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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491242004097

2016

OMB No 1545-0052

**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 instructions is at <a href="www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

Open to Public Inspection

		ndar year 2016, or tax year beginning 05-01-20	016 , aı	nd en	nding 04-30-		
MA		indation EN & GOFF BEACH FAMILY ION			39-1888573	entification numbe	er
		l street (or P O box number if mail is not delivered to street address DER DRIVE	<b>B</b> Telephone number (see instructions) (608) 244-5186				
		, state or province, country, and ZIP or foreign postal code NI 53704			<b>C</b> If exemption	application is pendir	g, check here
		☐ Final return ☐ Amended return ☐ Address change ☐ Name change			2. Foreign or test, chec	ganizations, check h rganizations meeting k here and attach co indation status was	the 85%
_	,	pe of organization Section 501(c)(3) exempt private a 4947(a)(1) nonexempt charitable trust Dother taxable			under sectio	n 507(b)(1)(A), che	ck here 🕨 🗀
Fai of	r mark year <i>(f</i>	xet value of all assets at end from Part II, col (c), \$ 1,695,684	☑ Cash ☐ Accru	ıal		ation is in a 60-mont n 507(b)(1)(B), ched	
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)					
	2	Check ► ✓ if the foundation is <b>not</b> required to attach Sch B					
	3 4	Interest on savings and temporary cash investments  Dividends and interest from securities	43,525		43,525		
	5a	Gross rents	43,323		+3,323		
	ь	Net rental income or (loss)	_				
KIE	6a	Net gain or (loss) from sale of assets not on line 10	13,467				
Revenue	ь 7	Gross sales price for all assets on line 6a 23,866 Capital gain net income (from Part IV, line 2)	5		13,467		
_	8	Net short-term capital gain					
	9	Income modifications					
	<b>10</b> a b	Gross sales less returns and allowances Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	1,583		1,583		
	12	Total. Add lines 1 through 11	58,575		58,575		
	13	Compensation of officers, directors, trustees, etc	0		0		(
	14 15	Other employee salaries and wages					
156	16a	Legal fees (attach schedule)					
<u> </u>	ь	Accounting fees (attach schedule)	1,152		0		
Operating and Administrative Expenses	c	Other professional fees (attach schedule)					
tive.	17	Interest					
tra	18	Taxes (attach schedule) (see instructions)	3,097		87		(
≣	19	Depreciation (attach schedule) and depletion					
Ę	20	Occupancy					
<b>Φ</b>	21	Travel, conferences, and meetings					
등	22	Printing and publications					
Ď.	23	Other expenses (attach schedule)					
erat	24	Total operating and administrative expenses.  Add lines 13 through 23	4,249		87		]
ă O	25	Contributions, gifts, grants paid	75,000	-	87		75,000
	26	Total expenses and disbursements. Add lines 24 and 25	79,249		87		75,000
	27	Subtract line 26 from line 12	7.5,245				, 3,000
	a	Excess of revenue over expenses and disbursements	-20,674				
	Ь	Net investment income (if negative, enter -0-)			58,488		1
For	C	Adjusted net income(If negative, enter -0-)		Щ,	Cat No. 11289	<u> </u>	m <b>990-PF</b> (2016

842,689

842 689

842,689

842,689

822,015

822 015

822.015

822,015

2

3

4

5

6

842,689

-20,674

822,015

822,015

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0

0

1,695,684

Less accumulated depreciation (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . . .

Foundations that follow SFAS 117, check here ▶ ✓

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg , and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Analysis of Changes in Net Assets or Fund Balances

Total assets (to be completed by all filers—see the

Other assets (describe > \_

Other liabilities (describe -

Unrestricted

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a . . . . . .

Other increases not included in line 2 (itemize) ▶ \_\_\_\_\_

instructions Also, see page 1, item I)

15 16

17 18

19

20 21

22

23

24

25

26

28 29

31

Part III

2 3

Liabilities

Balances

Fund

ō

Assets 27

Net 30

Page **3** 

	<b>(a)</b> he kınd(s) of property sold (e g , re house, or common stock, 200 shs	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )	
1 a PFIZER		2017-03-08			
b					
С					
d					
e					
	(f)		(g)	,	h)
(e)	Depreciation allowed		other basis		or (loss)
Gross sales price	(or allowable)	plus exp	ense of sale	(e) plus (f	) minus (g)
a 23	3,866		10,39	9	13,467
b					
c					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69	,	
	(j)		(k)		h) gain minus
(i) F M V as of 12/31/69	Adjusted basis		of col (ı)	col (k), but not	less than -0-) or
FM V as 01 12/31/09	as of 12/31/69	over co	l (ʒ), ıf any	Losses (fr	om col (h))
a					13,467
b					
c					
d					
e					
· -	ain or (loss) as defined in sections t I, line 8, column (c) (see instructi		·	3	13,467
Part V Qualification U	nder Section 4940(e) for Re	duced Tay on Net	Tnyestment T	ncome	
(For optional use by domestic pr	rivate foundations subject to the sec	ction 4940(a) tax on ne	et investment inco	me )	
If section 4940(d)(2) applies, lea	ave this part blank				
	e section 4942 tax on the distributa t qualify under section 4940(e) Do			d? 🗌 Y	es 🗹 No
	ount in each column for each year,			es	
(a)	,			(d)	
Base period years Calendar	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	ole-use assets	Distribution rat	
year (or tax year beginning in)			1 507 175	(col (b) divided by o	
2015	71,125		1,507,175		0 047191 0 044459
2014	64,215		1,444,367		
2013	56,800 52,200		1,329,001		0 042739 0 042723
2012	· · · · · · · · · · · · · · · · · · ·		1,126,136		0 042723
	45,500			1	-
2 Total of line 1, column (d			2		0 217516
number of years the found	for the 5-year base period—divide dation has been in existence if less acharitable-use assets for 2016 fron	than 5 years	, or by the		0 043503 1,616,162
5 Multiply line 4 by line 3		•	5		70,308
	nt income (1% of Part I, line 27b)		6		<u> </u>
	incline (1% of Part I, line 2/b)				585
7 Add lines 5 and 6	· · · · · · · · · · · · · · · · · · ·		7		70,893
If line 8 is equal to or gre	ons from Part XII, line 4    ,    .   . ater than line 7, check the box in Pa		<u>8</u> oplete that part us	  ing a 1% tax rate Se	75,000 e the Part VI
Instructions				Fo	orm <b>990-PF</b> (2016)

Form 990-PF (2016)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional service	ces (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		• 0
Part IX-A Summary of Direct Charitable Activities		_
List the foundation's four largest direct charitable activities during the tax year Include rel		r of Expenses
organizations and other beneficiaries served, conferences convened, research papers produ	uced, etc	
1		
		<del> </del>
2		<del> </del>
2		<del> </del>
2		
3		<del> </del>
		<del> </del>
4		
4		
Part IX-B Summary of Program-Related Investments (see	<u> </u>	
Describe the two largest program-related investments made by the foundation during t	the tax year on lines 1 and 2	Amount
1		
2		+
2		
All other program-related investments. See instructions		
all other program-related investments. See instructions		
<u> </u>		
Total. Add lines 1 through 3		<b>▶</b> 0
		Form <b>990-PF</b> (2016)

1b

2

За 3b

4

5

75.000

74,415

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585

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

Page 9

80.223

3.740

76,483

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**b** Total for prior years

XII, line 4 ▶ \$

indicated below:

From 2011. . . . . **b** From 2012. . . . . c From 2013. . . **d** From 2014. . . . . e From 2015. . . . .

2 Undistributed income, if any, as of the end of 2016

a Enter amount for 2015 only. . . . . .

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e. . . . . . . 4 Qualifying distributions for 2016 from Part

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

6 Enter the net total of each column as

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.

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. . .

Subtract lines 7 and 8 from line 6a . . . . . .

**5** Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

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 . . . . .

same amount must be shown in column (a) )

(a)

Corpus

0

(b)

Years prior to 2015

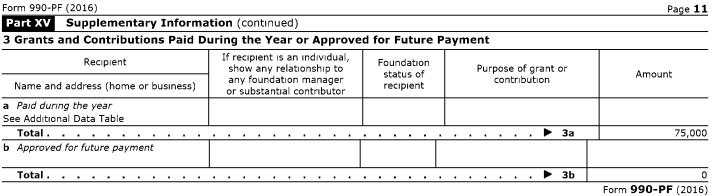
(c)

2015

71,260

ľ	art yttt	Unaistric	uteu	Inc	ome	(see	1115
1	Distributable	amount for	2016	from	Part >	(I, lın	e 7

orm 990-PF (20	016)
Part XIII	Undistributed Income (see instructions)



	Activities				
Enter gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions )
a b					
c d					
e f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
Dividends and interest from securities.     Net rental income or (loss) from real estate			14	43,525	
a Debt-financed property					
<ul><li>b Not debt-financed property</li><li>6 Net rental income or (loss) from personal property</li></ul>					
7 Other investment income 8 Gain or (loss) from sales of assets other than			15	1,583	
inventory			18	13,467	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a b					
c d					
e					
<ul><li>12 Subtotal Add columns (b), (d), and (e).</li><li>13 Total. Add line 12, columns (b), (d), and (e).</li></ul>				58,575 <b>3</b>	0 58,575
(See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activities to the	ns )				
			P		
Line No. Explain below how each activities to the the accomplishment of the foundation's explain the accomplishment of the foundation of the foundation's explain the accomplishment of the foundation of	income is report	ed in column (e) o			
Line No. Explain below how each activity for which the accomplishment of the foundation's ex	income is report	ed in column (e) o			
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Line No. Explain below how each activity for which the accomplishment of the foundation's ex	income is report	ed in column (e) o		n purposes) (Sée	rm <b>990-PF</b> (2016)

Information Regarding Transfers To and Transactions and Relationships With Noncharitable

Part	XVI	Exempt Orga	-	rans	rers 10 a	and Iransaction	ons and	а кеіатіо	nsnips with Noi	ncnarita	oie		
		rganization directly o Code (other than se	r indirectly enga							on 501		Yes	No
<b>a</b> Tra	nsfers	from the reporting fo	oundation to a r	oncha	ırıtable ex	empt organization	n of						
(1) Cash										. 1	a(1)		No
(2) Other assets											a(2)		No
<b>b</b> Oth	er tra	nsactions											
(1)	Sale	s of assets to a noncl	naritable exemp	t orga	ınızatıon.					1	b(1)		No
(2)	Purc	hases of assets from	a noncharitable	exem	pt organi	zation				1	b(2)		No
(3)	Rent	tal of facilities, equipr	ment, or other a	ssets.						1	b(3)		No
(4)	Rein	nbursement arrangen	nents							. 1	b(4)		No
(5)	Loar	ns or Ioan guarantees								. 1	b(5)		No
(6)	Perfo	rmance of services o	r membership o	r fund	raising so	licitations				. 1	b(6)		No
<b>c</b> Sha	arıng o	of facilities, equipmen	t, mailing lists,	other	assets, or	paid employees.					1c		No
		swer to any of the abo									ue		
		ods, other assets, or ansaction or sharing a											
ın a	iny tra	insaction or snaring a	irrangement, sn	ow in	column (c	u) the value of th	e goods,	other asse	its, or services recei	vea			
(a) Line	e No	(b) Amount involved	(c) Name of	nonch	arıtable exe	mpt organization	<b>(d)</b> D	escription of	transfers, transactions,	, and sharin	g arra	ngemen	its
	-												
	-												
	-												
<b>2a</b> Is t	he fou	ındatıon dırectly or ın	directly affiliate	d with	, or relate	ed to, one or more	tax-exe	empt organ	ızatıons				
des	cribed	I in section 501(c) of	the Code (other	than	section 50	01(c)(3)) or in sec	tion 527	77		🗆	Yes	<b>✓</b> N	lo
		complete the followin	•			,,,,,							
	,	(a) Name of organiz	-		(	<b>b)</b> Type of organizat	ion		(c) Description	of relations	hıp		
		der penalties of perju											
c:~~		ny knowledge and be ch preparer has any		orrect	, and com	piete Declaration	or prep	arer (otner	than taxpayer) is be	ased on all	Intol	matior	1 от
Sign		*****	Kilomeage			2017-08-30		*****	F	May the IRS	discus	ss this re	eturn
Here						2017-08-30	<u> </u>			with the pre			
	7	Signature of officer of	or trustee			Date	,	Title	(	(see instr )?	<b>✓</b> Y	es 🗆 N	lo
	1			Ι_									
		Print/Type prepar	er's name	Prep	arer's Sıgı	nature	Date		Check if self-	PTIN			
									employed ▶ □	PC	1216	889	
Paid		TIMOTHY P ISO	М СРА										
Prep	aro	r											
Use		THILL STIGHT F	YERS ISOM & A	SSOC	IATES CP	AS PLLC				Fırm's EIN	▶56	-20047	785
USE	Oilly	Firm's address ►	PO BOX 1752										
		. IIIII 5 dadi C55 P	. 5 55% 1752							Phone no	(336	/ 883°.	1375
			HIGH POINT, N	IC 27	261					. Hone HU	,550	, 5053.	/-

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient						
a Paid during the year								
BOCA GRANDE HEALTH CLINIC FOUNDATION PO BOX 2340 BOCA GRANDE, FL 33921	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000				
CHARLESTON AREA THERAPEUTIC RIDING PO BOX 146 JOHNS ISLAND, SC 29457	NONE	PUBLIC CHARITY	UNRESTRICTED	5,000				
CHILDREN OF VIETNAM 817 WEST END BOULEVARD WINSTONSALEM, NC 27101	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000				
DAIS 2102 FORDEM AVE MADISON, WI 53704	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000				
EVANS SCHOLARS FOUNDATION PO BOX 301 GOLF, IL 60029	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000				

3a

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
FRIENDS OF BOCA GRANDE COMMUNITY CENTER PO BOX 1222 BOCA GRANDE, FL 33921	NONE	PUBLIC CHARITY	UNRESTRICTED	2,500
GICIA PO BOX 446 BOCA GRANDE, FL 33921	NONE	PUBLIC CHARITY	UNRESTRICTED	2,000
GOODMAN COMMUNITY CENTER 149 WAUBESA STREET MADISON, WI 53704	NONE	PUBLIC CHARITY	UNRESTRICTED	3,000
THOMPSON CEMETERY ASSOCIATION 2841 REYNOLDS DRIVE WINSTONSALEM, NC 27104	NONE	PUBLIC CHARITY	UNRESTRICTED	5,000
MADISON MUSEUM OF CONTEMPORARY ART PO BOX 14385 MADISON, WI 53708	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient						
a Paid during the year								
OLBRICH BOTANCIAL SOCIETY 3330 ATWOOD AVENUE MADISON, WI 53704	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000				
OVERTURE CENTER FOR THE ARTS 201 STATE STREET MADISON, WI 53703	NONE	PUBLIC CHARITY	UNRESTRICTED	5,000				
SHAW FESTIVAL FOUNDATION PO BOX 628 LEWISTON, NY 14092	NONE	PUBLIC CHARITY	UNRESTRICTED	2,000				
UNITED WAY OF DANE COUNTY PO BOX 7548 MADISON, WI 53707	NONE	PUBLIC CHARITY	UNRESTRICTED	12,000				
UNIVERSITY OF WISCONSIN FOUNDATION LOCKBOX 78807 MILWAUKEE, WI 53278	NONE	PUBLIC CHARITY	DAVID WALSH RESEARCH FELLOWSHIP	6,000				

За

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year UNIVERSITY OF WISCONSIN NONE PUBLIC. UNRESTRICTED 2,000 **FOUNDATION** CHARITY LOCKBOX 78807 MILWAUKEE, WI 53278 VILLAGE OF MAPLE BLUFF NONE DOMESTIC RECREATION FACILITIES 5,000 18 OXFORD PLACE GOVERNMENT MADISON, WI 53704 NONE **PUBLIC** VSA WISCONSIN UNRESTRICTED 1,000 2,000 1,000

1709 ABERG AVE STE 1 MADISON, WI 53704		CHARITY		
CARBONE CANCER CENTER 600 HIGHLAND AVENUE K4/658 MADISON, WI 53792	NONE	PUBLIC CHARITY	UNRESTRICTED	
AMERICAN FAMILY CHILDREN'S HOSPITAL	NONE	PUBLIC CHARITY	UNRESTRICTED	

600 HIGHLAND AVENUE

MADISON, WI 53792 75,000 Total .

3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NAMI WISCONSIN NONE PUBLIC. UNRESTRICTED 3,000 4233 WEST BELTLINE HIGHWAY CHARITY MADISON, WI 53711 NONE 1,500 WISCONSON HISTORICAL FOUNDATION PUBLIC UNRESTRICTED PO BOX 260050 CHARITY MADISON, WI 53726 1,000 1,500

•			
FIRST TEE OF SOUTH CENTRAL WISCONSIN 5501 SCHROEDER RD STE 100 MADISON, WI 53711	NONE	PUBLIC CHARITY	UNRESTRICTED
UNC SCHOOL OF THE ARTS FOUNDATION 1533 SOUTH MAIN ST	NONE	PUBLIC CHARITY	UNRESTRICTED

FOUNDATION 1533 SOUTH MAIN ST WINSTONSALEM, NC 27127		CHARITY		
UNITED WAY OF FORSYTH COUNTY	NONE	PUBLIC	UNRESTRICTED	

WINSTONSALEM, NC 27127				
UNITED WAY OF FORSYTH COUNTY 301 NORTH MAIN ST STE 1700	NONE	PUBLIC CHARITY	UNRESTRICTED	1

WINSTONSALEM, NC 27101

Total . 3a

75,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SAN DIEGO FOUNDATION NONE PUBLIC UNRESTRICTED 5.000

PET HELPERS 1447 FOLLY ROAD CHARLESTON, SC 29412	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000
SAN DIEGO, CA 92106				

CHARITY

75,000

2508 HISTORIC DECATUR RD STE 200

Total . За

BIG BROTHERS AND SISTERS OF MILWAUKEE 788 JEFFERSON ST STE 600 MILWAUKEE, WI 53202	NONE	PUBLIC CHARITY	UNRESTRICTED	1,000
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BIG BROTHERS AND SISTERS OF MILWAUKEE 788 JEFFERSON ST STE 600 MILWAUKEE, WI 53202	NONE	PUBLIC CHARITY	UNRESTRICTED	1,00
<u> </u>				

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TY 2016 Accounting Fe	TY 2016 Accounting Fees Schedule							
	Name: MARY ELLEN & GOFF BEACH FAMILY							
	FOUNDATION							
	EIN:	39-1888573						
Category	Amo	ount Ne	et Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			

Category	Amount	Net Investment Income	Adjusted Net Income	Disburse for Chai
				D

1,152

MYERS, ISOM & ASSOCIATES, CPAS

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TV 2016 Investments Compared	Charle Calandella	

## **TY 2016 Investments Corporate Stock Schedule**

Name: MARY ELLEN & GOFF BEACH FAMILY

FOUNDATION

EIN: 39-1888573				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
WALT DISNEY CO	45,795	115,600		
ALTRIA GROUP	51,806	229,696		
KRAFT HEINZ CO	44,640	108,468		
MCDONALDS CORP	55,585	83,958		
MICROSOFT CORP	56,422	136,920		
MONDELEZ INTL INC	38,678	90,060		
PEPSICO INC	6,948	135,936		
PFIZER	145,579	332,416		
PHILIP MORRIS INTL INC	2,862	77,588		
APPLE INC	58,062	71,825		
BB&T CORP	78,574	86,360		
EXXON MOBIL CORP	94,149	97,980		
US BANCORP DE	89,513	102,560		

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TY 2016 Investments - Other S	Schedule		<del>-</del>
Name:	MARY ELLEN & GOI	FF BEACH FAMILY	
	FOUNDATION		

<b>EIN:</b> 39-18885/3					
Category/ Item	End of Year Fair Market Value				
MINERAL INTERESTS IN JASPER CTY ILL	AT COST	35,000	7,915		

Name: MARY FILEN & GOFF BEACH FAMILY

FOUNDATION

**EIN:** 39-1888573

Other Income Schedule							
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted				

ed Net Income

1,583

1,583

DLN: 93491242004097

ROYALTIES - PLAINS AND CITATION

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TY 2016 Taxes Schedule						
				•		
Name: MARY ELLEN & GOFF BEACH FAMILY						
	FOUNDATION					
<b>EIN:</b> 39-1888573						
Category	Amount	Net Investment	Adjusted Net	Disbursements		
		Income	Income	for Charitable Purposes		
PROPERTY TAX - ROYALTY PROPERTY	87	87		0		
INCOME TAXES	3,010	0		0		