# Form **990-PF**Department of the Treasury Internal Revenue Service

#### **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.

2016

•	Fore	caler	ndår year 2016 or tax year beginning MAY	1, 2016	, and ending	APR 30, 2017	
	Nar	ne o	f foundation			A Employer identification	number
			BIN FAMILY FOUNDATION,			26-0158564	
	Nun	nber a	and street (or P.O. box number if mail is not delivered to street	t address)	Room/suite	<b>B</b> Telephone number	
-	2	<u>55</u>	PORTER ROAD			706-356-28	62
	City	or t	own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is pe	nding, check here
-	M	AR	TIN, GA 30557				
	G C	heck	call that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations,	check here
			Final return	Amended return		0 -	
			Address change	Name change		Foreign organizations mee     check here and attach cor	nputation
	H C	heck	type of organization: X Section 501(c)(3) e.	xempt private foundation		E If private foundation stat	us was terminated
		] Se		Other taxable private found	ation	under section 507(b)(1)(	
	l Fa	ır ma	arket value of all assets at end of year   J Account	ing method: X Cash	Accrual	F If the foundation is in a 6	0-month termination
	(fr	om i	Part II, col. (c), line 16)	ther (specify)		under section 507(b)(1)(	
	<b>&gt;</b>	\$_	78,758 . (Part I, colu	ımn (d) must be on cash i	basis.)		
	Pa	ırt I	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	58,600.		N/A	
		2	Check If the foundation is not required to attach Sch. B				
		3	interest on savings and temporary cash investments				
		4	Dividends and interest from securities				
		5a	Gross rents				
		Ь	Net rental income or (loss)				
	4	6a	Net gain or (loss) from sale of assets not on line 10				
	Ę	b	Gross sales price for all assets on line 8a				
2017	Revenu	7	Capital gain net income (from Part IV, line 2)		0.		
	æ	8	Net short-term capital gain				
62		9	Income modifications				
		10a	Gross sales less returns and allowances				
AUG		b	Less Cost of goods sold				<del>-</del>
		С	Gross profit or (loss)				
		11	Other income				
¥.		12	Total. Add lines 1 through 11	58,600.	0.		
SCANNED		13	Compensation of officers, directors, trustees, etc	0.	0.		0.
3		14	Other employee salaries and wages				
Š		15	Pension plans, employee benefits				
	ses	16a	Legal fees				
	Expense	b	Accounting fees STMT 1	560.	0.		0.
	EX	C	Other professional fees				
	Operating and Administrative	17	Interest				
	rat	18	Taxes	ECEIVED	<u></u>		
	nist	19					
	Ē	20	Occupancy Travel, conferences, and meetings	L 2 1 2017 8			
	Ac	21	Travel, conferences, and meetings	L 2 1 2017  8			
	and	22	Printing and publications	88			
	ng :	23	Other expenses	GDEN IT			
	ati	24	Total operating and administrative	-,2,1,01			
	bei		expenses. Add lines 13 through 23	560	0.	,	<u> </u>
	0	25	Contributions, gifts, grants paid	38,500.			38,500.
		26	Total expenses and disbursements				
_			Add lines 24 and 25	39,060.	0.		38,500.
	- 1	27	Subtract line 26 from line 12:		· · · · · · · · · · · · · · · · · · ·		
		а	Excess of revenue over expenses and disbursements	19,540.			
		b	Net investment income (if negative, enter -0-)		0.		
	i	c	Adjusted net income (if negative, enter -0-)			N/A	

INC.

HARBIN FAMILY FOUNDATION

26-0158564

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	990-PF (2016) <b>HAR</b>	BIN :	FAMILY FOUND	ATION,	INC.				26-015	8564	Page 3
Par	t IV Capital Gains a	and Lo	sses for Tax on In	vestment	Income	T 41 3 11					
			nd(s) of property sold (e.g. or common stock, 200 shs			( <b>b)</b> H	low acquired · Purchase · Donation		Date acquired io , day, yr.)	( <b>d)</b> Da (mo., d	te sold ay, yr.)
1a											
b	NO!	NE				ļ					<del></del>
<u> </u>					·· - · · · · · · · · · · · · · · · · ·	<u> </u>					
<u>d</u>						<del> </del>	<del></del>				
e	(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis			(e)	(h) Gain or (loss ) plus (f) minus	) 'a)	
			(or anomabio)		,,ponoc o ca.c				, piec (//		
<u>a</u> b				<del></del>							
c		-									
d											
е											
C	omplete only for assets showin	g gain in	column (h) and owned by t	he foundation	on 12/31/69		_		ns (Col. (h) gain		
	(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				but not less that sses (from col. (		
a											
b											
C											
d		_				-				· · · · · ·	<del></del>
е	J									· · · · · · · · · · · · · · · · · · ·	<del> </del>
<b>2</b> Ca	pital gain net income or (net ca	pital loss)	If gain, also enter $\{$ If (loss), enter -0-	in Part I, line in Part I, line	7 7	}	2				
lf ç	t short-term capital gain or (los pain, also enter in Part I, line 8,			d (6):		}					
	loss), enter -0- in Part I, line 8  t V Qualification U	nder S	Section 4940(e) for	Reduced	Tax on Net	Inve	3   estment lr	ncom	ne		
	ptional use by domestic private		<del></del>								
נרטו ט	phonai use by domestic private	Touriuali	ons subject to the section 4	340(a) lax 011	net mvestment in	icome.	•)				
If sect	ion 4940(d)(2) applies, leave th	ııs part bl	ank.								
Was ti	ne foundation liable for the sect	ion 4942	tax on the distributable am	ount of any ye	ear in the base per	riod?				Yes	X No
If "Yes	," the foundation does not qual	ify under	section 4940(e). Do not coi	mplete this pa	rt.						····
	iter the appropriate amount in e					ntries.	ı				~-
	(a) Base period years		(b)			(c)			Dıstrıt (col. (b) dıv	(d) oution ratio	
Cal	endar year (or tax year beginnir	ng In)	Adjusted qualifying dist		Net value of no	nchar			(col. (b) div		
	2015			4,000.			51,17		<del> </del>		73555
	2014			1,750.			33,59				52093
	2013			0.			2,72 3,23				$\frac{00000}{00000}$
	2012	-		500.			3,47				43885
—	2011			300.			J, <del>1</del> 1	-		• 4	<del>4</del> 3003
2 To	tal of line 1, column (d)								2	. 4	69533
	erage distribution ratio for the 5	5-year bas	se period - divide the total o	n line 2 by 5,	or by the number	of yea	ırs				
	foundation has been in exister			,	•	•			3	. 0	93907
<b>4</b> En	ter the net value of noncharitab	le-use as	sets for 2016 from Part X, I	ine 5				<u> </u>	4	80	,262.
<b>5</b> Μι	ultiply line 4 by line 3								5	7	,537.
<b>6</b> En	ter 1% of net investment incom	ıe (1% of	Part I, line 27b)						6		0.
	d lines 5 and 6								7	7	,537.
	ter qualifying distributions from			1h o-d	lata that sad	n o 40	/ toy soto	L	8		<u>,500.</u>
	ine 8 is equal to or greater than e the Part VI instructions.	iine 7, ch	ieck the box in Part VI, line	io, and comp	iete that part usin	iy a 19	o tax rate.				

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Part			948	- see in	stru	ctio	ns)
	exempt operating foundations described in section 4940(d)(2), check here 🕨 🗔 and enter "N/A" on line						
D	Date of ruling or determination letter: (attach copy of letter if necessary-see instri	ictions)					_
<b>b</b> D	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗓 and enter	1%	1	<u>.                                    </u>	·		0.
	of Part I, line 27b						
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12,	col. (b). ノ					_
	Fax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2				<u>0.</u>
	Add lines 1 and 2		3				0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				<u>0.</u>
	Credits/Payments:						
	2016 estimated tax payments and 2015 overpayment credited to 2016		-				
	Exempt foreign organizations - tax withheld at source						
	Fax paid with application for extension of time to file (Form 8868)						
	Backup withholding erroneously withheld 6d		-				^
	Total credits and payments. Add lines 6a through 6d		7				<u>0.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	_	8				0.
	Fax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	D. C	10 11				
	t VII-A Statements Regarding Activities	Refunded	111				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it pai	ticinate or intervene	ın			Yes	No
	any political campaign?	ticipate of littervene		<u> </u>	1a		X
	any political campaigh? Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructio	one for the definition	12	-	1b	-	X
	f the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of an			<u> </u>			~~
	distributed by the foundation in connection with the activities	y matemate publici	100 01				
	Did the foundation file Form 1120-POL for this year?				1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation. $\triangleright$ \$ (2) On foundation managers. $\triangleright$ \$	0.					
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		-				
	managers. > \$ 0.						
	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		X
	f "Yes," attach a detailed description of the activities.						
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article	s of incorporation, o	or				
	oylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		X
4a D	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
	f "Yes," has it filed a tax return on Form 990-T for this year?		N	/A _	4b		
	Nas there a liquidation, termination, dissolution, or substantial contraction during the year?				5		_X_
lf	f "Yes," attach the statement required by General Instruction T						
6 A	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 or	onflict with the state	e law	1			
	remain in the governing instrument?			L	6	X	
7 D	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, co	ol. (c), and Part XV	′	_	7	X	
8a E	Enter the states to which the foundation reports or with which it is registered (see instructions) 🕨						
_	GA			]			
	f the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (o	or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			-	8b	X	
	s the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) of		ındar				
-	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XI			1	9		<u>X</u>
<b>10</b> D	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names	and addresses			10		X

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Part VII-B   Statements Regarding Activities for Which	Form 4/20 May Be I	Required (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	· ••	•	es X No	Ì	İ
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir				
any voter registration drive?			es X No	l	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No	1	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			l	- 1
4945(d)(4)(A)? (see instructions)		Ye	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or				- 1
the prevention of cruelty to children or animals?		Ye	es X No		
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify und	der the exceptions described	ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	nere			ļ	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	uned			Ì
expenditure responsibility for the grant?	Ŋ	√A	es No	l	1
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				Ì
a personal benefit contract?		Ye	s X No		-
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	☐ Ye	s X No		ľ
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Trust		nagers, Highly			<del></del>
Paid Employees, and Contractors	,	0 , 0 .	•		
List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	xpense int, other
(a) Name and address	nours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	accou	int, other wances
BARRON C. HARBIN	DIRECTOR	- 5.1.5. 5 7	00	-	
255 PORTER ROAD					
MARTIN, GA 30557	0.10	0.	0.		0.
<del></del>	DIRECTOR		0.		
255 PORTER ROAD	DIMECTOR				
MARTIN, GA 30557	0.10	0.	0.		0.
	DIRECTOR	0.			
71 GRANT DRIVE	DIRECTOR				
AVONIA, GA 30553	0.10	0.	0.		0
MAVONIA, GA 30333	0.10	- 0.	<u> </u>	<del></del>	0.
				[	
Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "		<del></del>	
Compensation of the mignest paid employees (eater than those me		The North	(d) Contributions to	(e) E	xnense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	accou	xpense nt, other
MONTE	devoted to position		compensation	allov	vances
NONE		]			
		]		J	
		<del> </del>			
		]			
				<b>_</b>	
		]		ļ	
		]			
				L	
otal number of other employees paid over \$50,000					0
			Form	990-P	<b>F</b> (2016)

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Part VIII Information About Officers, Directors, Trustees, Foundation Man Paid Employees, and Contractors (continued)	agers, Highly	
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		
	<del></del>	
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	on such as the	Expenses
1 SCHOLARSHIPS AWARDED TO CHILDREN OF HARBIN LUMBER	COMPANY,	
INC. EMPLOYEES		
		10,000.
2		
CDE CMA MENTAND O		26 500
SEE STATEMENT 2		26,500.
3		
4		
Dod IV B C		
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.	<del></del>	Amount
1 N/A		Amount
1 417 42		
2		
All all an average related any extension Consistency to the constant of the co	<del></del>	
All other program-related investments. See instructions.  3		
·		
		<del></del>
Total, Add lines 1 through 3		0.

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 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 0. ſа 484. b Average of monthly cash balances 1b c Fair market value of all other assets 1e 484. d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 0. Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 80,262. Minimum investment return. Enter 5% of line 5 4,013. Part XI | Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here 
and do not complete this part.) Minimum investment return from Part X, line 6 4,013. 2a Tax on investment income for 2016 from Part VI, line 5 Income tax for 2016. (This does not include the tax from Part VI.) Add lines 2a and 2b C 4,013. Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4,013. 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 4,013. Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 38,500. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) Cash distribution test (attach the required schedule) 3h 38,500. Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b Adjusted qualifying distributions Subtract line 5 from line 4 38,500. Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

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4940(e) reduction of tax in those years.

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,				
line 7		F		4,013.
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 326.				
<b>b</b> From 2012				
c From 2013	İ			
d From 2014 70.				
e From 2015 11,441.	Í			
f Total of lines 3a through e	11,837.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ► \$ 38,500.			_	
a Applied to 2015, but not more than line 2a			0.	
<b>b</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.			4 010
d Applied to 2016 distributable amount	24 407			4,013.
e Remaining amount distributed out of corpus	34,487.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	46,324.			
<b>b</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.	Į	
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	Ì			
corpus to satisfy requirements imposed by	1		ļ	
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	326.			
9 Excess distributions carryover to 2017				
Subtract lines 7 and 8 from line 6a	45,998.			
10 Analysis of line 9:	ļ			
a Excess from 2012				
b Excess from 2013				
c Excess from 2014 70.				
d Excess from 2015 e Excess from 2016 2016 2017 2018 2019 2019 2019 2019 2019 2019 2019 2019				
e Excess from 2016 34,487.	<u></u>			Form <b>990-PF</b> (2016)
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	FAMILY FOUN				L58564 Page 10
Part XIV Private Operating F	<del></del>		-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo		=		1040()(0) 07	040()(5)
b Check box to indicate whether the found		ng foundation described i		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2016	(b) 2015	Prior 3 years (c) 2014	(d) 2013	(e) Total
income from Part I or the minimum	(a) 2010	(b) 2010	(6) 2014	(4) 2010	(6) 10181
investment return from Part X for	1				
each year listed			<del></del>	<del> </del>	<del> </del>
b 85% of line 2a					<del> </del>
c Qualifying distributions from Part XII,	1				
line 4 for each year listed					<del></del>
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					<del> </del>
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					<u> </u>
(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)				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					
Part XV Supplementary Info	rmation (Comple	te this part only	f the foundation	had \$5,000 or m	ore in assets
at any time during t	he year-see instr	ructions.)		•	
Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	_	than 2% of the total contr	butions received by the	foundation before the clo	ose of any tax
year (but only if they have contributed n					
NONE					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation (	or an equally large porti	on of the ownership of a r	partnership or
other entity) of which the foundation has				он от ньо отногом <b>р</b> от а р	
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
		• • •	•	not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber or e-mail address of t	he person to whom appli	cations should be addre	ssed:	
a The name, and cook, and conspired them		рогоот то ттот аррт			
SEE STATEMENT 3					
<b>b</b> The form in which applications should b	e submitted and informat	ion and materials they sh	ould include:		
c Any submission deadlines;					
d Any restrictions or limitations on awards	s, such as by geographica	il areas, charitable fields,	kinds of institutions, or i	other factors:	

623601 11-23-16

Form **990-PF** (2016)

inter gross amounts unless otherwise indicated.	Unrelated	business income		d by section 512, 513, or 514	(e)
<b>3</b>	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion code	Amount	function income
a					
b					
C	1 1				
d					
e					
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			- <u>-</u>		
5 Net rental income or (loss) from real estate:			ļ <u> </u>		· · · · · · · · · · · · · · · · · · ·
a Debt-financed property					
b Not debt-financed property					<del></del>
6 Net rental income or (loss) from personal					
property					
7 Other investment income			<b> </b>		
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory			<u> </u>		
1 Other revenue:					
a	_				
b	_				
C	_		<del>  </del>		
d	_				
e	_		<b></b>		
2 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0.	<u> </u>	0.	0.
3 Total Add line 12, columns (b), (d), and (e)				13	0
See worksheet in line 13 instructions to verify calculations.	)				
Part XVI-B Relationship of Activities	s to the Accon	nplishment of Ex	cempt l	Purposes	
	<del></del>	( ) (D ) (0)			
Line No. Explain below how each activity for which in			contribut	ed importantly to the accom	plishment of
the foundation's exempt purposes (other the	an by providing lune	s for Such purposes).			
					· · · · · ·
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X

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26-0158564 HARBIN FAMILY FOUNDATION, INC. Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) (2) Other assets 1a(2) b Other transactions: (1) Sales of assets to a noncharitable exempt organization 16(1) 1b(2) (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets 1b(3) 1b(4) (4) Reimbursement arrangements (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship

	N/A				
	Under penalties of periory declare that I have examined the and belief, it is true correct, and complete. Declaration of p				return with the preparer
Here	Superior of officer or trustee	<u>7 - 17 - 17</u> Date	DIRECT	ror	shown below (see instr )?  X Yes N
Paid	Print/Type preparer's name  ALESIA B. BURCH	Preparer's signature  Alisia A. Burch	Date 0.7 / 1.0 / 1.7	Check if self- employed	P100035734
Prepa Use O	rer Firm's name ► BURCH, CROOM		07/10/11		6-1582736
	Firm's address ▶ P.O. BOX 7' HARTWELL,			Phone no. 70	6-376-3168

## 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 1545-0047

2016

Name of the organization

Employer identification number

	HARBIN FAMILY FOUNDATION, INC.	26-0158564
Organization ty	pe(check one):	
Filers of:	Section:	
Form 990 or 990	0-EZ 501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt chantable trust not treated as a private foundation	пс
	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	
-	ganization is covered by the <b>General Rule</b> or a <b>Special Rule.</b> ction 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Sp	pecial Rule See instructions.
General Rule		
	organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions by from any one contributor. Complete Parts I and II. See instructions for determining a contributor.	-
Special Rules		
section any one	organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% is 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line e contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of thorm 990-EZ, line 1 Complete Parts I and II	13, 16a, or 16b, and that received from
year, to	organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received in tall contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, wention of cruelty to children or animals Complete Parts I, II, and III	
year, co is checl purpose	organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that receive ontributions exclusively for religious, charitable, etc., purposes, but no such contributions to ked, enter here the total contributions that were received during the year for an exclusively e. Don't complete any of the parts unless the General Rule applies to this organization becas, charitable, etc., contributions totaling \$5,000 or more during the year	otaled more than \$1,000 If this box religious, charitable, etc ,
but it must answ	anization that isn't covered by the General Rule and/or the Special Rules doesn't file Scheover "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or esn't meet 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

## HARBIN FAMILY FOUNDATION, INC.

26-0158564

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	HARBIN LUMBER COMPANY, INC.  560 SMITH ROAD  LAVONIA, GA 30553	\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
i		\$	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 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
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions)
23452 10-1	3-16	Schedule B (Form	990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

## HARBIN FAMILY FOUNDATION, INC.

26-0158564

Part II	Noncash Property (See instructions) Use duplicate copies of I	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	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
Part I			
		\$	990, 990-EZ, or 990-PF) (

ĺ	Page	4

Employer identification number

	FAMILY FOUNDATION, INC	ibusione se granitatione decarted	26-0158564				
t III	the year from any one contributor. Complete c	nitions to organizations described	in section 501(c)(7), (8), or (10) that total more than \$1,000 to				
	completing Part III, enter the total of exclusively religious	. charitable, etc., contributions of \$1,000 or	r less for the year (Enter this info once) \$				
	Use duplicate copies of Part III if additional	I space is needed.	, ,				
No.							
m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
<u>t I</u>							
-							
_   _							
-							
-	(e) Transfer of gift						
	(c) Transier of Sire						
- {		Deletionality of topology at the first					
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
_							
-							
No.							
m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
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		(e) Transfer of gift	+				
		(e) Transier or gir	<b>L</b>				
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<u> </u>	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
1_							
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No.							
No. m	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
<u>t I   </u>							
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	(e) Transfer of gift						
	(६) मधाठाखा जा पुतार						
	Townstown to make a delicate and	-1.71D - 4	Deletionable of two of such to the material				
<u> </u>	Transferee's name, address, an	0 ZIP + 4	Relationship of transferor to transferee				
_							
_							
No.							
10.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
n							
n t I	1						
m t i							
m   -							
m t i							
m t i							
m   -		(e) Transfer of oiff					
		(e) Transfer of giff	t				
m	T	, , ,					
No. m t i —	Transferee's name, address, an	, , ,	t Relationship of transferor to transferee				
tl -	Transferee's name, address, an	, , ,					
	Transferee's name, address, an	, , ,					

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor CASEY LONG NONE N/A EDUCATION SCHOLARSHIP 100 ROBERT WOODS LANE 750. LAVONIA, GA 30553 GARRETT LECROY NONE N/A EDUCATION SCHOLARSHIP 4855 STONEBRIDGE ROAD LAVONIA, GA 30553 750. N/A HALEY LONG NONE EDUCATION SCHOLARSHIP 100 ROBERT WOODS LANE LAVONIA, GA 30553 750. MICHAEL IFFLAND EDUCATION SCHOLARSHIP NONE N/A 110 OVERLAND DRIVE ANDERSON SC 29625 750. KATHERINE LANE HUNT NONE N/A EDUCATION SCHOLARSHIP 188 GREER LANE TOCCOA GA 30577 750. LUCY LONG NONE N/A EDUCATION SCHOLARSHIP 100 ROBERT WOODS LANE LAVONIA, GA 30553 750. EDUCATION SCHOLARSHIP MICHAELA LACOUNT NONE N/A 27 RED HILL SCHOOL ROAD CARNESVILLE, GA 30521 750. NORTHEAST GEORGIA COURT APPOINTED NONE CHARITABLE PROVIDES LEGAL SPECIAL ADVOCATES ORGANIZATION REPRESENTATION TO 221 NORTH BROAD STREET PROTECT THE RIGHTS OF TOCCOA, GA 30577 CHILDREN IN FOSTER CARE 1,000. NONE PENFIELD CHRISTIAN HOMES, INC. CHARITABLE PROVIDES RESIDENTIAL 1061 MERCER CIRCLE ORGANIZATION DRUG ADDICTION UNION POINT, GA 30669 TREATMENT FACILITIES. 5,000. KIRBY MOON NONE N/A EDUCATION SCHOLARSHIP 456 LAKE PLACE DRIVE LAVONIA, GA 30553 750. Total from continuation sheets 35,250.

Part XV Supplementary Information	n			
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
ALLY RIDLING	NONE	N/A	EDUCATION SCHOLARSHIP	
545 HARDENAB FARM ROAD				
CARNESVILLE, GA 30521				75
FRANKLIN COUNTY HABITAT FOR HUMANITY	NONE	CHARITABLE	BUILDS AND IMPROVES	
1929 AUGUSTA ROAD		ORGANIZATION	HOMES IN PARTNERSHIP	
AVONIA, GA 30553			WITH INDIVIDUALS AND	
			FAMILIES IN NEED OF A	
			DECENT AND AFFORDABLE	2,00
ATHENS AREA HABITAT FOR HUMANITY	NONE	CHARITABLE	BUILDS AND IMPROVES	
532 BARBER STREET		ORGANIZATION	HOMES IN PARTNERSHIP	
ATHENS, GA 30601			WITH INDIVIDUALS AND	
			FAMILIES IN NEED OF A	
		<u> </u>	DECENT AND AFFORDABLE	2,00
GREENE COUNTY HABITAT FOR HUMANITY	NONE	CHARITABLE	BUILDS AND IMPROVES	
P.O. BOX 321		ORGANIZATION	HOMES IN PARTNERSHIP	
GREENSBORO, GA 30642			WITH INDIVIDUALS AND	
,			FAMILIES IN NEED OF A	
			DECENT AND AFFORDABLE	2,00
CLEMSON UNIVERSITY HABITAT FOR	NONE	CHARITABLE	BUILDS AND IMPROVES	
HUMANITY		ORGANIZATION	HOMES IN PARTNERSHIP	
111 SLOAN STREET			WITH INDIVIDUALS AND	
CLEMSON, SC 29631			FAMILIES IN NEED OF A	
,			DECENT AND AFFORDABLE	2.00
REINS OF LIFE	NONE	CHARITABLE	PROVIDES MENTAL	
1238 SILVER SHOALS ROAD		ORGANIZATION	PHYSICAL, EMOTIONAL,	
EASTANOLLEE, GA 30538			BEHAVIORAL, AND	
·			SPIRITUAL HEALING BY	
			HARNESSING THE	50
FRANKLIN COUNTY RELAY FOR LIFE	NONE	CHARITABLE	FUNDRAISING EVENT TO	
2565 THOMPSON BRIDGE ROAD		ORGANIZATION	FIGHT CANCER.	
GAINESVILLE, GA 30501				1,00
POWER OF HOPE	NONE	CHARITABLE	PROVIDES EDUCATION AND	
P.O. BOX 286		ORGANIZATION	SUPPORT TO PEOPLE IN	
AVONIA, GA 30553			FRANKLIN, HART AND	
			STEPHENS COUNTY,	
			GEORGIA WHO HAVE BEEN	1,000
CAMP TOCCOA AT CURRAHEE	NONE	CHARITABLE	YOUTH DEVELOPMENT	
351 AYERSVILLE ROAD		ORGANIZATION	ORGANIZATION THAT	
OCCOA, GA 30577			ENGAGES YOUTH THROUGH	
			SUMMER CAMPS, OUT OF	
			SCHOOL TIME PROGRAMS	12,000

623655 04-01-18

FORM 99Q-PF	ACCOUNTI	S:	STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITA PURPOS	
LEGAL AND PROFESSIONAL FEES	560.	0.			0.
TO FORM 990-PF, PG 1, LN 16B	560.	0.			0.
ACTIVITY TWO				-	
PROVIDE FUNDS FOR DAY CARE CE NURSING HOMES, PRIVATE SCHOOL INCLUDE THE SPREAD OF THE GOS PEOPLE	S OR OTHER	ORGANIZATIONS	THAT		
				EXPENSES	
TO FORM 990-PF, PART IX-A, LI	NE 2		<del></del>	26,5	00.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

3

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

BARRON C. HARBIN 255 PORTER ROAD MARTIN, GA 30557

TELEPHONE NUMBER

706-356-2862

FORM AND CONTENT OF APPLICATIONS

APPLICATIONS ARE OBTAINED FROM BARRON C. HARBIN, DIRECTOR

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

EDUCATIONAL SCHOLARSHIPS ARE AWARDED TO CHILDREN OF HARBIN LUMBER COMPANY, INC. EMPLOYEES WHO ARE HIGH SCHOOL SENIORS AND WHO PLAN TO ATTEND AN EDUCATIONAL INSTITUTION.