

# 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



# 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.

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

Ford	alen	dar year 2016 or tax year beginning FEB	1, 2016	, and ending	<u>JAN 31, 2017</u>	
Nan	ne of	foundation			A Employer identification	number
		KING WOMAN'S HOME ASSOC			63-0302186	
		nd street (or P O box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number 334-279-09	07
		6 LAKERIDGE DRIVE pwn, state or province, country, and ZIP or foreign p	ootol oodo	<u></u>	_	
		rgomery, all 36117	ustai code		C If exemption application is p	ending, check here
G C	heck	all that apply: Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organizations	s, check here
		Final return	Amended return		2 Foreign organizations me	seting the 85% test
		Address change	Name change		Foreign organizations me check here and attach co	emputation
H C		type of organization: X Section 501(c)(3) ex			E If private foundation sta	
L Ea		ction 4947(a)(1) nonexempt charitable trust  krket value of all assets at end of year  J Accounti	Other taxable private foundand method: X Cash	Accrual	under section 507(b)(1)	• •
		• • —	her (specify)	Accidal	F If the foundation is in a under section 507(b)(1)	
("C		7,420,130. (Part I, colu		asis.)		/(D), Clicck liefe
Pa		Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) )	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received			N/A	
	2	Check X if the foundation is not required to attach Sch. B Interest on savings and temporary	103,396.	103,396.		STATEMENT 1
	3	cash investments	103,396.	103,396.		STATEMENT 1
	4 5 a	Dividends and interest from securities Gross rents	101,033.	101,033.		SIMILMENI Z
	b					
	6a		60,175.			
nge	Ь	Gross sales price for all assets on line 6a 295,960.				
Revenue	7	Capital gain net income (from Part IV, line 2)		60,175.		
æ	8	Net short-term capital gain				
	9	Income modifications Gross sales less returns				
	10a	and allowances				1
		Less Cost of goods sold  Green profet or (loss)				
	11	Gross profit or (loss) Other income	1,610.	0.		STATEMENT 3
	12	Total. Add lines 1 through 11	266,816.	265,206.	<del> </del>	
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits  Legal fees RECEIVED STMT 4				
ses	16a	Legal fees RECEIVED	1 670	1 (70		
ben	b	Accounting fees STMT 4 Other professional fees STMT 5	1,670. 46,508.	1,670. 46,508.		0.
Ĕ	С 17	Other professional fees STMT 5	40,500.	40,500.		•
Administrative Expense	18	Takes STAT 6	2,770.	2,092.		0.
stra	19	Depreciation and depletion				
ii.	20	Occupancy		•		
Adı	21	Travel, conferences, and meetings	1,447.	0.		0.
aud	22	Printing and publications				
THE STATE OF THE S	23	Other expenses STMT 7	3,419.	0.		0.
Operating and A	24	Total operating and administrative	55,814.	50,270.		
<b>€</b> 8	O.F.	expenses. Add lines 13 through 23 Contributions, gifts, grants paid	373,605.	50,270.		373,605.
-	20 26	Total expenses and disbursements	3,3,003.	<del> </del>	<del></del>	373,003.
:	2	Add lines 24 and 25	429,419.	50,270.		373,605.
	<u>"</u> 27	Subtract line 26 from line 12:		,	·····	
Y		Excess of revenue over expenses and disbursements	<162,603.>			
	急	Net investment income (if negative, enter -0-)		214,936.		
	1º	Adjusted not income (if penature enter -0-)	l l		N/A	l i

Form **990-PF** (2016)

623501 LHA For Paperwork Reduction Act Notice, see instructions.

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

_			<del></del>
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	6,330,771.
2	Enter amount from Part I, line 27a	2	<162,603.>
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	6,168,168.
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	6,168,168.

Form 990-PF (2016) WOR Part IV   Capital Gains	KING WOMAN'S HOM and Losses for Tax on In	E ASSOC	CIATION, Income	INC.	6	3-0302	2186	Page 3
(a) List and desc	ribe the kind(s) of property sold (e.g arehouse; or common stock, 200 shs	., real estate,	<u></u>	(b) How acquired P - Purchase D - Donation		acquired lay, yr.)	( <b>d</b> ) Date (mo., da	
1a CHARLES SCHWAB	ACCOUNT		-	P				
<u>b</u>							_	
<u>c</u>								
e e	<u> </u>			-				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale	<u> </u>		ain or (loss) s (f) minus (	g)	
a 295,960.		<del>                                     </del>	235,78	5.	- `- `-			175.
b		1						
C								
<u>d</u>								
e Complete only for contact the	(h)	15 - fo - del	10/01/00					
Complete only for assets snowin	ng gain in column (h) and owned by	T				Col. (h) gain r not less than		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı)		Losses	(from col. (h	))	
a					-		60	175.
b						<u> </u>	- 00,	
C		<u> </u>						
<u>d</u>								
е							-	
	∫ If gain, also ente	r ın Part I, lıne	7	7				
2 Capital gain net income or (net ca	ipital loss) $\int$ If (loss), enter -0	- ın Part I, lıne	7	f 2			60,	175.
3 Net short-term capital gain or (los		nd (6):						
If gain, also enter in Part I, line 8,				<b> </b>		NT / N		
If (loss), enter -0- in Part I, line 8 Part V   Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	)   3   Investment Inc	come	N/A		
(For optional use by domestic private								
	•	1340(8) (82 011	not investment in	201116.)				
If section 4940(d)(2) applies, leave the	nis part blank.							
Was the foundation liable for the sec	tion 4942 tax on the distributable am	ount of any ye	ar in the base peri	od?			Yes	X No
If "Yes," the foundation does not qual	ify under section 4940(e). Do not co	mplete this par	rt.	····				
	each column for each year; see the in	nstructions bef	ore making any er	itries.				
(a) Base period years	(b)	tbt	Not value of po	(c)	.	Distrib	(d) ution ratio	
Base period years Calendar year (or tax year beginnii			Net value of no	ncharitable-use asse		(col. (b) dıvı		<del></del>
2015		5,326.	<u> </u>	7,219,88				6236
2014		4,695. 8,550.		8,441,08 8,331,00				1440
2013 2012		7,000.		7,808,11				2125
2011		8,918.		8,243,66				2030
2011	· · · · · · · · · · · · · · · · · · ·	0,2200		0,220,00				
2 Total of line 1, column (d)					2		.26	6586
3 Average distribution ratio for the	5-year base period - divide the total (	on line 2 by 5,	or by the number	of years				
the foundation has been in exister	nce if less than 5 years				3		.05	<u> 3317</u>
						_		
4 Enter the net value of noncharitab	ele-use assets for 2016 from Part X,	line 5			4	7	<u>7,072,</u>	474.
							200	000
5 Multiply line 4 by line 3					5		3//,	083.
6 Enter 10/ of not investment incom	20 (19/ of Dart L line 27h)						າ	149.
6 Enter 1% of net investment incom	ic (170 UI FAIL I, IHIE 2/0)				6		۷,	<del></del>
7 Add lines 5 and 6					7		379.	232.
,							- · • /	
8 Enter qualifying distributions from	n Part XII, line 4				8		373,	605.
	n line 7, check the box in Part VI, line	tb, and comp	lete that part using	g a 1% tax rate.				
See the Part VI instructions.	,	,						
623521 11-23-16						Fo	orm <b>990-1</b>	<b>PF</b> (2016)

Form 990-PF (2016) WORKING WOMAN'S HOME ASSOCIA		63-030			Page 4
Part VI Excise Tax Based on Investment Income (Section		48 - see	instruc	tions	S)
1a Exempt operating foundations described in section 4940(d)(2), check here	I				
Date of ruling or determination letter: (attach copy of letter					
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check held	re 🕨 📖 and enter 1%	1		4,2	<u>99.</u>
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations ent	er 4% of Part I, line 12, col. (b).				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations or	nly. Others enter -0-)	2			0.
3 Add lines 1 and 2		3		4,2	
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations of	nly. Others enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	) <del>-</del>	5	•	4,2	<u>99.</u>
6 Credits/Payments:					- 1
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a 2,000.				ĺ
<b>b</b> Exempt foreign organizations - tax withheld at source	6b				
c 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		7		2,0	00.
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	<b>&gt;</b>	9		2,2	99.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overp	aid	10			
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax	Refunded >	11			
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local	l legislation or did it participate or intervene	ın		Yes	
any political campaign?			1a		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political	purposes (see instructions for the definition	?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activity	ties and copies of any materials publish	ed or	1		
distributed by the foundation in connection with the activities.					
c 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					
(1) On the foundation. > \$ (2) On foundation mar	nagers. ▶ \$0.	,			
e Enter the reimbursement (if any) paid by the foundation during the year for political ex	penditure tax imposed on foundation				
managers. ► \$0.					لـيــا
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 gover		•			لــِــا
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the ci	•		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the	ne year?	37/3	4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?	_	N/A	4b		77
5 Was there a liquidation, termination, dissolution, or substantial contraction during the	year?		5		Х
If "Yes," attach the statement required by General Instruction T	frad authors				
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satis	tied either:				
By language in the governing instrument, or	The state of the s	1-			
By state legislation that effectively amends the governing instrument so that no mar	idatory directions that conflict with the state	iaw	-	X	
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	Λ	
8a Enter the states to which the foundation reports or with which it is registered (see insi	trustions)				
AL			-		
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)		-		
	the Attorney delicial (or designate)		8b	X	L
of each state as required by General Instruction G? If "No," attach explanation  9 Is the foundation claiming status as a private operating foundation within the meaning	of section 4942/1//3) or 4942/1//5) for cale	ndar	"		
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Y		ruai	9		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a	•		10		X
Did any persons accommo decomment commonators during the tax year. II 165, ditabilita			Form <b>99</b> 0	)-PF	

Form **990-PF** (2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

Form 990-PF (2016) WORKING WOMAN'S HOME ASSO			<u>63-03021</u>	86 Pag	<u>1e 6</u>
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Yo	es X No		
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire	ectly,			
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	>	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? (see instructions)			es X No	1 1	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or f				
the prevention of cruelty to children or animals?	or oddodional purpocoo, or r		es X No		- 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the excentions described i		,3 (==) 140		
section 53.4945 or in a current notice regarding disaster assistance (see instruc		in riogulations	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check he	•				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for		unad			
		- / -	, No		
expenditure responsibility for the grant?		I/A Ye	es L No		
If "Yes," attach the statement required by Regulations section 53.4945-	1 /				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on		<b>□</b>		
a personal benefit contract?		Y6	es X No	_	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a per-	ersonal benefit contract?		<u> </u>	6b 2	K_
If "Yes" to 6b, file Form 8870			[****]		
7a At any time during the tax year, was the foundation a party to a prohibited tax st		Ye	es X No		
b if "Yes," did the foundation receive any proceeds or have any net income attribut			N/A	7b	
Part VIII Information About Officers, Directors, Truste	es, Foundation Mar	nagers, Highly			
Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their c		(-) Componentian	(d) Contributions to		_
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expens account, oth	se her
(a) Name and address	to position	(If not paid, enter -0-)	compensation	allowance	<u>s</u>
SEE STATEMENT 12		0.	0.		<u>) .</u>
				ļ	
2 Compensation of five highest-paid employees (other than those incl	uded on line 1). If none,	enter "NONE."			
			(d) Contributions to employee benefit plans	(e) Expens	se bor
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	and deferred compensation	account, ott	
NONE					
			ļ		
		1	<del> </del>	<b></b>	
		1			
		<del>                                     </del>	<u> </u>	<del>                                     </del>	_
		<u> </u>	1	<u> </u>	0
Total number of other employees paid over \$50,000				000 DF	<u> </u>
			Form	990-PF (20	116)

Form 990-PF (2016) WORKING WOMAN'S HOME ASSOCIATION,		3-0302186 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundatio Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<del> </del>		
Total number of others receiving over \$50,000 for professional services		<u> </u>
Part IX-A   Summary of Direct Charitable Activities		T
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce	I information such as the	Expenses
1 N/A		
2		
	<del></del>	_
^		
3		<del></del>
4		
	<del></del>	
Part IX-B   Summary of Program-Related Investments	<del></del>	
Describe the two largest program-related investments made by the foundation during the tax year on line	es 1 and 2.	Amount
1 N/A		
2	·	
All other program-related investments. See instructions.		
3		
		_
		$\dashv$
Total. Add lines 1 through 3		·
	# <del>****</del>	Form <b>990-PF</b> (2016)

For	m 990-PF (2016) WORKING WOMAN'S HOME ASSOCIATION, INC.	63-	-0302186 Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	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	7,044,317. 135,860.
b	Average of monthly cash balances	1b	135,860.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	7,180,177.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) <u>1e</u> <u>0 .</u>		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	7,180,177.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	107,703.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,072,474.
6_	Minimum investment return. Enter 5% of line 5	6	353,624.
LP	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	id certain	
-	foreign organizations check here  and do not complete this part.)	· · · · ·	252 604
1	Minimum investment return from Part X, line 6	<del>  1   -</del>	353,624.
2a	Tax on investment income for 2016 from Part VI, line 5  2a 4,299.	1 1	
þ	Income tax for 2016. (This does not include the tax from Part VI.)	<del>                                     </del>	4 200
C	Add lines 2a and 2b	2c	4,299.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	349,325.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	349,325.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	349,325.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	373,605.
b	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	373,605.
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	373,605.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for	the section

Form **990-PF** (2016)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	( <b>d)</b> 2016
1 Distributable amount for 2016 from Part XI, line 7				349,325.
2 Undistributed income, if any, as of the end of 2016				349,345.
a Enter amount for 2015 only			0.	
<b>b</b> Total for prior years:				
· - · - · · · · · · · · · · · · ·		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011 25,099. b From 2012 20,944.				
b From 2012 20,944. c From 2013 31,042.				
d From 2014 59, 251.				
e From 2015 38,328.				
f Total of lines 3a through e	174,664.			
4 Qualifying distributions for 2016 from	1/4,004.			
Part XII, line 4: ▶ \$ 373,605.				
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				349,325.
e Remaining amount distributed out of corpus	24,280.			
Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount	0.			0.
6 Enter the net total of each column as				
indicated below:  a Corpus Add lines 3f, 4c, and 4e Subtract line 5	198,944.			
<b>b</b> Prior years' undistributed income. Subtract	1,0,,,11,			
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	_			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011	25,099.			
not applied on line 5 or line 7	23,033.			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	173,845.			
10 Analysis of line 9:	173,043.		-	
a Excess from 2012 20,944.				
b Excess from 2013 31,042.				
c Excess from 2014 59,251.				
d Excess from 2015 38,328.				
e Excess from 2016 24, 280.				

Form 990-PF (2016) WORKING	WOMAN'S HO	ME ASSOCIAT	ION, INC.		02186 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo		=	<b>&gt;</b>		
<b>b</b> Check box to indicate whether the found		ng foundation described in		4942(j)(3) or 4	942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		1
income from Part I or the minimum	(a) 2016	<b>(b)</b> 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for				1	
each year listed					
<b>b</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 Complete 3a, b, or c for the alternative test relied upon:					
<ul><li>a "Assets" alternative test - enter:</li><li>(1) Value of all assets</li></ul>					
(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, dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	rmation (Complet	o this part only if	the foundation	1 22d \$5 000 or mor	ro in assets
at any time during t			the foundation	nad \$5,000 or mor	e iii assets
Information Regarding Foundation     List any managers of the foundation whyear (but only if they have contributed in NONE	o have contributed more t		butions received by the	foundation before the clos	e of any tax
b List any managers of the foundation wh other entity) of which the foundation ha			or an equally large portio	n of the ownership of a pa	rtnership or
NONE					
	only makes contributions t	o preselected charitable o	organizations and does n	·	
the foundation makes gifts, grants, etc.	· · · · · · · · · · · · · · · · · · ·				<u>d.</u>
a The name, address, and telephone number	ber or e-mail address of th	ne person to whom applic	ations should be addres	sed:	
SEE STATEMENT 13	<u></u>		· · · · · · · · · · · · · · · · · · ·		
<b>b</b> The form in which applications should b	e submitted and informati	ion and materials they sh	ould include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographica	l areas, charitable fields, l	kınds of institutions, or c	other factors:	

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation status of show any relationship to Amount any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year AID TO INMATE MOTHERS P O BOX 986 MONTGOMERY, AL 36101 10,000. BOYS & GIRLS CLUBS OF THE RIVER REGION P O BOX 235 MONTGOMERY, AL 36101 18,000. CATHOLIC SOCIAL SERVICES CHURCH 4455 NARROW LANE ROAD MONTGOMERY, AL 36116 18,000. CHILD PROTECT 935 S PERRY STREET MONTGOMERY, AL 36104 15,000. CHILDREN'S CENTER schoor 310 N MADISON TERRACE MONTGOMERY, AL 36107 6,000. SEE CONTINUATION SHEET(S) 373,605. **▶** 3a **b** Approved for future payment NONE Total

## Part XVI-A Analysis of Income-Producing Activities

Form 990-PF (2016)

					··
Enter gross amounts unless otherwise indicated.	(a) Business	ed business income (b)	(C) Exclu-	(d)	(e) Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a	_				
b					
c					
d					
e	1				
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments		<u></u>	14	103,396. 101,635.	
4 Dividends and interest from securities			14	101,635.	
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	İ				
7 Other investment income					
8 Gain or (loss) from sales of assets other			1		
than inventory			18	60,175.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			1 1		
11 Other revenue:					
a LAWSUIT SETTLEMENT			01	1,610.	
b					
	-				
c					
c					
cd		0.		266,816.	0.
d e Subtotal. Add columns (b), (d), and (e)		0.			
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0.		266,816.	0. 266,816.
c d e 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.)				13	
c d e 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.)  Part XVI-B Relationship of Activities	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.
c d e 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.)  Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which inc	to the Acco	mplishment of Ex	empt	13 Purposes	266,816.

1 Did the	organization directly or indi	rectly engage in any	of the followin	g with any other organization	on described in section	on 501(c) of		Yes	No
the Cod	e (other than section 501(c)	)(3) organizations) oi	r in section 52	7, relating to political organ	izations?				
<b>a</b> Transfei	rs from the reporting founda	ation to a noncharital	ble exempt org	janization of:					
(1) Cas	sh						1a(1)		_X_
(2) Oth	ier assets						1a(2)		X
<b>b</b> Other tra	ansactions:								
(1) Sal	es of assets to a noncharital	ble exempt organizat	tion				1b(1)		<u> </u>
(2) Pur	rchases of assets from a noi	ncharitable exempt o	organization				1b(2)		X
<b>(3)</b> Rer	ntal of facilities, equipment,	or other assets					1b(3)		<u> </u>
(4) Rei	mbursement arrangements						1b(4)		X
	ans or loan guarantees						1b(5)		<u>X</u>
( <b>6</b> ) Per	formance of services or me	mbership or fundrais	sing solicitation	ns			1b(6)		X
	of facilities, equipment, ma						<u>1c</u>		X
	nswer to any of the above is							ets,	
	ces given by the reporting fo			ed less than fair market valu	e in any transaction	or sharing arrangement, sh	ow in		
T	(d) the value of the goods,				<u></u>				
(a) Line no	(b) Amount involved	(c) Name of		exempt organization	(d) Description	of transfers, transactions, and sh	aring arra	angemen	ts
			N/A						
					<del>- </del>				
						<del></del>			
-									
		<u> </u>							
					<del></del>				
				<del>.</del>					
<del></del>		<del></del>	<del>-</del>		<del> </del>			-	
					-				
					_	<del></del>			
-				····		<del></del>			
	<del></del>			<del></del>					
	<del> </del>				<del>-   </del>	<del> </del>			
On lothofo	oundation directly or indirect	the offiliated with or i	rolated to one	or more tay-event organi	zatione described				
	on 501(c) of the Code (other	•	-	• •	zations described		Yes	ΓX	No
	complete the following schi		(0)) 01 111 3000	011 327					_,
U II IES,	(a) Name of org		-	(b) Type of organization	Ι (	c) Description of relationsh	ID		
	N/A	,		(a) type or or games and					
						<del></del>			
					1				
	der penalties of perjury, I declare t						the IRS o	liscuss t	nis
Sign	belief, it is true, correct, and com	nplete Declaration of pre	parer (other than	taxpayer) is based on all informa	tion of which preparer ha	s any knowledge retur	n with the	e prepare	er .
Here	Susan	K. Watt		16/5/17	TREASU	RER Z	Yes		No
Si	ignature of officer or trustee			Date	Title				
	Print/Type preparer's na	ame	Preparer's si	gnature	Date	Check if PTIN			
					1	self- employed			
Paid	RENEE B. H			B. HUBBARD	05/31/17		187		
Prepare	Thin onano	KSON THOR	MTON &	CO., PC	<del></del>	Firm's EIN ► 63-10	352	28	
Use Only	·								
	Firm's address ▶ PO	BOX 96							
	MO	NTGOMERY,	AL 36	101-0096		Phone no. 334-83	4-7	660	
							00	-	

Part XV Supplementary Information			<del> </del>	<del></del>
3 Grants and Contributions Paid During the Y		<del></del>		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	<del></del>	
CHILDREN'S PROTECTIVE ASSOCIATION -		PC		
BRANTWOOD CHILDREN'S HOME				
1309 UPPER WETUMPKA ROAD				
MONTGOMERY, AL 36107				21,000
EASTER SEALS OF CENTRAL ALABAMA				
2125 E. SOUTH BOULEVARD		PC		
MONTGOMERY, AL 36116				2,000
FAMILY PROMISE OF MONTGOMERY		PC		
Р О ВОХ 36				
MONTGOMERY, AL 36101				15,000
FRIENDSHIP MISSION		PC		
3561 MOBILE HWY				
MONTGOMERY, AL 36108				30,000
HANDS ON RIVER REGION (VIC)		PC		
2101 EASTERN BLVD #322				3,000
MONTGOMERY, AL 36117				3,000
HOPE INSPIRED MINISTRIES		PC		
52 ADAMS AVENUE MONTGOMERY, AL 36104				10,000
MONIGONERI, AE 30104			, <u></u> ,	
A LOUMNONGE COUNCELLING CENMED		PC		
LIGHTHOUSE COUNSELING CENTER 1415 E SOUTH BOULEVARD				
MONTGOMERY, AL 36116				12,000
MEDICAL OUTREACH MINISTRIES		PC		
1301 EAST SOUTH BLVD				35 000
MONTGOMERY, AL 36116				35,000
MONTGOMERY AIDS OUTREACH		PC		
2900 MCGEHEE ROAD				4,000
MONTGOMERY, AL 36117	<del>-  </del>	<del>                                     </del>	·	1,000
MONTGOMERY AREA COUNCIL ON AGING -		PC		
MEALS ON WHEELS				
115 E. JEFFERSON STREET				
MONTGOMERY, AL 36104				20,000 306,605

WORKING WOMAN'S HOME ASSOCIATION, INC. 63-0302186

[Part XV | Supplementary Information

Part XV   Supplementary Information				<del></del>
3 Grants and Contributions Paid During the	fear (Continuation)  If recipient is an individual,			
Recipient Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	Toopion		-
MONTGOMERY AREA FAMILY VIOLENCE		PC		-
PROGRAM - FAMILY SUNSHINE CENTER				
P O BOX 5160				
MONTGOMERY, AL 36103				40,000.
MONTGOMERY AREA FOOD BANK		PC		
521 TRADE CENTER STREET				
MONTGOMERY, AL 36108			<del></del>	15,000.
MONTGOMERY CHRISTIAN SCHOOL		всноог		
1728 SOUTH HULL STREET				
MONTGOMERY, AL 36104				4,105.
MONTGOMERY EDUCATION FOUNDATION -		PC		
CACF				
434 N MCDONOUGH STREET				
MONTGOMERY, AL 36104				2,000.
MONTGOMERY STEP FOUNDATION		PC		
52 ADAMS AVENUE				
MONTGOMERY, AL 36104				7,500.
NEIGHBORS IN CHRIST		PC		
P O BOX 230190				
MONTGOMERY, AL 36123				15,000.
NELLIE BURGE COMMUNITY CENTER	ļ	PC		İ
1226 CLAY STREET				
MONTGOMERY, AL 36104				40,000.
NEW BEGINNINGS EDUCATIONAL CENTER		PC		
806 S DECATUR STREET				10,000
MONTGOMERY, AL 36104		1		12,000.
REBUILDING TOGETHER		PC		
123 JULIA STREET				7 000
MONTGOMERY, AL 36104	+	<del> </del>		7,000.
SAV-A-LIFE		PC		
P O BOX 241664				2,000.
MONTGOMERY, AL 36124  Total from continuation sheets		1	<u> </u>	

WORKING WOMAN'S HOME ASSOCIATION, INC.

63-0302186

3 Grants and Contributions Paid During the Ye	ar (Continuation)			
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
(name and address (nome or business)	or substantial contributor	recipient		
SECOND CHANCE FOUNDATION		₽C		
810 CEDAR STREET				
MONTGOMERY, AL 36106			·	5,000.
				ļ
SUCCESS BY 6		PC		
2358 FAIRLANE DRIVE				
MONTGOMERY, AL 36116				5,000.
			<del></del>	
				<del> </del>
		1		
<del></del>				
		]		
		]		
		<u>                                      </u>		
Total from continuation sheets				

FORM 990-PF INTERE	ST ON SAVIN	IGS AND T	EMPORAR	Y CASH	INVESTMENTS	STATEMENT 1	
SOURCE		RE			(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
INTEREST			103,396. 103,396. 103,396. 103,396.				
TOTAL TO PART I, LI	NE 3				103,396.		
FORM 990-PF	DIVIDENDS	S AND INT	REST F	ROM SEC	URITIES	STATEMENT 2	
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDE	3	(A) REVENUE ER BOOK			
DIVIDENDS	101,635.		0.	101,63	5. 101,63	5.	
TO PART I, LINE 4	101,635.		0.	101,63	5. 101,63	5.	
FORM 990-PF		OTHER	INCOME		(B)	STATEMENT 3	
DESCRIPTION			REVE PER B	NUE	NET INVEST- MENT INCOME	ADJUSTED NET INCOME	
LAWSUIT SETTLEMENT		-		1,610.	0	•	
TOTAL TO FORM 990-P	F, PART I,	LINE 11		1,610.	0	•	
FORM 990-PF		ACCOUN	ING FE	ES		STATEMENT 4	
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST- INCOME			
ACCOUNTING FEES	<del></del>	1,670		1,670	•	0 .	
TO FORM 990-PF, PG		1,670		1,670	_	0.	

FORM 990-PF	OTHER PROFES	HER PROFESSIONAL FEES STA		TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS			(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	46,508.	46,508.		0.
TO FORM 990-PF, PG 1, LN 16C	46,508.	46,508.		0.
FORM 990-PF	TAX	ES	S	TATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
EXCISE TAX FOREIGN TAX	678. 2,092.			0.
TO FORM 990-PF, PG 1, LN 18	2,770.	2,092.		0.
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INSURANCE MISCELLANEOUS	3,023.			0.
TO FORM 990-PF, PG 1, LN 23	3,419.	0.		0.

•			
FORM 990-PF U.S. AND STATE/CI	TY GOVERNMENT	OBLIGATIONS	STATEMENT 8
DESCRIPTION (	U.S. OTHER GOV'T GOV'T	BOOK VALUE	FAIR MARKET VALUE
GOVT. OBLIGATIONS	х	99,681.	99,808
TOTAL U.S. GOVERNMENT OBLIGATIONS	-	99,681.	99,808
TOTAL STATE AND MUNICIPAL GOVERNMENT	OBLIGATIONS		
TOTAL TO FORM 990-PF, PART II, LINE	- 10A =	99,681.	99,808.
FORM 990-PF CORPO	ORATE STOCK		STATEMENT 9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORP. STOCK	-	3,594,324.	5,099,615.
TOTAL TO FORM 990-PF, PART II, LINE	10B =	3,594,324.	5,099,615.
FORM 990-PF CORPO	ORATE BONDS		STATEMENT 10
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORP. BONDS	-	1,408,211.	1,386,824
TOTAL TO FORM 990-PF, PART II, LINE	10C	1,408,211.	1,386,824
FORM 990-PF OTHER	INVESTMENTS		STATEMENT 11
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
FOREIGN BONDS	COST	1,017,177.	785,108
TOTAL TO FORM 990-PF, PART II, LINE	13	1,017,177.	785,108
	=		

	LIST OF OFFICERS, DE AND FOUNDATION MANAGE		STAT	EMENT 12
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
NANCY BRADFORD 1735 HILLWOOD DRIVE MONTGOMERY, AL 36106	PRESIDENT 0.00	0.	0.	0.
CATHERINE DAVIS 8249 MARSH POINTE DRIVE MONTGOMERY, AL 36117	VICE PRESIDENT 0.00	0.	0.	0.
KATHY BROWN 2625 GIRARD STREET MONTGOMERY, AL 36106	SECRETARY 0.00	0.	0.	0.
SUSAN PATTON 7526 LAKERIDGE DRIVE MONTGOMERY, AL 36117	TREASURER 0.00	0.	0.	0.
HELEN WELLS 6456 WYNWOOD PLACE MONTGOMERY, AL 36117	DIRECTOR 0.00	0.	0.	0.
BETH DUBINA 3259 BANKHEAD AVENUE MONTGOMERY, AL 36106	DIRECTOR 0.00	0.	0.	0.
WINIFRED STAKELEY 3200 JASMINE ROAD MONTGOMERY, AL 36111	DIRECTOR 0.00	0.	0.	0.
ALLISON CHANDLER 3473 BANKHEAD AVENUE MONTGOMERY, AL 36111	DIRECTOR 0.00	0.	0.	0.
EMILIE REID 3245 THOMAS AVENUE MONTGOMERY, AL 36106	DIRECTOR 0.00	0.	0.	0.
CAROL RICKARD 3130 JAMESTOWN DRIVE MONTGOMERY, AL 36111	DIRECTOR 0.00	0.	0.	0.

WORKING WOMAN'S HOME	ASSOCIATION, INC.		63-0	302186
MILLIE HOÙSTON 1867 GALENA AVENUE MONTGOMERY, AL 36106	DIRECTOR 0.00	0.	0.	0.
CAROL HODGES 2114 ALLENDALE ROAD MONTGOMERY, AL 36111	DIRECTOR 0.00	0.	0.	0.
MENELLE WEISS 2147 ALLENDALE ROAD MONTGOMERY, AL 36111	DIRECTOR 0.00	0.	0.	0.
SUZANNE DAVIDSON 3243 BANKHEAD AVENUE MONTGOMERY, AL 36106	DIRECTOR 0.00	0.	0.	0.
KATHIE MANGUM 2355 MIDFIELD MONTGOMERY, AL 36111	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 99	90-PF, PAGE 6, PART VIII	0.	0.	0.

FORM 990-PF

### GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 13

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

WINIFRED STAKELEY 3200 JASMINE ROAD MONTGOMERY, AL 36111

TELEPHONE NUMBER

334-239-5518

#### FORM AND CONTENT OF APPLICATIONS

COMPLETE THE PROJECT PROPOSAL FORM WHICH CAN BE FOUND ON THE FOUNDATION'S WEBSITE (WWW.WWHASSN.ORG) AND SUBMIT ALONG WITH IRS DETERMINATION LETTER OF 501(C)(3) STATUS, FINANCIAL STATEMENT FOR THE CURRENT YEAR AND MOST RECENT AUDIT, DETAILED PROPOSED BUDGET FOR THE ENTIRE PROJECT AND FOR FUNDS REQUESTED FROM WWHA.

ANY SUBMISSION DEADLINES

ANNUALLY BY JULY 31

RESTRICTIONS AND LIMITATIONS ON AWARDS

GEOGRAPHICAL - MONTGOMERY COUNTY, AL