE 19809-1377			<u> </u>			
G	Che	ck all that apply X Initial return	Initial i	eturn of	a former p	ublic chari	ty D 1 Foreign organ	nizations, check here >
		Final return	Amen	ded retu	rn			nizations meeting the
_		Address change	Name	change				ck here and attach
H	Che	ck type of organization X Section 501(c)(3) exempt pi	ıvate fo	undation		E If arrests founds	ation status was terminated
\perp		ection 4947(a)(1) nonexempt charitable trust			ate foundat		1 '	07(b)(1)(A), check here
l	Fair	market value of all assets at J Acco	unting method	X Cas	sh Acc	rual	F If the foundation	n is in a 60-month termination
	end	of year (from Part II, col (c), line	ther (specify) _				,	7(b)(1)(B), check here
_	16)	▶ \$ 228,059. (Part I, d	olumn (d) must be	on cash	basis_)_			
P	art l	Analysis of Revenue and Expenses (The	(a) Revenue	and	/E. N. E. /		4-3-4-1-1-1-1-1	(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses p		(b) Net inve		(c) Adjusted net income	for charitable purposes
		column (a) (see instructions))	books					(cash basis only)
\Box	1	Contributions, gifts, grants, etc., received (attach schedule)	228,	462.				
١	2	Check ► if the foundation is not required to attach Sch B.						
	3	Interest on savings and temporary cash investments.		1.		1.		
-	4	Dividends and interest from securities						
	5a	Gross rents						
	b	Net rental income or (loss)						
9		Net gain or (loss) from sale of assets not on line 10						
Revenue	b	Gross sales price for all assets on line 6a						
Š		Capital gain net income (from Part IV, line 2)				0.		
Ř		Net short-term capital gain						
		Income modifications						
	10a	Gross sales less returns and allowances						
		Less Cost of goods sold .						
		Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11	228,	463.		1.		
	13	Compensation of officers, directors, trustees, etc		0.		D	AFILER	-
ses	14	Other employee salaries and wages		Ţ			UEIVEU	
ens	15	Pension plans, employee benefits				စ		10
χ		Legal fees (attach schedule)				6.99 M	Y 1 8 2017	
Ш		Accounting fees (attach schedule)		T		<u> </u>	4 5 6 6 77	الما
Ν	С	Other professional fees (attach schedule)				h		E
rat	17	Interest				UU	DEN. UT	
ist	18	Taxes (attach schedule) (see instructions)					And the second second	
Ë	19	Depreciation (attach schedule) and depletion.						
Ê	20	Occupancy						
P	21	Travel, conferences, and meetings						
ă	22	Printing and publications						
<u>D</u>	23	Other expenses (attach schedule)						
atir	23 24 25	Total operating and administrative expenses						
ē	1	Add lines 13 through 23		0.				_
8	25	Contributions, gifts, grants paid						
_	26	Total expenses and disbursements Add lines 24 and 25		0.				0
	27	Subtract line 26 from line 12						
		Excess of revenue over expenses and disbursements	228	463.				<u> </u>
	b	Net investment income (if negative, enter -0-)				1.		
_	С	Adjusted net income (If negative, enter -0-)						

Form **990-PF** (2016)

		Attached schedules and amounts in the	Beginning of year	End o	of year
۲	art II	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
П	1	Cash - non-interest-bearing			
		Savings and temporary cash investments		10,001.	
		Accounts receivable	NAME OF THE PARTY	MOST AND	THE SECTION OF THE SE
-		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			MONEY TO SEE
		Less allowance for doubtful accounts ▶	<u> </u>		<u> </u>
	5	Grants receivable	<u></u>		
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)		THE PART OF THE PARTY.	
		Less allowance for doubtful accounts ▶			
sts	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
ď		Investments - U S and state government obligations (attach schedule)			
		Investments - corporate stock (attach schedule) ATCH, 1		218,462.	218,058.
	4.1 C	Investments - corporate bonds (attach schedule)	hancon various or the the transcribing state were between as to the constraint of the	The office of the state of the	SANGAR
1	11	Investments - land, buildings, and equipment basis	TO THE STATE OF TH		
ı		Less accumulated depreciation (attach schedule)	 		
1	12	Investments - mortgage loans		ļ	
	13 14	Investments - other (attach schedule)	(Province of Contractor Contractor), Anna and Alberta Contractor C	Altano (1881) (San a Talifornia Talifornia (San a 1881) a 1882)	invention without an engineering specific and the
			Part Name of the State of the S		
		equipment basis Less accumulated depreciation (attach schedule)		 	
		Other assets (describe ►)			
	J	Total assets (to be completed by all filers - see the	1		000 050
_		instructions Also, see page 1, item I)	0.	228,463.	228,059.
	1	Accounts payable and accrued expenses		<u> </u>	
48	1	Grants payable			
ies	19	Deferred revenue			
Ĕ	1	Loans from officers, directors, trustees, and other disqualified persons		<u> </u>	
Liabilities	L .	Mortgages and other notes payable (attach schedule)		 	
_	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0	
_			 	-	
S		Foundations that follow SFAS 117, check here. Land complete lines 24 through 26 and lines 30 and 31.			
alances		·	` T		
ā	24	Unrestricted	<u> </u>	 	
ä	26	Temporarily restricted			
Net Assets or Fund B	20				
교		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
ş	28	Paid-in or capital surplus, or land, bldg , and equipment fund		 	
SSE	29	Retained earnings, accumulated income, endowment, or other funds	I .	228,463	
Ä	30	Total net assets or fund balances (see instructions)		228,463	
Š	31	Total liabilities and net assets/fund balances (see		<u> </u>	
_	1	instructions)		228,463	
P	art l	Analysis of Changes in Net Assets or Fund Bal			
_		al net assets or fund balances at beginning of year - Part		(must agree with	
Ī		-of-year figure reported on prior year's return)	• •		0
2		er amount from Part I, line 27a			228,463.
		er increases not included in line 2 (itemize) ▶			
		lines 1, 2, and 3			228,463.
5		reases not included in line 2 (itemize) ▶		5_	
6		al net assets or fund balances at end of year (line 4 minu	s line 5) - Part II, column	(b), line 30 6	228,463.
_					5 000 DE (0040)

	• •	d describe the kind(s) of property sold		(b) How acquired	(c) Date acquired	(d) Date sold
	2-story b	rick warehouse, or common stock, 200	shs MLC Co)	P - Purchase D - Donation		(mo , day, yr)
1 a			··	ļ		
b				 		
C					<u>-</u>	<u> </u>
d			<u> </u>	 		
<u>e</u>			1 (2) 0 - 4 15 5	 		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
<u>a</u> b						
_с						
_d						
<u>e</u>	-					
	Complete only for assets s	showing gain in column (h) and owne	d by the foundation on 12/31/69	_ (0	Gains (Col (h) ga	ain minus
(i)	F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ı), ıf any	col	(k), but not less t Losses (from co	
а						
b						
С				1		
d						
е			<u> </u>	_		
2	Capital gain net income	or (not canital loce)	gain, also enter in Part I, line 7	tl . l		
		(11)	loss), enter -0- in Part I, line 7	[2 _		
3		gain or (loss) as defined in section	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			
	•	Part I, line 8, column (c) (see in		} <u> </u>		
_	Part I, line 8	<u> </u>		J 3		
Par For	Part I, line 8 t V Qualification	Under Section 4940(e) for Rec		Income	·	
Par For f se	Part I, line 8	Under Section 4940(e) for Rec private foundations subject to the leave this part blank NO the section 4942 tax on the distributions.	educed Tax on Net Investment ne section 4940(a) tax on net inves T AVAILABLE FOR INITIAL butable amount of any year in the	Income stment inco	ETURNS	Yes N
Par For f se	Part I, line 8	Under Section 4940(e) for Recognizate foundations subject to the leave this part blank NO the section 4942 tax on the distribution of qualify under section 4940(e)	educed Tax on Net Investment ne section 4940(a) tax on net inves T AVAILABLE FOR INITIAL butable amount of any year in the Do not complete this part	Income stment inco YEAR R	eturns	Yes N
Par For f se	Part I, line 8 t V Qualification optional use by domestration 4940(d)(2) applies, the foundation liable for es," the foundation does Enter the appropriate a	Under Section 4940(e) for Recognizate foundations subject to the leave this part blank NO the section 4942 tax on the distribution of qualify under section 4940(e)	educed Tax on Net Investment ne section 4940(a) tax on net inves T AVAILABLE FOR INITIAL butable amount of any year in the	Income stment inco YEAR R	eturns od?	Yes N
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Par For f see Vass f "Ye 1 Cale	Part I, line 8	Under Section 4940(e) for Recommendations subject to the leave this part blank Note the section 4942 tax on the distribution of qualify under section 4940(e) mount in each column for each year. (b) Adjusted qualifying distributions (d) It is for the 5-year base period - diversity of the formulation has been in existence if the contraction of the section 4940(e) and for the 5-year base period - diversity of the formulation has been in existence if the contraction of the section 4940(e) for Recommendation 4940(e) for Recommen	educed Tax on Net Investment ne section 4940(a) tax on net inves T AVAILABLE FOR INITIAL butable amount of any year in the Do not complete this part ear, see the instructions before ma (c) Net value of nonchantable-use assets	Income stment inco YEAR R base period king any e	eturns od? ntries (d) Distribution ra	atio
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Par For Vass f "Ye 1 Cale	Part I, line 8	Under Section 4940(e) for Recomposition of the section 4942 tax on the distribution of qualify under section 4940(e) mount in each column for each years of the section 4940(e) mount in each column for each years of the section 4940(e) mount in each column for each years of the section 4940(e) and for the 5-year base period - diversity of the section has been in existence if the concharitable-use assets for 2016	duced Tax on Net investment ne section 4940(a) tax on net inves T AVAILABLE FOR INITIAL butable amount of any year in the Do not complete this part ear, see the instructions before ma (c) Net value of nonchantable-use assets vide the total on line 2 by 5, or by these than 5 years. from Part X, line 5	Income street inco YEAR R base perio	eturns od? ntries (d) Distribution ra	atio
Par For f ser Vas f "Ye 1 Cale	Part I, line 8	Under Section 4940(e) for Recomposition of the section 4942 tax on the distribution of qualify under section 4940(e) mount in each column for each years of the section 4940(e) mount in each column for each years of the section 4940(e) mount in each column for each years of the section 4940(e) and for the 5-year base period - diversity of the section has been in existence if the concharitable-use assets for 2016	duced Tax on Net Investment ne section 4940(a) tax on net inves T AVAILABLE FOR INITIAL butable amount of any year in the Do not complete this part ear, see the instructions before ma (c) Net value of nonchantable-use assets vide the total on line 2 by 5, or by the ess than 5 years	Income street inco YEAR R base perio	eturns od? ntries (d) Distribution ra	atio
Par For f se Wass f "Ye 1 Cale	Part I, line 8 t V Qualification I optional use by domestication 4940(d)(2) applies, the foundation liable for es," the foundation does Enter the appropriate a (a) Base penod years indar year (or tax year beginning in) 2015 2014 2013 2012 2011 Total of line 1, column of Average distribution rate number of years the foundation does. Enter the net value of in Multiply line 4 by line 3 Enter 1% of net investing the foundation of the service of	Under Section 4940(e) for Recomposition of the section 4942 tax on the distribution of qualify under section 4940(e) mount in each column for each year (b) Adjusted qualifying distributions (d)	duced Tax on Net investment ne section 4940(a) tax on net inves T AVAILABLE FOR INITIAL butable amount of any year in the Do not complete this part ear, see the instructions before ma (c) Net value of nonchantable-use assets vide the total on line 2 by 5, or by these than 5 years. from Part X, line 5	Income stment inco YEAR R base period king any e 2 e 3 4	eturns od? ntries (d) Distribution ra	atio

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948- see in	struc	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			0.
	here 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			0.
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		_	0.
6	Credits/Payments			
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			<u> </u>
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			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ Refunded ▶ 11			
	t 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			l
	Instructions for the definition)?	1b		X_
	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			
	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		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		^
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		
	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	_	Х	}
	conflict with the state law remain in the governing instrument?	6	X	<u>]</u>
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		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
_	DE,			1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	8b	Х	
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	- 65		-
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,"	9		x
	complete Part XIV	-		 "
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10	X	
	names and addresses ATCH 2		0-PF	(2016)

	- V	
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	1	es 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	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 ▶ FOUNDATION SOURCE Telephone no ▶ 800-839-	-1754	
Located at ▶ 501 SILVERSIDE ROAD, SUITE 123 WILMINGTON, DE ZIP+4 ▶ 19809-13	377	
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		1
16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		'es No
over a bank, securities, or other financial account in a foreign country?	16	X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of		
the foreign country	到情報的	
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required	SEASONES V	es No
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		
1a During the year did the foundation (either directly or indirectly) (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?		
disqualified person?		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		
(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)?		
(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)		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		
section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	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))		
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?		
If "Yes," list the years		
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		200
all years listed, answer "No" and attach statement - see instructions)	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		3,5
• — · · · · · · · · · · · · · · · · · ·		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		
• • •		
b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or		
disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of		
the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		
foundation had excess business holdings in 2016)	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		
charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	X

3 Five highest-paid independent contractors for professional services (see instructions). If	none, enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) T	e of service (c) Compensation
IONE	
	_
	_
otal number of others receiving over \$50,000 for professional services	
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 s organizations and other beneficianes served, conferences convened, research papers produced, etc.	th as the number of Expenses
1 N/A	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All all an account related an action to Constitutions	
All other program-related investments. See instructions	
3 NONE	

Part	Minimum Investment Return (All domestic foundations must complete this part F see instructions.)	oreign foundation	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, e	tc,	
	purposes		
а	Average monthly fair market value of securities	. 1a	218,058.
b	Average of monthly cash balances	1b	5,000.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	223,058.
е	Reduction claimed for blockage or other factors reported on lines 1a and	1 1	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d		223,058.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount,	see	
	instructions)		3,346.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line		219,712.
6	Minimum investment return. Enter 5% of line 5		930.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here ▶ □ and do not complete this part)	foundations	
1	Minimum investment return from Part X, line 6	. 1	930.
- b	Income tax for 2016 (This does not include the tax from Part VI).	_	
	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	· · 	930.
4	Recoveries of amounts treated as qualifying distributions	· · · 	
5	Add lines 3 and 4	· · · 	930.
6	Deduction from distributable amount (see instructions).	· · 	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part 3	· · — — — — — — — — — — — — — — — — —	
•	line 1	l I	930.
Part	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
' а		1a	
	Program-related investments - total from Part IX-B		
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, e		
2			
•	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
	Suitability test (prior IRS approval required)		
	Cash distribution test (attach the required schedule)		
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, lin		
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment inco		_
	Enter 1% of Part I, line 27b (see instructions)		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		<u>0.</u>
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years whe	en calculating wi	hether the foundation
	qualifies for the section 4940(e) reduction of tax in those years		

Part XIII Undistributed Income (see instruct	tions)			
	(a)	(b)	(c)	(d)
1 Distributable amount for 2016 from Part XI,	Corpus	Years prior to 2015	2015	2016
line 7				930.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only				
b Total for pnor years 20 14 ,20 13 ,20 12				
3 Excess distributions carryover, if any, to 2016				
a From 2011				
b From 2012				
c From 2013				
d From 2014				
e From 2015				
f Total of lines 3a through e				
4 Qualifying distributions for 2016 from Part XII,	-			
line 4 ▶ \$				
a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2016 distributable amount.				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2016.				
(If an amount appears in column (d), the same amount must be shown in column (a))				<u> </u>
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract				
line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable				
amount - see instructions				
e 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				930.
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	0.			}
10 Analysis of line 9				
a Excess from 2012				
b Excess from 2013		[
c Excess from 2014				
d Excess from 2015				
e Excess from 2016				
0 EXCESS ITOM 2010		<u> </u>		50m 990-PE (2016)

Рa	rt XIV Private Op	erating Foundations	s (see instructions a	<u>ind Part VII-A, ques</u>	tion 9)	NOT APPLICABLE
1 a	If the foundation has	-		·	rating	
h	foundation, and the ruling Check box to indicate v	- · · · · · · · · · · · · · · · · · · ·	_		▶ L	2(J)(3) or 4942(J)(5)
		Tax year	is a private operating	Prior 3 years	III SCOTION 40 12	
Za	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
b	year listed					
	Qualifying distributions from Part					
d	XII, line 4 for each year listed _ Amounts included in line 2c not				 	
-	used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter (1) Value of all assets					-
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
С	line 6 for each year listed "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)	<u> </u>				
	(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 .					
Pa		ntary Information (uring the year - see		t only if the found	ation had \$5,000	or more in assets at
1	Information Regardin					
а	List any managers of before the close of any					eived by the foundation
<u> </u>	ATTACHME		Own 10% or more (of the stock of a cou	rnoration (or an equi	ally large portion of the
D	ownership of a partne					ally large portion of the
	N / T					
	N/A Information Regardin	g Contribution, Gran	t, Gift, Loan, Scholars	hip, etc., Programs:		
	Check here ► X if it unsolicited requests f	the foundation only or funds If the found	makes contributions lation makes gifts, gi	to preselected cha	aritable organizations ictions) to individuals	and does not accept or organizations under
	other conditions, comp			the person to whom s	andications should be	oddroood
	The name, address, a					addressed
b	The form in which app	olications should be su	bmitted and informat	ion and materials the	y should include	
	Any submission deadl	ines:				
d	Any restrictions or I factors	ımıtatıons on awards	s, such as by geog	raphical areas, char	itable fields, kinds o	of institutions, or other

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contribution Purpose of grant or contribution Amount Name and address (home or business) Amount Amount Amount Amount Amount Amount Amount Amount Supplementary Information (continued)									
3 Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment						
Recipient	If recipient is an individual, show any relationship to	Foundation	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									
_ ,									
	ļ								
		j							
	ļ								
	}								
Total	<u> </u>	<u> </u>	> 3a						
b Approved for future payment	, , , , , , , , , , , , , , , , , , , 								
b Approved for fature payment									
	Ì								
			1	(
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		1							
			1						
	})						
		1							
		<u> </u>	<u> </u>						
Total]					

Form 990-PF (2016)

Part XVI-A	Analysis of Income-Prod	ucing Acti	ivities			
Enter gross am	ounts unless otherwise indicated	Unrela	ated business income	Excluded by	y section 512, 513, or 514	(e)
4 Danasa		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
1 Program ser				 	 	(See instructions)
				 		
						
				 		
					7-	
f						
g Fees and	contracts from government agencies					
2 Membership	dues and assessments					
3 Interest on sa	ivings and temporary cash investments -			14	1.	
4 Dividends a	nd interest from securities			<u> </u>	<u> </u>	
5 Net rental in	ncome or (loss) from real estate	 	.	 		
a Debt-fina	anced property	ļ		 		
	-financed property			 		
	ome or (loss) from personal property	<u> </u>				
	tment income			 		
	from sales of assets other than inventory		-	 		
	or (loss) from special events · · · or (loss) from sales of inventory	-		<u> </u>		
	ue a					
e						
	id columns (b), (d), and (e)				1.	<u> </u>
	ne 12, columns (b), (d), and (e)				13	1.
	in line 13 instructions to verify calc		anamuliahurant of C	ware at Dur		
Part XVI-B						-
	Explain below how each activit	-				
▼ 8	accomplishment of the foundation	on's exemp	t purposes (other than	by providing	g funds for such purpose	es) (See instructions)
						
						
						
				 -		
			-			
						
						
					·	
						
						

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		<u> </u>									
1		•			-	ng with any other organization described Yes No					
		ion 501(c) of the Co	de (other than s	section 501(c)(3) o	rganizations	s) or in sec	ction 527, r	elating to political			
	organiz										
а		ers from the reporting									
		sh									X
_	(2) Other assets										
D	(1) Sales of assets to a noncharitable exempt organization										Х
		es of assets to a noi chases of assets fro									X
		ntal of facilities, equi									X
		mbursement arrange									X
		ans or loan guarantee									Х
		formance of service									Х
С		g of facilities, equipm									Х
		answer to any of th								fair m	arket
		of the goods, other									
	value i	n any transaction or	sharing arrange	ement, show in co	lumn (d) th	ne value of	the goods	, other assets, or	service	s rec	eived
(a) L	ine no	(b) Amount involved	(c) Name of no	oncharitable exempt orga	nization	(d) Descr	ption of transf	ers, transactions, and sh	aring arra	ngeme	nts
		N/A				N/A					
				 				•			
								,			
						 		·			
											
	+					·					
											
											
							····				
2a	Is the	foundation directly	or indirectly affi	liated with, or rela	ted to, one	or more	tax-exemp	t organizations			
		ed in section 501(c)	-					_	Y	es X	No
b		" complete the follow									
		(a) Name of organization	1	(b) Type of o	rganization			(c) Description of relation	ship		
											
		/									
	Hinder	penalties of penury, I decla	re that I have examin	ed this return, including a	ccompanying ed	hedules and st	atements and t	n the heet of my knowler	lae and t	olief it	is this
	correc	t, and complete Declaration of						- In our of the minimum of the minim	igo dilo i	raioi, it	15 1100,
Sig	ו ו	Orz		111111	2017		Sidan	May the IF			
Her	e Sign	nature of officer or trustee	$\overline{}$	Date	1001	Title	SILLER	with the p	reparer Y	Yes	below
	Joigi	Later or officer of truster		Dute	ſ	···		(see instruction	··»/· [_A	ا بهه [No
		Print/Type preparer's nar	me	Preparer's signature			Date	Check If	PTIN		
Paid	i	JEFFREY D HASI		JEFFREY D H	ASKELL			2017 self-employed	P013	4577	0
Pre	parer		UNDATION SO	·			5 - , 5 - , 1	Firm's EIN ▶ 5103			
Use	Only		E HOLLOW LN								
	•		KE SUCCESS,	-		1104	2	Phone no 800-8	39-1	754	
				——————————————————————————————————————					om 99 0		(2016)

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

Employer identification number

OMB No 1545-0047

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

ation
cial Rule See
ns totaling \$5,000 for determining a
% support test of the 990-EZ), Part II, line the greater of (1) plete Parts I and II
table, scientific, Parts I, II, and III
erved from any one o such nat were received ts unless the tc , contributions \$ \bigseleft\$
F

Employer identification number 81-4572150

Part I	Contributors (See instructions). Use duplicate copies of	Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RAMSAY, EDWARD L. 1451 NE 12TH STREET BEND, OR 97701	\$10,000.	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
2	E.L.&C.RAMSAY AS TTEES OF RAMSAY LVNG TR C/O E.L.&C. RAMSAY 1451 NE 12TH ST BEND, OR 97701	\$ 218,462.	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)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

81-4572150

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
2	AMERICAN FUNDS INCOME FD OF AMERICA A AMECX, 8082.565 SH.		
		\$\$.	12/29/2016
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	FRANKLIN INCOME FUND FKINX, 18575.137 SH.		
		\$ 42,909.	12/29/2016
(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
		_	
		<u> </u>	

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

Name of organization RAMSAY FAMILY FOUNDATION

Employer identification number

Ω1	-45	72	150	
-	72 -	1 / 2 .	LJU	

Part III	contributions of \$1,000 or less for the	the year from any ions completing Par e year (Enter this in	one contributor. (Ill, enter the total formation once. Se	Complete columns (a) through (e) and of exclusively religious, charitable, etc.,
	Use duplicate copies of Part III if addit	ionai space is neede	<u>:a</u>	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(a) Transf		
	Transferee's name, address, a	(e) Transf	-	nship of transferor to transferee
	Transfere & maine, address, an			isinp of dansiero to dansieree
(a) No.				
from Part 1	(b) Purpose of gift	(c) Use	of gift -	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transf	er of gift	
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Trans	er of gift	<u></u>
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee
	1			

ATTACHMENT 1

STOCK
CORPORATE
- II
PART
990PF,
FORM

ENDING <u>EMV</u>	175,149. 42,909.	218,058.
ENDING BOOK VALUE	175,553.	218,462.
DESCRIPTION	AMERICAN FUNDS INCOME FD ÓF AM FRANKLIN INCOME FUND	TOTALS

81-4572150

ATTACHMENT 2

LINE 10 - SUBSTANTIAL CONTRIBUTORS

FORM 990PF,

PART VII-A

RAMSAY FAMILY FOUNDATION

NAME AND ADDRESS

RAMSAY, EDWARD L. 1451 NE 12TH STREET BEND, OR 97701

E.L.&C.RAMSAY AS TTEES OF RAMSAY LVNG TR C/O E.L.&C. RAMSAY 1451 NE 12TH ST BEND, OR 97701

RAMSAY, CATHY 1451 NE 12TH STREET BEND, OR 97701

RAMSAY FAMILY FOUNDATION FORM 990PF, PART VIII - LIST OF OFFICERS,	2016 FORM 990-PF ERS, DIRECTORS, AND TRUSTEES		ATTACHMENT	81-4572150 IMENT 3
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
CATHY RAMSAY FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	DIR / SEC / TREAS 1.00	Ö	.0	.0
EDWARD L RAMSAY FOUNDATION SOURCE 501 SILVERSIDE RD WILMINGTON, DE 19809-1377	PRES / DIR 1.00	.0	°.	
	GRAND TOTALS	0	0.	0

ATTACHMENT 4

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

CATHY RAMSAY EDWARD L RAMSAY